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THE EFFECTS OF CHILDHOOD PARENTAL LOSS ON ADULTHOOD ACCORDING TO GENDER BETWEEN CHILD-PARENT IN SOUTH AFRICA.

UNIVERSITY OF THE WITWATERSRAND, JOHANNESBURG

A RESEARCH PROJECT SUBMITTED IN PARTIAL FULFILMENT OF THE REQUIREMENTS FOR THE DEGREE OF MASTERS (SOCIOLOGY) IN THE FACULTY OF HUMANITIES, UNIVERSITY OF THE WITWATERSRAND, JOHANNESBURG

by

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MARCH 2022

PLAGIARISM DECLARATION

University of the Witwatersrand, Johannesburg

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SENATE PLAGIARISM POLICY

I, Angie Meg Nel, (Student number: 1644331), am a student registered for Master of Arts by Coursework and Research Report, in Sociology in the year(s) 2021 - 2022. I hereby declare the following:

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Thus, I declare that this research project is my own, unaided work. It is being submitted for my Master of Arts in Sociology degree at the University of the Witwatersrand, Johannesburg. It has not been submitted before for any other degree or examination at this, or any other university.

Angie Meg Nel

Signed: **Date:**_15 March 2022_

DEDICATION

I dedicate this work to all those who have lost a parent throughout their childhood, whether they experienced a positive or negative outcome thereafter. May we come together and work through it together as we have all lost something and may those lost, never be forgotten.

ACKNOWLEDGEMENTS

I wish to express my sincere appreciation to my supervisor, Dr. Ben Scully, who has sacrificed his time and who has guided and encouraged me throughout this research project. Without his persistent help, the goal of this research project would not have been attainable. I would also like to express my appreciation to my dad, Lukas Nel for supporting me and pushing me throughout this degree to the best of my abilities.

ABSTRACT

Numerous studies show that losing a parent during childhood has various effects on adulthood and this is a global phenomenon. These effects could be negative or positive, however, the prevalence thereof within the different parent-child gender relationships is unknown. Thus, this study aimed to assess the effects that childhood parental loss has on adulthood in South Africa and specifically what differences occurred pertaining to the loss of the same-gendered parent compared to the loss of the opposite-gendered parent. The sample data was obtained through semi-structured interviews and thus used qualitative methods for the data analysis, which, included thematic analyses. The results indicate that the factors and the effects of childhood parental loss are not uniform, thus, not only are the responses to loss varied but even what constitutes loss is varied. There was a degree of impact as most of the respondents had stated that their childhood parental loss merely had a negative impact on them throughout adulthood. While a fifth of the sample stated that losing their parent throughout their childhood had a positive impact on them and a third of the sample stated that it had both a negative and a positive impact throughout adulthood. The loss of the same-gendered parent was proven to have more of a negative impact throughout adulthood in comparison to the loss of the opposite-gendered parent. Furthermore, it was evident that secondary losses are more severe within the loss of the same-gendered parent in comparison to the loss of the opposite-gendered parent. An adult role model was also proven to have a positive impact and made the loss easier to cope with and the aftermath thereof easier. It is also evident that there are certain milestones wherein the loss and longing of the lost parent are suggested to worsen throughout that time.

Keywords: childhood parental loss, adulthood, effects, South Africa

LIST OF ACRONYMS AND ABBREVIATIONS

Abbreviation	*Definition*
ACEs	Adverse Childhood Experiences
AIDS	Acquired Immunodeficiency Syndrome
COVID-19	Coronavirus 2019
DSM	Diagnostic and Statistical Manual of Mental Disorders
HIV	Human Immunodeficiency Virus
MS Teams	Microsoft Teams
NGO	Non-Governmental Organization
PIS	Participant Information Sheet
US	United States
WI-FI	Wireless Fidelity

Table of Contents

PLAGIARISM DECLARATION *2*
DEDICATION *3*
ACKNOWLEDGEMENTS *4*
ABSTRACT *5*
LIST OF ACRONYMS AND ABBREVIATIONS *6*
LIST OF APPENDICES *10*
CHAPTER 1: INTRODUCTION *11*
1.1 Introduction **11**
1.2. Background information and context of the study **12**
1.3. Rationale [DOUBLE CHECK] **14**
1.4. Hypotheses **16**
1.5. Research Questions **16**
1.5.1 Sub-Research Questions 16
1.6. Research Objectives **17**
1.7. Conclusion **17**
CHAPTER 2: LITERATURE REVIEW *19*
2.1. Parental Loss and Grief [DOUBLE CHECK] **19**
2.1.1 Contextualisation of Grief and Loss 20
2.1.2 Societal impact on Grief and Loss 23
2.1.3 Cultural impact on Grief and Loss 23
2.1.4 COVID-19 impact on Grief and Loss 24
2.1.5 External impact on Grief and Loss 25
2.1.6 Secondary Losses 27
2.1.7 Consequences of Grief in Adulthood 27
2.2. Contextualising Childhood Parental Loss **28**
2.2.1. Age of loss 28
2.2.2. Growing up within a single-headed household and the effects thereof 29
2.2.3. Impact of role models or motherly/ fatherly figures 29
2.2.4. Gender impact on parental loss 30
2.3. Loss of the same-gendered parent **30**
2.3.1. Defining the same-gendered parent 30
2.3.2. Contextualising losing the same-gendered parent: motherless daughters 30
2.3.3. Contextualising losing the same-gendered parent: fatherless sons 32
2.4. Loss of the opposite-gendered parent **34**
2.4.1. Defining the opposite-gendered parent 34
2.4.2. Contextualising losing the opposite-gendered parent 35
2.5. Family **35**
2.5.1. Conceptualisation of family 35
2.5.2 Contextualisation of Family [DOUBLE CHECK] 36
2.5.3. Family within a South African context specifically 38
2.5.4. COVID-19 impact on family 39

2.6 Childhood **41**
2.6.1. Conceptualisation of childhood 41
2.6.2 Contextualisation of childhood 41
2.6.3 Societal impact on childhood and children 42
2.6.4. Plans or programs for childhood parental loss 44
2.7 Adulthood **44**
2.8. Sociology of Health [DOUBLE CHECK] **45**
2.9. The Life Course Perspective **46**
2.10. Theoretical Framework: Adverse Childhood Experiences **47**
2.10.1 Defining Adverse Childhood Experiences 47
2.10.2. Contextualising Adverse Childhood Experiences 48
2.11 Conclusion **49**
CHAPTER 3: METHODOLOGY ***50***
3.1. Introduction **50**
3.2. Research Design **50**
3.2.1. Qualitative 50
3.2.2. Phenomenology 51
3.3. Population & Sampling **52**
3.4. Demographics of the study **53**
3.5. Data collection procedure **56**
3.6. Ethical considerations **58**
3.6.1. Informed consent 58
3.6.2. Confidentiality and Anonymity 58
3.7. Thematic Analyses **58**
3.8. Limitations of the Study **59**
3.8.1. Emotionally Taxing **60**
3.8.2. Memory **61**
3.9. Conclusion **62**
CHAPTER 4: THE FACTORS AND EFFECTS OF CHILDHOOD PARENTAL LOSS ARE NOT UNIFORM ***63***
4.1. Introduction **63**
4.2. Age of loss and perception or understanding thereof at the time it occurred **64**
4.3. Relationship with the parent that passed away **67**
4.4. Relationship with the remaining parent **68**
4.5. Coping mechanisms that were adopted by the child at the time the loss occurred **70**
4.6. Problematic nature of the definition of loss **71**
4.7. Conclusion **72**
CHAPTER 5: IMPACT OF CHILDHOOD PARENTAL LOSS THROUGHOUT ADULTHOOD ***73***
5.1. Introduction **73**
5.2. Secondary Losses **73**
5.3. Impact of role models **75**

5.4. Accessibility to resources at the time the loss occurred 78

5.5. The impact of childhood parental loss throughout adulthood 79

5.5.1. The impact of milestones throughout adulthood 81

5.6. Conclusion 82

CHAPTER 6: GENDER DIFFERENCES AMONG CHILDHOOD PARENTAL LOSS AND THE EFFECT(S) THEREOF IN ADULTHOOD 84

6.1. Introduction 84

6.2. Overall Impact 84

6.2.1. Overall impact of the loss of the same-gendered parent 84

6.2.1.1 Male(s) 84

6.2.1.2. Females(s) 85

6.2.2. Overall impact of the loss of the opposite-gendered parent 88

6.2.2.1 Males(s) 88

6.2.2.2 Female(s) 88

6.3. Secondary Losses 91

6.3.1. Secondary Losses of those who lost the same-gendered parent 91

6.3.2. Secondary Losses of those who lost the opposite-gendered parent 92

6.4. Gender differences based on respondents' experiences and perception 94

6.5. Conclusion 95

CHAPTER 7: DISCUSSION, RECOMMENDATIONS, AND CONCLUSION 96

7.1. Introduction 96

7.2. Data in relation to the existing literature 96

7.2.1. Childhood parental loss impact throughout adulthood 97

7.2.2. Secondary losses associated with childhood parental loss 98

7.2.3. Role models and the impact thereof 98

7.2.4. The loss and the longing worsen at certain times 99

7.2.5. Accessibility to resources at the time the loss occurred 99

7.3. Recommendations 100

7.4. Conclusion 102

References 103

LIST OF APPENDICES

Appendix A: Participant Information Sheet

Appendix B: Informed Consent Form

Appendix C: Interview Schedule

Appendix D: Ethical Clearance Certificate

CHAPTER 1: INTRODUCTION

1.1 Introduction

Numerous studies show that losing a parent during childhood has various effects on adulthood and thus is a global phenomenon. These effects could be negative, possibly resulting in depression, anxiety (Tyrka et al., 2008), mood variation (McLeod, 1991), or mood disorders and substance use disorders among psychopathology (Azuike et al, 2021; Otowa et al., 2014), however, could also cause obstacles within their educational outcomes, their socioeconomic status (Case & Ardington, 2006), their emotional and overall well-being associated with their daily lives (Sherr et al, 2014), which could also include their marital status (Vitelli, 2018). According to Krisch (2021), there are several brain-imaging and psychological studies, which stress the impact that parental loss has: brain regions such as the posterior cingulate cortex along with the frontal cortex and the cerebellum are all activated during grief. Thus, according to Lannen et al., (2008) losing a parent can trigger an increased risk for long-term psychological symptoms along with a great deal of physical distress in the short term, however, in the long run, unresolved grief may put the body at risk for more severe problems such as impaired physical health, sleep disturbance, immune disorders and as a result increased health service use. While it is a negative experience, it is a major life event that shapes the person and can also lead to long-term effects which are positive or form essential parts of their identity or personality.

Contrary to this, there are also positive effects associated with childhood parental loss, such as learning lessons about life through the experience (Younge, 2015). There are various reasons as to how these positive outcomes could occur, such as understanding life better, discovering independence, resilience, etc. Additional lessons and aspirations that may have been discovered after the loss, may include the individual becoming more affectionate, more attached to others, the individual realised the importance of choosing their words more carefully, the individual

realised that it is important to not waste time, that the individual is indeed stronger than they thought and that nothing must ever be taken for granted, ever again (More, 2016).

Various factors may contribute to the effects of childhood parental loss that occur later on in life, specifically throughout adulthood. The factors which may influence the outcome is the gender of the parent and child- the gendered nature of the relationship, the age of the child when the loss occurred, and the child's upbringing and consequences thereof [if any] of living without the demised parent that may arise throughout adulthood, otherwise known as secondary losses (Farooqi & Khan, 2021; Haley, 2013; Karydi, 2018; Osterweis et al., 1984).

1.2. Background information and context of the study

Childhood parental loss refers to the loss of one of the individual's parents throughout their childhood years. These years consist of infancy, early and middle childhood, which ranges from birth to two, two to six, and six to 12, respectively. The term 'child' typically refers to children under 18, however, adolescence is also included which ranges from 12 till adulthood[1] **(**Louw & Louw, 2014). The loss referred to within this study merely occurs within a population of same or opposite-gendered child-parent households and their remaining family. Families take many forms, and this study is not focused on any particular form. This is based on the fact that losing a parent is traumatic whether the parent lives at home or not, whether the parents are married or divorced, etc.

Gender is a complex concept with multiple and contested meanings and interpretations. For example, some scholars and activists question the traditional conception of gender as a binary. However, this study focuses on parental relationships where the parent and child have stable

[1] Commonly thought of as starting at the age of 20 or 21 years old and consists of full physical and intellectual maturity.

gender identities which, are either the same or opposite. Thus, for this study, the same-gendered parent implies that the gender of the parent is the same as the child, for example, a daughter and her mother, or a son and his father. On the contrary, the opposite-gendered parent implies that the gender of the parent is the opposite of the child, for example, a son and his mother or a daughter and her father.

There are various reasons as to why parental loss may occur and this ranges, however, one of the main reasons specific to South Africa may be due to human immunodeficiency virus [HIV]. In 2007, more than a quarter of South Africans between the ages of 15 and 24 years of age have experienced and have gone through parental death, which is associated with the HIV status of female participants along with their overall sexual behaviours among both female and male participants (Operario et al., 2007). Thus, Operario et al (2007) indicate the importance of HIV interventions and/or policy as a large proportion or percentage of the South African population are as a result going into adulthood without or with one less parental figure(s). Furthermore, it is then vital to address the needs of those who have experienced parental death or loss as a consequence of HIV.

The proposed research sought to address and explore the relationship between childhood parental loss and various effects it may have or may introduce throughout adulthood – whether negative or positive. Various mechanisms may have an impact throughout childhood, which may ultimately have an impact on adulthood as a consequence. This study focuses on and analyses these mechanisms[2] and how they may result in the various effects being worsened or not. The mechanisms include whether the gender between the child and parent plays a role and

[2] Smaller parts or aspects that work together to form a system that may be influential on one another and ultimately may drive or control the bigger aspect or overall system

additionally include the age of loss, socioeconomic status, religion, and the relationship with the parent that was lost and the parent that remained. Acknowledging and being aware of this information could help with intervention or could prevent the effects from occurring in the first place; which ultimately may reduce depression and suicide rates, to name a few (Crook & Raskin, 1975; McLeod, 1991). This indicates the importance of acknowledging the different mechanisms at play and the overall problem at hand to provide and guide intervention and/ or prevention.

1.3. Rationale

Parental loss overall may have different or varied effects between women and men, however, one of the examples is that it is suggested according to McLeod (1991) that women who previously lost a parent may have a greater chance of experiencing a depressed mood or depression in comparison to those who did not lose a parent. Parental loss could lead to a decreased socioeconomic attainment which inevitably predicts depressed mood, which in turn may lead to lower levels of attainment within school or within the labour market (McLeod, 1991). Various potential predictors of children's psychosocial adjustment as a result of parental death were studied and included the child's age, child's gender, deceased parent's gender, time since death, length of illness, siblings and parental communication (Raveis et al., 1999). It was found that the child's perception of the surviving parent's openness within parental communication was correlated to them experiencing lower levels of depression. It was also found that bereaved children may experience anxiety, boys experienced lower levels of depression than girls and older children showed lower levels of anxiety than younger children (Raveis et al., 1999).

It is evident according to the brief introduction of the studies mentioned above that there is an association between parental loss and various outcomes at a later stage and that what is encountered as a child has an influence later in life – during adulthood. There is a study by Marks et al. (2007) that involves the impact of the loss of either the mother, the father, or both parents

along with the effects of living without the demised parent, and it indicates that the loss of the same-gendered parent results in more negative effects occurring, which may entail for example what Auman (2007) states that children may experience psychiatric problems along with social dysfunction throughout their childhood and adulthood as a result of parental loss. However, the study conducted by Marks et al. (2007) was specifically conducted in the United States and might be outdated as it was 14 years ago, thus it is important to assess what research has been conducted locally.

A study done within South Africa based on the 2001 census suggested that the loss of a child's mother serves as a strong predictor of poor schooling outcomes. Maternal orphans are also less likely to be enrolled in school and as a result, have completed fewer years of schooling in comparison to those whose mothers are alive. It is found that maternal death has a causal effect on the child's educational attainment, however, the loss of a father is significantly correlated to poor household socioeconomic status (Case & Ardington, 2006). Although this study was conducted within South Africa and entails childhood parental loss and the gender between child-parent, it merely focuses on the consequences educationally and doesn't include any other factors. Thus, there remains a gap within the research field regarding the specificity of the relationship between the parent's gender and that of the child within the context of South Africa and serves a purpose and need for this study to be conducted. Another study by McLeod (1991) suggests that a gendered difference needs to be focused on in regards to the relationship between parental loss and the adult's well-being thereafter.

This research draws on interviews with adults who lost a parent in childhood. The respondents reflected on their upbringing without their parent(s) and how this may have impacted them whether positively or negatively, throughout adulthood. This data was analysed through a gendered lens to understand the role that gender played if any, in influencing the effects of

parental loss. The study was conducted between October 2021 and mid-March 2022 with respondents from across South Africa.

1.4. Hypotheses

The main hypothesis is that the loss of the same-gendered parent has a greater negative impact in adulthood because of the commonality being the gender among the child and parent, in comparison to the loss of the opposite gendered parent. An additional hypothesis would be that secondary losses are more likely to be inevitable however the severity thereof could differ from person to person. Factors that may influence the severity thereof could be the gendered nature of the relationship in accordance with the loss and the financial state of the household. Moreover, role models and/ or additional motherly or fatherly figures if present are thought to provide guidance or some sort of support, thus this might reduce the secondary losses or make the time of the loss a bit easier.

1.5. Research Questions

The two main research questions that go hand in hand with one another are: [1] What are the effects in adulthood of the loss of a parent in childhood? Along with [2] What factors influence these effects?

1.5.1 Sub-Research Questions

The sub research questions are stated below:

1. Has the childhood parental loss had a negative and/or positive impact throughout adulthood? Are there any differences between the loss of the same-gendered parent and the loss of the opposite gendered parent?
2. What factors influence the secondary losses associated with childhood parental loss?
3. How have external factors, specifically a role model or an additional motherly or fatherly figure possibly eased or worsened the loss? If any of these were available.

4. Do the effects dissipate, remain constant, or increase over time, specifically during milestones?
5. Is there anything that the respondent would have liked access to at the time of the loss that they didn't have access to?

The above-mentioned sub-research questions try to gather more in-depth information in relation to the two main research questions. This information will be obtained through interviews to expand on the literature that will be provided throughout chapter 2.

1.6. Research Objectives

This study aims to assess the impact that childhood parental loss may have on the individual and how that may affect their adulthood and to specifically assess if the loss of the same-gendered parent [daughter and mother, or son and father] may have a different impact, either in terms of form or severity in comparison to the loss of the opposite-gendered parent. It thus provides additional information regarding what parental loss entails and the consequences thereof, by focusing on the gender differences and/or similarities and how this may have an impact or not.

1.7. Conclusion

It is clear what the research entails and what the main and sub-research questions entail. In the next chapter, the literature review follows, which provides an in-depth explanation, contextualisation, and approach from which this study draws its' literature.

The remainder of the research report is organized as follows. Chapter 2, as mentioned previously, critically reviews the literature to provide an understanding of what contributes to the main arguments of this study. Some of the topics explored include but are not limited to grief, secondary losses, family and childhood parental loss. Chapter 3 addresses the methodological concerns of the research and thus, discusses and justifies the methodological choices made which

are based upon qualitative techniques. The sampling techniques along with any challenges that the researcher faced throughout the data collection process. The technique of in-depth interviews is also discussed.

Chapters 4, 5, and 6 discuss the findings of the report. Chapter 4 provides a descriptive overview of the factors and effects of childhood parental loss and goes on to describe certain aspects such as the individual's relationship with the parent that passed away, the individual's relationship with the remaining parent, and coping mechanisms. These aspects outline which factors may hinder or help after the loss has occurred throughout childhood and thus sets the tone for chapters 5 and 6. Chapter 5 is the impact of childhood parental loss throughout adulthood and chapter 6 discusses the gender differences among childhood parental loss between the loss of the same-gendered parent and that of the opposite-gendered parent. These chapters overlap and contribute to the overall argument that although effects vary significantly and that contextual factors are important in determining the impact, there is no single experience of parental loss. However, it is important to still analyse what overall impact it may have had on adulthood from the respondent's perspective, what contributes towards the impact, and what the impact inevitably is- positive, negative, or both.

Thereafter, chapter 7 is the discussion that analyses the research in reference to past studies, mentions the limitations of the study and any recommendations for future research. However, also includes the conclusion which provides an overall view of the research along with a summary of the main findings.

CHAPTER 2: LITERATURE REVIEW

The literature review follows below, providing definitions of the applicable variables along with the contextualisation of each to provide a better understanding. Thereafter, the literature will briefly be reviewed and analysed accordingly, however, an in-depth overview thereof will be provided in chapter 7.

2.1. Parental Loss and Grief [DOUBLE CHECK]

As defined previously, childhood parental loss for the purpose of this study refers to the loss of one of the individual's parents, either the mother or father, throughout their childhood years which includes ages ranging from birth to 21 years.

This is an issue worldwide as it inevitably cannot be prevented and people will go through parental loss some or other time throughout their lives, and as a result, there are various effects as a consequence thereof. Parental loss occurring early in the child's life is said to increase the probability of inadequate care along with a change in the family's economic status (Li et al., 2020). As a result of this the grieving or bereaved child also sometimes has to take on responsibilities of the parent that passed away which in the end isolates them from their friends. The psychological effects of parental loss occurring throughout formative years are significant as it results in them being at a higher risk of negative outcomes such as mental issues, post-traumatic stress, less academic stress, lower self-esteem to name a few of many (Li et al., 2020). These provide a brief overview of the various and the complexity of childhood parental loss, however, the rest of the literature review goes on to discuss some of these effects more in-depth and the impact thereof.

There are negative long-term effects that can be associated with parental loss, thus it is imperative that children are allowed to grieve in a healthy way, however, cultural beliefs and

misunderstandings may prohibit appropriate support for children (Li et al., 2020). Thus, grief is a big part of parental loss and thus follows.

2.1.1 Contextualisation of Grief and Loss

Grief is a complex emotion that can take many different forms, it can be complicated and there are different types of grief. However, it entails various emotional experiences, which could include anger, sadness, and sometimes confusion. There are typical grief responses that occur according to different age groups, however, every child differs (Ferow, 2019; Haley, 2013).

Between *one and two* they might ask where the person is or when they will be back and may not understand why the person left. Signs and distress may include changes in their eating and sleeping patterns. Between *two and four*, the child may perceive death as reversible: the person may be sick and thus, will recover. Any signs of distress may be portrayed through regressive behaviours occurring in their potty training, sleeping, and/or their eating patterns. Between *four and nine* the child may start to question the process of dying and that it is indeed not reversible. Signs of distress can be shown by regression, nightmares and sleep disturbances, and changes in their eating patterns. Between *nine and 12* they grasp the finality of death and that it happens to all of us, however, they also start thinking about the physical aspects associated with death. Signs of distress include issues at school, withdrawal from friends, trouble sleeping and eating, and sometimes role confusion (Ferow, 2019; Haley, 2013).

Between *12 and 20,* they are capable of having an adult's perspective of death and thus may be involved when it comes to decisions about funerals, memorials, etc. They are able to think about death abstractly, however may try to make sense of things in their manner and as a result, even though they are more than capable of expressing grief, they may choose not to. Signs of distress include but are not limited to anger, suicidal thoughts, role confusion, acting out and depression (Haley.2013).

Some psychologists use a model of stages to describe the process of grieving. It is believed that five stages occur throughout grief, which includes denial[3], anger[4], bargaining,[5] depression[6], and acceptance[7] (Clarke, 2021). As children reach new developmental levels, they need to re-grieve the loss because the recognition and the realization of the death, and the impact thereof changes, which requires a different grief response in reaction to the new reality of the loss (Mahon, 1999). However, children or people, in general, don't necessarily go through every stage, thus this process may not occur in a linear order and one can get stuck within a stage or experience a different type of grief overall. Therefore, re-grieving within every developmental stage makes it more difficult to work through and the child could then inevitably regress developmentally (Ferow, 2019; Mahon, 1999). Thus, these stages are critiqued in various ways which will be outlined next

Numerous criticisms go against the previously mentioned five stages of grief, however, the major four critiques form part of the foci. The first criticism is that it misrepresents the grieving process; the theory that the overall grieving process moves smoothly from one stage to another is a way of oversimplifying what the person goes through. These stages may not necessarily occur linearly and some people may experience more than one stage simultaneously (Schneider, 2021).

[3] Refers to failing to acknowledge an unacceptable truth or emotion

[4] Emotion characterized by antagonism towards someone or something that you feel is wrong, sparks negative feelings

[5] You attempt to postpone your sadness and feelings by imagining "what if" scenarios

[6] Mental health disorder that is characterized by a persistent depressed mood, loss of interest in most activities which all cause an impairment in the individual's daily life

[7] Embracing the present which includes both the good and bad aspects

The five stages were initially theorized to describe the grief that someone may endure towards the end of their life, however, they are now being used to forecast the course of grief that a bereaved[8] person may possibly experience (Schneider, 2021). This proves to be problematic as the initial reason as to why these stages were developed and what they are being used to describe now occur on two opposite continuums.

The second criticism is the negative consequences of using stage theory, which includes consequences adhering to the stages of grief models that bereaved people tend to have unrealistic expectations regarding their grieving process and what it may or may not entail. As a result, being able to identify with the different stages may inevitably allow them to not feel like there is something wrong with them. The third criticism is the lack of depth provided in the explanation; the five stages did not initially originate from any scientific hypothesis that was validated with data. There is also no specific reason as to why there is a sequence of underlying mechanisms for the varying degrees of intensity occurring within each stage. The last criticism is that there seems to be a lack of evidence, as Yale found that people may experience some of the stages, but not, particularly within the specific sequence, and neither the strong yearning[9] that is said to be experienced (Schneider, 2021).

The five stages of grief are thus proven to be problematic and can be critiqued in various ways as seen above. In addition to the pop-psychology stage theory of grief, there are also common social understandings of grief. One of the main socially identified markings of grief entails public displays of emotion, such as crying. However, this public emotional display is not necessarily a good or adequate measure of grief- as everyone grieves differently.

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[8] Someone who has undergone the death of a loved one

[9] A feeling of intense longing for someone

2.1.2 Societal impact on Grief and Loss

Ellis (2019) argues that society tends to impose its expectations and norms on people and as a result, judges them when grieving. There are societal norms relating to what a grieving person should particularly do, how long one should grieve, how one should feel. At the same time, there are limits to the societal acceptance of grieving such that people are often not given adequate time to grieve, which is demonstrated by the amount of compassionate leave given (Ellis, 2019).

Thus, social norms establish norms, define normal and abnormal expressions of grief. There are also differences occurring when it comes to culture[10] and how each person may grieve within their specific culture.

2.1.3 Cultural impact on Grief and Loss

Each culture grieves in different ways in response to different losses. Different cultures may limit the level of attachment that occurs in the first place, especially in societies with high mortality rates for children, their parents may invest fewer emotions until it is proven that they will survive. The actual experience of grief also varies within different cultures as some cultures may expect a quiet response while others may expect their emotions to be expressed openly.

However, emotions within grief may vary between different cultures as well, as some may expect one to feel sad while others may expect a kind of rage or anger to occur. In some cultures, grief may also be displayed somatically[11] which may include varied pains or aches (Doka et al., 2012). The diversity among and within the different cultures and how this may influence how one works

[10] The ideas, customs and social behaviour of a specific group of people or society

[11] Relating to, or affecting the body physically by involving skeletal muscles or the somatic nervous system

through and perceives grief proves the individualistic nature of grief. Thus, the societal norms in regards to culture may also not correspond to individual experience and their specific culture.

2.1.4 COVID-19 impact on Grief and Loss

Covid-19[12] has also had a major impact on how grief and loss are perceived and managed or processed. There are hundreds of thousands of people who are grieving at the moment, as a result of covid-19 and unfortunately, none of us are immune to this occurring– loss. A few losses are occurring simultaneously, of people we know, loved ones, and larger societal losses which include what life used to be like before covid-19. The pandemic[13] has resulted in an overload of bereavement, stress, traumatisation, and loss. All of these various factors are occurring simultaneously in this difficult period (Stacey, 2021). This indicates how the perception of grief and loss has changed as a result of the pandemic, and if Covid-19 hadn't come to be, then a majority of those that lost their lives to Covid-19 could possibly still have been here today.

Covid-19 is thus affecting grief specifically in the following five ways. Firstly, the suddenness thereof, there is a possibility that the person is hospitalized within a few days, and thereafter could pass away if they don't improve. Due to the risk of infection, the family also doesn't get the opportunity to say goodbye. Secondly, there is a lack of rituals as funerals were prohibited for a long period and were merely limited to a small group of people. This can directly impact the individual's ability to process grief as one doesn't have access to social support or to say goodbye (Stacey, 2021). Thus, both of these reasons together make the loss and grief thereof inevitably worse as it occurred suddenly and there is no final farewell that takes place.

The third way that Covid-19 seems to affect grief is through social isolation, as the individual doesn’t have access to their usual social support system and other diversions that may assist with the grief and/ or grieving process. The fourth way is having no structure in place, being at home all day results in the individual's routine and structure falling away, which may usually help process and deal with the loss. The fifth way that Covid-19 has affected grief is through guilt, especially if the individual wasn't able to be with them or say goodbye. Another aspect of this includes preventability: could the individual possibly have prevented them from getting sick, and is it their fault that they caught it (Stacey, 2021). These are just five ways in which grief and loss could have been impacted by the pandemic, however, there could be many more than those mentioned. This indicates that as time and circumstances change, so does the perception, process, and understanding of grief and loss.

It is evident that although grief is thought to consist of five stages, this is critiqued and not applicable to diverse contexts. It is also vital to understand how society perceives grief and how it tries to control individuals and what is expected of them throughout this process or journey. Thus, people perceive based on established social norms, and norms establish expectations that limit the individuals' free expression. That is how disenfranchised grief came about, as it refers to grief that is unacknowledged and unvalidated by social norms (Raypole, 2020). Grief is also clearly influenced by circumstances such as the pandemic. Therefore, it should not be limited to established social norms and there should be an understanding that grief takes multiple forms, thus, people and their attitudes or perceptions need to change. Regardless, there are external factors that may have an impact on the grief or loss which will be explored below.

2.1.5 External impact on Grief and Loss

Various external factors could possibly intensify or subside the loss or grief. These include socioeconomic status, age, gender, relationship quality, the circumstances around the death, and

the individuals' social context. Lower socioeconomic status households are more likely to have a poor health status in general, however, bereavement appears to affect people in a similar manner regardless of their socioeconomic status level (*Trauma Survivors Network | Complications of Grief*, n.d.). Thus, no relationship has been established between bereavement and the individual's socioeconomic status, however, the individual's socioeconomic status could affect the secondary losses that occur after the loss. Bereavement seems to be more stressful for younger individuals, for example, children than it is for older people (*Trauma Survivors Network | Complications of Grief*, n.d.). Hence, age is an important variable to consider and include within the research.

It seems widowers struggle with more bereavement-related health issues in comparison to women, especially when it comes to the loss of their spouse. Good relationships between the bereaved and the person that passed away are also associated with very difficult bereavement. Sudden death and loss are also associated with a more difficult bereavement (*Trauma Survivors Network | Complications of Grief*, n.d.). Therefore, the relationship with the parent that passed away forms part of the research as well.

Going through multiple losses or witnessing death may intensify the levels of grief. Feeling helpless and powerless and undergoing survivor guilt to name a few are traumatic factors that impact the person's ability to resolve the grief. Having access to some social support system and being able to express grief openly helps to mitigate the negative effects that are associated with bereavement. Having access to a support structure and people that care may also reduce the risk of developing depression (*Trauma Survivors Network | Complications of Grief*, n.d.). This provides a rough idea of what may and may not have an impact on the severity of the grief and what may make the bereavement more difficult. We all grieve differently and come from different backgrounds and have different beliefs, so this is just a rough indication, although it may be different within specific populations or contexts.

2.1.6 Secondary Losses

The primary loss refers to the absence of the person, for example, the one that made their lunches or fulfilled a certain role; while the secondary losses are a result of the primary loss. This includes additional life changes that aren't directly related to the death or loss, for example, the parent might have been the breadwinner and the loss of that income may result in lifestyle changes such as moving to a smaller house or moving in with other family members (Rando, 1988 as cited in Mahon, 1999). The move is an example of a secondary loss as there are additional changes that occur as a consequence of the move such as a loss of friends, a different neighbourhood, and an unfamiliar area for instance.

There is an endless list of secondary losses that could occur and each of these could produce their own grief reaction or response, as explained according to the example provided regarding the move, the loss of friends is in the end an additional aspect to grieve and each person reacts to grief differently (Rando, 1988 as cited in Mahon, 1999). Thus, it also forms part of this research as secondary losses can range from financial to psychological ranging from either minor to major and/ or drastic changes. Which inevitably have an impact on the individual's future- whether negative or positive.

The child needs to be able to grieve and to show their feelings, if they don't there could be consequences regarding this at a later stage, such as a decline developmentally, grieving later on in life such as throughout adulthood, and possibly developing depression (Brent & Melhem, 2018; Ferow, 2019; Murphy, 1986-87 as cited in Mahon, 1999).

2.1.7 Consequences of Grief in Adulthood

Children can pick up whether they are allowed to show their true feelings or not; when they are encouraged by their environment to possibly deny feeling sad, angry, or curious about the loss,

a consequence of this is that they suffer from it later in life (Murphy, 1986-87 as cited in Mahon, 1999). The consequences of not being able to show their true feelings and isolating themselves may result in avoiding relationships in general. Thus, a consequence of this, later on, may for example involve issues within the adults' relationships as individuals who have lost a parent throughout childhood tend to be at a higher risk of marital separation in comparison to non-bereaved men and women and thus are more likely to enter into common-law relationships instead of marriages (Vitelli, 2018). More examples of consequences that may occur if grief takes place in adulthood are adopting the wrong coping mechanisms, such as drug abuse. Additionally, if the individual doesn't have an adequate or appropriate coping mechanism, they could become severely depressed among others.

The psychological impact of losing someone can be unpredictable and there is no 'correct' emotion within this loss; that is why the Diagnostic and Statistical Manual of Mental Disorders [DSM] states that it is healthy to experience a range of emotions, which include anger, sadness, anxiety, regret, guilt, and remorse, among others. As a result, it is normal to react to the loss by engaging in work or withdrawing from those around you (Krisch, 2021). However, engaging in your work and with others could have been disrupted now with Covid-19 and its' strict lockdowns. So, it is also important to acknowledge if and how Covid-19 might have reenabled the grief or made it more difficult to work through without being able to see the loved one, say goodbye, being busy or distracted, etc.

2.2. Contextualising Childhood Parental Loss

2.2.1. Age of loss

Age inevitably has an impact on childhood grief, and more specifically, on how the child may understand and/or react to the death or loss of their parent. It is important to understand where they tend to fall developmentally as this determines how they may perceive the loss and will

provide guidance according to age-appropriate choices regarding intervention (Haley, 2013). It isn't 100% certain as to how many children have undergone parental loss, however, it is estimated that 5% of children within the US have lost one or both parents before the age of 15, and 3.5% under the age of 18 which is approximately equivalent to 2.5 million children (Kliman, 1979 as cited in Osterweis et al., 1984; Li, 2021). In comparison to South Africa and the amount of children that have lost either one or both of their parents before the age of 18, there were 2.8 million in 2017 which is equivalent to 14% of the population merely consisting of children within South Africa (Hall & Sambu, 2018). This indicates that it is a global problem, however, South Africa in comparison to the US mentioned study, has more children who have undergone a parental loss, thus indicating it needs more attention and research therein.

Other factors may play a role or may have an impact in terms of how the child may react, these include but are not limited to: education level, socio-economic status, and the access the child has to support resources (Haley, 2013). This shows the importance of these variables, as they may impact the child's reaction, their childhood, and possible outcomes as an adult.

2.2.2. Growing up within a single-headed household and the effects thereof

The biggest and most obvious effect of growing up within a single-headed household would be the socioeconomic aspect, as there is only one source of income, sometimes none, thus, it is evident that children from single-headed households seem to be disadvantaged in various ways, which may impair their future, as well as the future of their children (McLanahan, n.d.). Financial obstacles may hinder the child's future as they might not be able to attend school or complete any form of education.

2.2.3. Impact of role models or motherly/ fatherly figures

Parents also serve as role models, not merely through their interactions with their children but rather by the example that they set through their attitude and their behaviour within their family

and their external world. As children grow and develop, they need some sort of guidance throughout and thus, parents share more of their choices and decision making to provide an example, by portraying moral and ethical behaviour, parents may produce values that in the end can counter any negative influences from the external world- peers or social media (Steber, n.d.). Thus, this indicates the need and the benefits thereof of having a role model or an additional motherly or fatherly figure as part of the child's life throughout their childhood, as this may influence the impact that the childhood parental loss has had on the individual throughout adulthood. Furthermore, this forms part of the factors that may either contribute towards or hinder the impact that childhood parental loss may have throughout adulthood.

2.2.4. Gender impact on parental loss

There is a gap within research specifically within South Africa, as to whether the gender between the child and parent has a significance on the loss or grief experienced and how this may impact the child later on in life, i.e., in adulthood for example. This includes the loss of a same-gendered parent, such as a son who lost his father or a daughter who lost her mother. In comparison, to the loss of the opposite-gendered parent such as a son who lost his mother or a daughter who lost her father.

2.3. Loss of the same-gendered parent

2.3.1. Defining the same-gendered parent

Many issues could arise as a result of losing the same-gendered parent; examples will be provided below in order to explain this along with the relationship and bond that exists between these dyads.

2.3.2. Contextualising losing the same-gendered parent: motherless daughters

The mother usually makes up the foundation of the family (Mukankuranga, 2013 as cited in Umutesi, 2013) and thus, keeps the family together. Given the importance of mothers, it seems

likely that losing a mother could disrupt family bonds in many cases, thus one may feel as though they have lost their family as well (Doka, 2020). A study conducted in the U.S in 2007 suggests that the loss of a mother tends to have more negative effects on their daughters than on their sons, thus the loss of a same-gendered parent is associated with a greater amount of negative effects (Marks et al., 2007). Women who have lost a mother are more likely to engage in binge drinking, have a decline in self-esteem and a lower level in terms of personal growth (Marks et al., 2007).

Cultural identity is also affected because as children, daughters tend to be busy with school and thus, assume that they will be able to learn things from their mothers in the future, but when they pass away, they then have nobody to teach them these aspects anymore (Tartakovsky, 2013).

Tartakovsky (2013) argues that motherless daughters can often struggle in intimate relationships as they come across as needy because they are trying to fill the void by looking for the same nurturing they used to receive from their mother and as a result, they also struggle to give back to their partners. The best way to prevent this from occurring is by working through the loss and to gain nurture in another way such as through a friend or an additional maternal figure or role, the daughter furthermore shouldn’t seek this kind of love from her partner and thus giving back might be easier or might come more naturally (Tartakovsky, 2013).

When referring to the 'self-in-relation' theory or model, it is evident that when a mother passes away, the daughter does not only lose a parent but someone who occupies the most essential role in her life throughout development. Thus, it may enable the explaining of a variety of differences in regards to the adjustment to losing a mother between the genders. A daughter develops her sense of self, but also a psychological, emotional, and social stance, which she will replicate in future relationships; however, without her mother being present and being able to facilitate this process, the daughter is left to master these developmental tasks alone (Romero, 2017). This will

form one of the questions and will be a focus in the interviews – to see whether any relationship issues are occurring throughout adulthood and what these issues include specifically.

The mother aids the daughter in developing a sense of herself and identification; however, this is altered when the mother passes away. This may also result in difficulties mastering certain tasks and responsibilities, which are usually associated with her chronological age and as a result, of not having her mother continuously present; there may be some difficulties or problems with certain maturational processes throughout her life (Romero, 2017). The maturational processes that could be impacted involve whoever informs the motherless daughter about certain topics, such as sex, having a period, pregnancy, and other important developmental aspects. If the motherless daughter is introduced to these topics which may have been framed negatively or inappropriately, it might negatively impact her later on in life.

Clinicians believe that children who have lost a same-gendered parent between six and twelve years old experience the most difficulty in trying to adjust – although their cognitive and emotional development is advanced enough to work through the loss (Romero, 2017). They might not have the right resources or coping mechanisms to manage the emotions that they are facing.

Adolescents usually have very little experience when it comes to loss and thus, her peers usually cannot validate her feelings or understand what it entails to work through the loss, thus disorientating her and perhaps causing anxiety afterward. Motherless daughters are more prone to reverting to external aspects to help them cope, such as alcohol, especially if the loss occurred during adolescence and this is their coping mechanism or persona used to suppress the grief (Romero, 2017).

2.3.3. Contextualising losing the same-gendered parent: fatherless sons

The psychological effects of experiences from our childhood can have an immense impact on who we become later on or how we think, thus growing up without a father is said to permanently alter the structure within the brain (Spencer, 2013 as cited in Kismet, 2020). Thus, there are not merely psychological aspects associated with the loss of a father but also physical, inwards to one's brain.

The general psychological effects of growing up without a father can include but are not limited to the following, more likely to be aggressive, depressed, have low self-esteem, bad academic performance, be incarcerated, higher risk of committing suicide, and are more likely to use drugs (Kismet, 2020). These are just a few of many consequences of the loss of one's father throughout childhood, however, it is important to assess how it affects fatherless men as well.

Some certain traits or symptoms are called or referred to as traumatic traits of fatherless men, thus, it involves childhood parental loss but specifically a son who lost his father. These include but are not limited to the following that will be discussed below. **[1]** Insecure and a feeling of inferiority as a result of neglect, lack of affirmation, or abandonment and this may impact their lives in their business and marriage. As a result, they never fully trust their abilities and also don't trust those around them to do what is right. **[2]** There is a strong level of independence due to a lack of trust in authority figures. **[3]** They can be quite competitive due to comparing themselves with other men and this is a result of their insecurities. **[4]** There is a selfish ambition that is driven by or a result of an innate sense to try and please their fathers. Although their fathers may not be alive anymore, fatherless men might try and live their lives to prove to their fathers that they are indeed valuable and are worthy of their love. **[5]** There are sometimes feelings of loneliness and emptiness due to nothing being able to satisfy the hole in their hearts. Fatherless men usually feel like outsiders and thus are never able to enjoy the company of others as they aren't comfortable in their own skin because they don't know where they tend to fit in. **[6]** There

is an inability to enjoy what is happening in the present due to a desire to always focus on an unreachable future. Fatherless men tend to never be satisfied or happy with anything and thus are always looking for a better future and don't end up enjoying the present. **[7]** There is continuous friction with other men and those that are leaders. The combination of competitiveness, insecurity and the lack of trust tends to lead to a lot of friction with other men as they always think someone is plotting against them, are speaking badly of them and this may lead to bad relationships, quarrels, and divisions (Mattera, 2018).

There are said to be a few ways that children tend to overcompensate for not having a father and these may include but are not limited to the following. Growing up fatherless enables the child to compensate for whatever they feel, think and what they believe may be missing from the primary caregiver's life. As a result of this, it isn't unusual for the child to develop care-taking routines as a way of caring for the caretaker [overcompensate]. These behavioural patterns are supposed to help the primary caregiver by making it easier and allowing them to do a better job of providing parental care. Girls tend to most likely ally with the caregiver through picking up their routines which enable them to feel capable of providing care. While the boys allow themselves to take the responsibility for any issues that may go wrong with the family. Thus, both are as a result compelled to take care of their parents whom they see as unhappy. Regardless of what happened and what had resulted in their fatherlessness occurring, even the children see that single caregivers require help (Kismet, 2020). This is just a snippet from the child's perspective at the time and what one of the many negative consequences are and could include.

2.4. Loss of the opposite-gendered parent

2.4.1. Defining the opposite-gendered parent

Various negative aspects are associated with the loss of the opposite-gendered parent and could range, examples thereof follow below.

2.4.2. Contextualising losing the opposite-gendered parent

There are a variety of negative aspects that are associated with losing the opposite-gendered parent which could for example include motherless sons who are at the end raised by their peers or fatherless daughters that may struggle with their self-esteem, their relationships, or who may eventually develop an eating disorder (Marie, 2018; Meyers, 2020). The motherless sons would sometimes have to be raised by their peers as their father might be the breadwinner and would be away from home from time to time. While the fatherless daughters might struggle primarily with relationships as they never really had a relationship with a male before [other than their father which was cut short]. Other factors that may have an influence are whether there are role models that the child may have access to such as an uncle or brother. This might for example reduce the risk of having relationship problems as the daughter would have had a chance to have various relationships with males throughout her upbringing and childhood. Men who had lost their mother seemed to experience a decline in happiness, have a lower level of psychological wellness, and have a decline in self-related health (Marks et al., 2007).

As a result of one of the parents passing away, the family structure or dynamics might change and how this may ultimately impact the child's development and the outcomes thereof are important to acknowledge.

2.5. Family

2.5.1. Conceptualisation of family

A family is defined as a basic unit within society that traditionally consists of two parents who raise their children but can also include any other social units that might differ from the traditional family but is regarded as equivalent, such as a single-parent family for example (Merriam Webster, 2021).

2.5.2 Contextualisation of Family

A vital theory regarding family that plays a key role in this study is the sociology of the family. Family is a key social institution within all societies and thus makes it a cultural universal, similarly, the values and norms that surround marriage are found worldwide in every culture, so family and marriage are therefore both cultural universals. Although marriage and family have historically been linked to U.S culture and the fact that marriages create families, their connections are becoming complex and a prime example includes cohabitation (Hoiland, n.d.). Sociologists are mostly interested in the relationship between these two institutions- marriage and family because families make up the most basic social unit which society is built upon. However, marriage and family are inevitably linked to other social institutions which range from economy, government and religion among others (Hoiland, n.d.). Sociological approaches to family are formed or based on two scientific paradigms being liberal progressive and conservative crises, with two ideological approaches being individual egocentric and family-centric which instead of merely focusing on the individual it also takes the interests of society into account. Thus, the theories pertaining to the individual are now starting to bechallenged by the alternative sociology of the family wherein the focus is not the individual but the family (Sulaberidze et al., 2018).

Family is a socially recognized group which can be joined in various ways such as blood, marriage, cohabitation or even adoption, which in the end forms an emotional connection between the members and also makes up an economic unity within society. There are different types of families based on how one enters into them through orientation[14] or procreation[15] and involves different relationships such as marriage-parenting and relation (Hoiland, n.d.,

[14] Refers to family wherein a person is born

[15] Describes a family that is formed through marriage

Sulaberidze et al., 2018). The family also takes on various dynamics[16] and functions which follow the needs of the entire society or person and thus does not merely have basic and secondary functions but it is vital to determine between the specific and non-specific functions of the family. The non-specific functions of the family are related to accumulating and transferring the property, organisation, status, consumption, health, family care among many others (Sulaberidze et al., 2018).

The family also involves a typology of family structures and it is suggested that although the types of family structures are diverse they are created according to the nature of the wife, the relationship within the family and the parent. There are also certain criteria wherein families are grouped according to their power, peculiarities of family power and influence along with the social condition of spouses, parents or relatives (Sulaberidze et al., 2018).

Thus, the family norm is referred to as a nuclear family and usually consists of a husband, a wife, and two children. Single-parent families are thus more likely to be seen as inferior or incomplete in comparison to a nuclear family, as Little (2016) asks if single-parent households are then in the end considered as families as well or not.

Childhood parental loss inevitably leaves the child within a single-parent household until such time that the parent may remarry or find another partner. This does not form part of the norm in terms of family types according to how society perceives and frames it. Therefore, this could impact the child's upbringing in various ways which forms part of the theoretical framework.

[16] Family dynamics are the patterns of relating, or interactions, between family members, although each family system and the dynamics thereof are unique there are some commonalities

2.5.3. Family within a South African context specifically

According to Statistics South Africa (2021) about one-fifth [21.3%] of children that are younger than 17 don't live with their parents. This departs from the stereo-typical nuclear family. In the South African context, children are more likely to not co-resident with their biological parents, this is mainly due to labour migration and low marital rates of mothers and as a result, are raised by their grandparents or their other relatives (Statistics South Africa, 2021). This is evident as there are 229 000 children without a mother and 2.2 million children without a father (Hall & Mokomane, n.d.). This indicates that within the South African context, children do not necessarily always live with their parents and a big part of the population live with other relatives. It is important to assess what type of family is the most common within South Africa as well, which follows.

According to the General Household Survey conducted in 2019, an estimated 39.9% of the households were classified as nuclear[17], 34.2% were classified as extended households[18] and only 2.4% of the households were classified as complex[19] (Statistics South Africa, 2021).

The survey shows that 41.8% of households in South Africa were indeed headed by females throughout 2018. Being married or in a cohabitation was more common amongst males at 71.3% in comparison to females at 35.45%. Changes occurred among living arrangements of children as the amount of orphans declined after the height of AIDS related deaths between 2002-2009. There is a higher prevalence of paternal orphans than there are of maternal orphans and this is a consequence of higher male mortality and becoming parents at an older age. The 2018 household

[17] Included couples, or one or more parent(s) with children

[18] Defined as a nuclear core along with other family members such as parents or siblings

[19] Contained non-related persons

survey data indicated that 14.4% of South African children were classified as orphans, 3.1% had lost their mothers, 9% had lost their fathers and 2.4% lost both parents. The percentage of orphaned children was higher in KwaZulu-Natal and Eastern Cape at 18.7%, Free State at 16%, and Mpumalanga at 15.5%. (Department of Social Development. 2021). Thus it is evident that South Africa comprises various different family types, however, the top three prominent as indicated earlier include the nuclear, extended, and complex families. It is also evident that majority of the orphaned children had lost their father- triple the amount of those who lost their mother according to the Department of Social Development (2021).

Households seem to becoming smaller but not because they are becoming nuclear families but rather because of the high prevalence of extended families and an increase in single-person households. Another possible contributing factor of these households becoming smaller is that the larger and extended households are splitting into smaller units in order to comfortably stay in their tiny dwellings which are the RDP houses (Hall & Mokomane, n.d.). This indicates that the households and family structures are constantly evolving and changing, thus so will the family norms, family dynamics and overview thereof. Thus, it is important to also assess how covid-19 might have had an impact on families.

2.5.4. COVID-19 impact on family

The pandemic has definitely shifted experiences and norms and has as a result also changed family dynamics and settings. The pandemic over time could also possibly change what is considered a family, or more specifically who is considered to be part of the family. As throughout lockdown, quite a lot of people didn't stay with immediate family, instead, they stayed with extended family, friends, roommates, or housemates. Thus, indicating how the terminology itself could change throughout time and could acquire a new meaning.

The pandemic could also have possibly changed family dynamics or settings, as a traditional nuclear family could have become an extended family after one of the parents passed away, in order to provide and look after the children. According to Maphanga (2021), a global study estimates that between the 1st of March 2020 and the 30th of April 2021, a total of 1.13million children had lost a primary caregiver[20] to Covid-19, on top of that a total of 1.04 million children were orphaned. By April 2021, South Africa had become one of the countries with the highest number of children who had lost primary caregivers (Maphanga, 2021). This indicates that as a consequence of the pandemic occurring, a lot of children had lost their primary caregivers, thus it had changed their family dynamic along with possibly impacting their adulthood due to experiencing childhood parental loss.

2.5.3 Impact of grief or loss on the family

An important aspect in terms of the loss and trauma includes how the family may perceive it and how they handle or work through it and how this may have an impact on the child. Families have different ways of grieving, grief can either draw the family members closer or it can pull them apart. Nobody can prepare and know how they are going to handle grief and that is what makes it so difficult. As a parent you would like to protect your child from the pain of the loss, however, you don't want to make it more difficult for them to grieve. Children have different understandings when it comes to the loss, this is based on their age and their developmental level. So one has to be aware of that and try and help them comprehend what death means and what happens when someone dies– this could include what happens to the body and the spirit (Health Encyclopedia, n.d.).

[20] Including at least one parent or custodial grandparent

The death of a parent inevitably changes family dynamics and has an immense impact on the family to a certain extent as well. This is evident in the piece written by Doka (2020) regarding Eva's mother's death, she didn't merely lose her last parent but her sense of family too. There was a continuous conflict between siblings in regards to the distribution of property, it was so bad that it even included the price of the house. Although Eva's situation and aftermath may be more on the extreme side of family discord, it isn't unusual though for things to change after parents die and this can range. From losing the family home to family rituals like holidays and even memories sometimes. As a result of these changes occurring within the family and between family members, is another example of a loss that needs to be acknowledged in the end and also grieved (Doka, 2020).

2.6 Childhood

2.6.1. Conceptualisation of childhood

As indicated within the introduction, childhood indicates specifically for this study any individual that falls under the age of 18 and thus the beginning of adulthood. Childhood thus forms the basis and the foundation for who you are and whom you will inevitably become. However, some external pressures and influences might alter or affect that, along with circumstances changing- such as childhood parental loss.

2.6.2 Contextualisation of childhood

It is important to acknowledge that the memory of one's childhood and personal history enters into one's dealings with those positioned generationally after us. A memory of childhood is based upon selected preoccupations and as a result, it is important to be reflective of our childhood (Burman, 2021). This indicates that we may not remember everything from our childhood and only the bad or good parts. Which may alter how we look back and feel about our childhood.

Something to think about is; how is childhood in the past different from childhood now? How have concepts such as playtime, work time, and so on changed over time in the past in comparison to the present? Childhood never ends and is significant in various people's lives. But what constitutes this ideation of childhood as the conception thereof is constantly changing over time. Children are embodied and are protected in schools as they are viewed and understood by society as innocent and malleable (Oisen, 2021).

This indicates that there is a problem with the terminology ‘childhood’ in the first place as this itself is being constantly reconstructed and is continuously changing over time. How society views and perceives children is also influential on the child itself.

2.6.3 Societal impact on childhood and children

Children are defined as innocent can have different meanings. Childhood innocence offers a crucial frame of reference when making sense of social change and the impact thereof on children. Children are defined and viewed as innocent because they are outside society, prehistorical and presocial. Child innocence is also seen as a way of restricting the child’s access to knowledge and resources. Child innocence can also have an unintentional effect of disempowering children who may be vulnerable to abuse and exploitation. Children as a result of this are also dependent and in need of adult protection (Wyness, 2018).

This shows the significance of growing up with one’s parents for adult protection to occur. However, if the individual lost one of their parents throughout childhood, they essentially lose some of this protection which inevitably makes the child more vulnerable in comparison to children who still have both parents.

Children cannot guarantee adulthood because they don't know what their outcomes will be as the future consists of the unknown. What seems problematic is that one cannot directly access the past or the future and thus only has the present to work with. Although there is value in focusing on the child's future by evaluating their childhood, it is important to consider how these children move in time. To think about their imagination, their aspirations, but also speculation and expectations associated with each child (Spyrou, 2021).

If the individual's childhood, their circumstances, and how they move through time have an impact on their future, then the loss of a parent is most likely thought to implicate that future further. Whether it be positive or negative, it will still be influential to their future. It creates an alternative family dynamic which inevitably results in alternative futures.

Along with the ages associated with childhood are various developmental stages that portray the phases that indicate normal intellectual development that occurs from infancy until adulthood. These stages were named after the theorist and that's why it is known as Piaget's four stages of development (Ansorge, 2020).

However, his stages of development have been critiqued in various ways and these are primarily based on his research methods, developmental variations, and underestimating children's abilities. The basis of his observation was his three children, the other children that he had researched all grew up within a high socioeconomic status. Thus, this represents an unrepresentative sample and makes it difficult to generalize his findings. Another drawback is that his theory lacks operational definitions and detailed descriptions, thus making it very difficult to accurately replicate his research (Cherry, 2019). One of the most important ways of verifying the validity of the results of the research is the replication thereof, thus, this is very problematic.

2.6.4. Plans or programs for childhood parental loss

Big Brother Big Sisters of South Africa, was a non-profit organisation that was dedicated to helping children who were at risk, between the ages of 6 and 18. It was a mentoring program that matched the youth in need to carefully train and select adult volunteers within one-to-one relationships which inevitably help maximize their possible potential (*Big Brothers Big Sisters Of South Africa*, n.d.). Thus, this would have been an appropriate and applicable way to establish role models and provide guidance in that manner and mentor the children in various important aspects of daily life, such as cooking, cleaning, handyman work, etc.

However, in 2011 the Big Brothers, Big Sisters program had withdrawn from South Africa, and thus an equivalent association or program was established known as Bright Stars. Bright Stars was a child-focused NGO that is situated in Durban, South Africa, and is the brainchild of the Peace Agency. In South Africa, more than 20 000 children are living in Child and Youth Care Centres who are being cared for by an adult who is trying to help bring about 8-10 children, however, seem to not always be adequately paid or trained. Thus, the need for this program is evident as there are 150 children being mentored, in 2 provinces across 7 Child and Youth Care Centres (*Bright Stars | Mentorship Program*, n.d.). This program isn't necessarily aimed specifically at children who have lost a parent but could form part of the solution.

2.7 Adulthood

Adulthood is the developmental stage during which full physical and intellectual maturity is reached and thus, is defined from the age of 20 or 21 years old. There is also middle and late adulthood, however, these don't apply to this study. In early adulthood, people are typically concerned with intimacy versus isolation. After having developed a sense of self throughout adolescence, one can then share their life with others and engage in intimate relationships. Before doing this, however, one needs to have a strong sense of self as those who don't have a positive self-concept throughout adolescence may experience loneliness and emotional isolation (Dumper

et al., 2014). That is why it is important to assess what effects childhood parental loss has on adults and how this may affect this concept of intimacy versus isolation.

2.8. Sociology of Health

The sociology of health[21] entails social epidemiology, mental health, disease, disability, and medicalization. Health and illness cannot simply be seen as biological or medical phenomena but indeed also need to be perceived, organised, and acted upon in various contextual instances- such as politics, economics, cultural and institutional. However, the various ways we relate to these aspects are constantly revolving and are thus in constant evolution (Little & Little, 2014).

The functional perspective is one of a macroanalytical perspective which focuses on the bigger picture by focusing on how all aspects of society are integral to the health and the viability of the whole. Thus, the focus is on how healthy individuals mostly contribute to the stability of society and what the most efficient way would be to restore 'sick' individuals to what is perceived a healthy state. The critical perspective is another microanalytical perspective that focuses on creating and reproducing inequality as the focus here is the relationship between the power that pharmaceutical companies possess and the rates of drug prescription. Whereas the interactionist perspective to health rather focuses on how people might understand their health, how their relationship with their bodies is mediated by social concepts regarding health and illness and how their health might affect relationships within their lives (Little & Little, 2014).

An example of how childhood parental loss is not merely one occurrence and affects other societal aspects is provided below using a metaphor in terms of the sociology of health. According to Talcott Parsons (as cited in Little & Little, 2014) the sick role involves patterns of

[21] According to the World Health Organization [WHO] health is a state of complete physical, mental and social well-being and is not merely the absence of disease.

expectations which define appropriate behaviour for the sick and for those that take care of them. The sick person usually has a specific role in terms of rights and responsibilities, however, in the context of individualism and individual responsibility, a person does not choose to be sick and thus should not be treated as responsible for their condition. The sick person as a result also has the right of being exempt from normal social roles, however, this is only temporary and relative to their illness. However because the sick are not able to fulfil their societal roles anymore, their sickness inevitably weakens society and as a result, there are sometimes various forms of social control needed to bring the sick person back in line with normal expectations (Little & Little, 2014).

Thus, this is used as a metaphor in terms of referring to the bereaved person as the "sick" as they endure certain expectations in terms of appropriate behaviors for after the math and throughout their bereavement. The same as they did not choose to go through bereavement, however, they are to an extent also sometimes relieved of their responsibilities temporarily. Bereaved children and adults thus in the end inevitably weaken society and need certain services in place to help them "heal" such as policy or programs which will be spoken about more in-depth further on.

2.9. The Life Course Perspective

The life course perspective is a theoretical model which exists across several disciplines and it looks at the events that typically occur throughout people's lives at different stages. The life course perspective differs from typical psychological theories as it focuses on how historical time, social location and culture all affect the individual's life or experience during each life stage (Hutchison, n.d.). There are basic concepts that form part of the Life Course Perspective which involve five concepts which are *1] Cohort:* which consists of a group of people who were born during the same time and who have experienced particular social changes within given cultures within the same sequence and at the same age as well. *2] Transition:* consists of a change in roles

and statuses which represent a distinct departure from their prior roles and/ or statuses, *3] Trajectory:* which involves a long-term pattern consisting of stability and change which usually involves multiple transitions and *4] Life event:* consist of a significant occurrence which involves an abrupt change which may have serious and long-lasting effects. The last concept is *5] Turning Point:* which consists of a life event or transition that produces a shift within the life course trajectory itself (Hutchison, n.d.).

It is said that the life event specifically regarding the death of a close family member has a stress rating of 63 and although it may not always be a turning point, however, if it occurs off-time then it often is seen as a turning point. A major theme that is important when it comes to the death of a close family member or the loss of a parent is Development risk and protection: which refers to experiences particular to one life transition or life event and how they have an impact on subsequent transitions and thus these events may either protect the life-course trajectory or may hinder it and put it at risk inevitably (Hutchison, n.d.). The life course perspective is important with regards to parental loss as it serves as one of the theoretical models that can be used to analyse the effects thereof throughout life and throughout their different stages. The life event would then consist of the parental loss which would inevitably abrupt change and has various effects that could possibly occur thereafter. Childhood parental loss also serves as a turning point as the parental loss changes the rest of the child's life-course trajectory. Another theoretical model or framework follows below known as Adverse Childhood Experiences wherein Childhood parental loss needs to be added as a predictor or experience due to the various negative effects thereof.

2.10. Theoretical Framework: Adverse Childhood Experiences

2.10.1 Defining Adverse Childhood Experiences

Adverse Childhood Experiences (ACEs) include a variety of experiences – 10 different types of experiences occurring before the age of 18. These 10 types include ***(1) Abuse:*** physical, sexual, and emotional; ***(2) Neglect****:* physical and emotional; and ***(3) Household Dysfunction:*** mental illness, intimate partner violence, incarcerated relative, substance abuse, and divorce. Researchers have started to include additional experiences to these 10 ACEs as they tend to create similar biological changes to the 10 original experiences; these additional ACEs include community and environmental aspects, which involve racism, bullying, and community violence (Joining forces for children, n.d.). However, another adverse childhood experience that could occur and that should form part of this list among others is childhood parental loss as this has adverse experiences and effects that occur thereafter. As seen throughout the literature provided above there are various negative effects and rarely some positive as a result of childhood parental loss and thus this also indicates the need that it should be included in the list of ACEs.

There is a direct correlation between ACEs and future health complications, whether it be physical, emotional, or mental; these will briefly be discussed below.

2.10.2. Contextualising Adverse Childhood Experiences

ACEs have various negative effects on the individual's future – whether it be physical, mental, or emotional. It is evident though, that the experiences from a child's past have a significant impact on their lives at a later stage, for example, in adulthood. Thus, it forms part of the theoretical framework, as the loss of a parent should be an ACE; however, the secondary losses that accompany this could result in these 10 ACEs occurring as well.

The majority of the effects of ACEs later in life are negative, as studies indicate that it could result in the occurrence of a variety of issues –psychopathology, higher suicide attempts, fewer life opportunities, substance use/abuse, depression, socioeconomic difficulties and could lead to the premature death of family members (Anda et al., 2009; Cluver et al., 2015; Kiburi et al.,

2018; Metzler et al., 2017; Otowa et al., 2014). Thus, it is evident that ACEs have a significant impact on the individual at a later stage in life- in adulthood and thus childhood parental loss should be an ACE as it happens throughout the child's formative years and thereafter has an adverse impact later on in life- throughout adulthood specifically.

2.11 Conclusion

Existing research shows parental loss has effects on children and in some country contexts there is evidence that the effects are differentiated by gender. However, there is a gap in this specificity within South Africa and as mentioned previously is the reason for this research. Thus, this research will extend the gendered nature of childhood parental loss into the South African context where these questions have not previously been studied.

Further research shows that adverse childhood events have effects on behaviours and outcomes in adults, thus, this study will build on this work by examining how parental loss relates to other ACEs, as some of these events or experiences could occur because of secondary losses occurring. Thus, this study inevitably also tries to prove that childhood parental loss should also be classified as an adverse childhood experience.

In response to the impact of childhood parental loss throughout adulthood, some various solutions or options could be offered to hinder or minimize the impact, this will be discussed later throughout the report, specifically in chapter 7 within recommendations.

The methodology of the study will be discussed next.

CHAPTER 3: METHODOLOGY

3.1. Introduction

This chapter focuses on the methodological aspects of the research. It begins by providing an overview of the study, by describing the demographics of the study, and thereafter goes into detail regarding the research design. Furthermore, it also goes into detail about what the qualitative design entails and provides a reason as to why this was the most appropriate and applicable choice. Thereafter, the sampling methods will be discussed, along with how the data was collected, ethical considerations, what measures or instruments were used, data analyses, and lastly the challenges and/ or limitations of the study.

3.2. Research Design

According to Bhandari (2022) a research design forms as a blueprint or a strategy for how you would answer your research question using empirical data. Thus, a well-planned research design will help ensure that the methods used throughout your research will indeed match your research aims or objectives and thus, will enable the right kind of analysis to take place in terms of the empirical data collected (Bhandari, 2022). There are different types of research designs within the two main approaches, being quantitative and qualitative, however, this research adopted a qualitative approach which will be discussed below.

3.2.1. Qualitative

The qualitative approach tries to understand subjective experiences, beliefs, and specific concepts by gaining in-depth knowledge within a specified context to explore under-researched problems and thus as a result generate new ideas. Qualitative research is more flexible and inductive, thus allowing the researcher to adjust their approach based on what the findings are throughout the research (Bhandari, 2022). According to Bhandari (2022) qualitative research mostly includes

collecting and analysing non-numerical data, thus text, video, or audio in order to understand concepts, their opinions, or experiences.

Thus, the qualitative approach was appropriate and applicable for this research and topic as it allowed the researcher to answer questions about experiences of a specific event [i.e the death of a parent] from the participant's perspective and their standpoint (Hammarberg et al., 2016). Qualitative research thus inevitably enables interaction which allows the social behaviour of people to be seen and understood. It was therefore used as it enabled interaction with the participants to grasp an understanding of what the remaining parents' social behaviour included and if it possibly caused secondary losses or how the loss of a parent might have impacted their social behaviour etc. This indicates that the qualitative approach was the best-suited approach for the specific research question, research objectives, and the topic being studied.

There are various qualitative research designs, and these are less strictly defined and allow a rich, detailed understanding pertaining to a specific phenomenon (Bhandari, 2022). Although these different qualitative research designs may have similar approaches within the way data is collected, they focus on different aspects when it comes to analysing the data, the specific type of research design used throughout this research will be explained below.

3.2.2. Phenomenology

According to Bhandari (2022), phenomenology aims to understand a specific phenomenon or a specific event from the description provided by participants' regarding their lived experiences. Thus, the purpose of the phenomenological approach is to identify the phenomena through their perceptions within specific situations which are achieved through the use of inductive, qualitative methods such as semi-structured interviews which will be discussed in-depth later (Lester, 1999).

Epistemologically, phenomenological approaches are based within a paradigm of personal knowledge along with subjectivity and thus emphasize the individual's perspective and interpretation, these are important for understanding subjective experiences and gaining insight into the individual's motivations and actions and thus also cutting through any taken-for-granted assumptions (Lester, 1999). Thus, this was the appropriate and applicable research design for this study as it emphasized the individual's perspective and interpretation of their experience(s) in relation to the loss of their parent and their lives thereafter and how the loss may have inevitably impacted them throughout adulthood. It is important to understand what the population and sample included, thus will be discussed below.

3.3. Population & Sampling

The population consists of the entire group that the researcher would want to draw conclusions about and can be defined in terms of a specific geographical location, age, income among many other factors and thus can range from being very broad to be quite narrow (McCombes, 2019). The population from which the sample was drawn consisted of adults [over 18 years of age] who had lost a parent: whether it be the same or opposite-gendered parent throughout their childhood and specifically grew up within a nuclear family. The population that was studied is situated within the African continent, specifically South Africa. Thus, this indicates that the criterion for being included within the sample included the following factors: 1] the loss of a parent before the age of 21- for this context biological parent(s) specifically, 2] grew up within a nuclear family before the loss occurred- for this context a heterosexual married couple and 3] grew up within South Africa. Factors that were excluded then are same-gendered families, cohabitating families, divorced families etc.

A sample is the specific group of individuals from whom the researcher would have collected data from (McCombes, 2019). Thus, the sample consisted of participants from different

backgrounds: socio-economic status and religion in order to provide a better understanding in terms of diversity. The sample size came to 10 participants in total and was divided into 2 subgroups according to the same-gendered parental loss [5 participants] and the opposite-gendered parental loss [5 participants] which made data storing and capturing easier.

The participants were chosen using non-probability sampling: specifically snowball sampling. The population this study focused on is relatively hard to access, thus, snowball sampling was applicable and the most appropriate to recruit participants through other participants and made them accessible in this manner (McCombes, 2021). The studies' specific demographics will be discussed below.

3.4. Demographics of the study

The term demographics refers to specific characteristics within a population or sample and can range from age, race, gender, religion, socioeconomic status among many(Salkind, 2010).

As you can see in the table provided below, the samples' ages ranged from 21 to 53 years old, the average age being 29 years old. The racial ratio of the sample came to 3 black participants and 7 white participants, the gender differences came to 8 female and 2 male. The socio-economic status of the participants throughout their childhood was that 3 had stated that they were "very poor" or according to them "that was very difficult", 3 were average and 4 were above average or according to them "we didn't struggle with that". The participant's location throughout childhood is difficult to pinpoint exactly as some had moved once or twice, however, 5 grew up in Limpopo, 1 had previously stayed in the Free State and another in the Western Cape and both had then moved to Gauteng, thus Gauteng had 5. One of the participants moved to Namibia later on in their lives from South Africa. Thus the demographics of the study will be discussed on the next page through the use of a table and then a detailed table will follow in another table thereafter.

Table 3.4.1

Overall Demographic characteristics of the sample

Demographic Characteristics	Sample [N=10]	Percentage (%)
Age of Loss		
Birth- 5	1	10
5-10	3	30
10-15	6	60
Current Age		
20-25	7	70
25-30	2	20
50+	1	10
Gender		
Male	2	20
Female	8	80
Same-Gendered Loss	5	50
Opposite Gendered-Loss	5	50
Socioeconomic status [childhood]		
Very Poor	3	30
Average	3	30
Above Average	4	40
Location [childhood]		
Limpopo	5	50
Gauteng	5	50

Note. This table merely describes the socio-demographic characteristics of the sample used for this study.

Key	
n	Sub-population number
%	Percentage

Table 3.4.2

Detailed Description of the participants in the sample

Participant No & Pseudo Name	Gender	Gendered loss	Age	Age of Loss	Socio-economic Status	Race	Impact in Adulthood	Secondary Losses	Extent of Secondary Losses
1, Sarah	Female	Same-gendered loss	24	1year, 4 months	Very Poor	Black	Negative	Yes	Suicide
2, Beth	Female	Opposite-gendered loss	26	10 years	Average	White	Positive	Yes	Bad relationship with Mom
3, Jacob	Male	Opposite-gendered loss	23	10 years	Above average	White	Negative	Yes	All fictitious
4, Amy	Female	Opposite-gendered loss	54	8 years	Very Poor	White	Both	Yes	Financial
5, Mary	Female	Same-gendered loss	21	13 years	Very poor	White	Negative	Yes	Suicide, Drugs
6, Samantha	Female	Opposite-gendered loss	23	6 years	Average	White	Both	Yes	Financial, lost father's family
7, Jade	Female	Opposite-gendered loss	26	12 years	Above average	White	Negative	Yes	Lack of presence
8, Naomi	Female	Same-gendered loss	25	9 years	Average	Black	Both	Yes	Cooking, cleaning
9, Charmaine	Female	Same-gendered loss	22	15 years	Above average	White	Positive	Yes	
10, Ben	Male	Same-gendered loss	27	14 years	Above average	White	Negative	Yes	Financial

Note. This table merely describes the specific details and outcomes associated with the sample used for this study

3.5. Data collection procedure

Data was collected based on the participants' experiences of losing a parent during their childhood, and how it may have impacted them as an adult. Demographic characteristics were also obtained as explained in-depth previously, specifically regarding age, gender, socioeconomic bracket, race, and location where they grew up.

This data was collected through semi-structured interviews that were a maximum of 90 minutes long, however, most took a maximum of an hour. The advantage of doing interviews is that the research could collect supplementary information about the participants' personal characteristics and their environment which contributes to interpreting the results, it is a more flexible approach and thus allows the possibility of posing new questions (Desai, 2016). According to Desai (2016), the flexibility thereof makes it a superior technique that allows exploration of areas where there is not much knowledge in terms of what to question specifically and how to formulate the questions. However, personal experience and the loss of a parent throughout childhood is what anticipated the main research question and thus, the questions posed throughout the interview were based on personal experiences and thus provided guidance in terms of what to question- such as secondary losses for example and what resources the child had at that point in time and if they didn't have any, what would they have liked access to.

The interviews took place online to adhere to COVID-19 protocols; the online platforms consisted of Zoom and MS Teams. Furthermore, the advantages of this specific method of using the online platforms were advantageous as it saved money in terms of possibly having to travel and also enabled access to many participants within a short time frame (Allen, 2017). The participants voluntarily chose to participate as there were no incentives provided and the data collected was stored on a password-protected laptop.

There was one “measure” used throughout this study which was in-depth interviews. They were semi-structured and took place for a maximum of 90 minutes. The interview started with some basic questions, such as the participants' age, which parent passed away, their religion, and socio-economic background.

Some questions were asked about the parent that passed away; an example, would include, 'What was your relationship with your mother/father that passed away?'. Following that, some questions were based on the challenges posed specifically in childhood; this included an explanation of secondary losses and thereafter asked, 'What secondary losses do you believe you went through [if any]?'.

After that, there was another section that mainly focused on the effects in adulthood, whether negative or positive. This included questions, such as, ‘Do you think your parental childhood loss has had a negative or positive impact on your life currently during adulthood?’ and these were followed up with appropriate questions in regards to the response received from the participants. Otherwise known as probing[22] which in the end enhances open-ended questions as it allowed the researcher to focus on specific details, this is an additional benefit as an open-ended question may get a response that might address something else that the researcher possibly hadn’t thought of before which may be significant to the research (Reynolds, 2017). The interview schedule forms part of this research report and is found in Appendix C on page 107 to see exactly what questions were asked and the sequence thereof.

The interviews were recorded by using the record function on Zoom and MS Teams and were thereafter downloaded and transcribed through the use of online software called Otter which

[22] Follow up questions

develops speech-to-text transcription. The speech-to-text transcriptions from Otter were double-checked by the research to ensure that there weren't any mistakes or any misunderstandings and these transcriptions were used for the thematic analyses that will be described in depth later on.

3.6. Ethical considerations

Ethical clearance was given from the Human Research Ethics Committee (non-medical) with protocol number SOCL-2021-09 within the department of Sociology by the University of the Witwatersrand.

3.6.1. Informed consent

The participants gave written consent for the interview and were made aware of what the study entailed, their role(s) therein along with the possible risks or benefits which were explained in the Participant Information Sheet (PIS).

3.6.2. Confidentiality and Anonymity

The PIS also emphasized that no information regarding the participants' information or identity was given out and was anonymized within the report. It also stated that confidentiality was provided as the respondents being interviewed were anonymized throughout the data collection process with regards to other respondents and throughout the report. Talking about parental loss that occurred throughout childhood could have brought up past experiences – whether positive or negative, thus, if needed, participants were either debriefed or referred to psychological services. The details regarding the psychological services were made available in the PIS.

3.7. Thematic Analyses

A thematic analysis was used to analyse the interviews, as this was the most applicable and appropriate way to analyse qualitative data. It is usually used in conjunction with interview transcripts as it allows the researcher to closely examine the data to identify common themes and

patterns throughout the interview (Caulfield, 2019). Thus, it was perfect to analyse the interviews and to retrieve relevant themes, patterns, or data in order to answer the research questions posed earlier.

A deductive approach was used as this involved assessing the data with some preconceived themes that are expected to be found based on theory or existing knowledge, which inevitably were what contributed to the research questions (Caulfield, 2019). Thus, the research questions and literature review gave a strong idea of what kinds of themes were expected to be found.

Furthermore, 6 steps form part of the guidance in terms of how to formulate thematic analyses which will briefly be discussed. [1] *Familiarisation* is getting to know the data before analysing, a good way to do this is through transcriptions, [2] *Coding* is highlighting the sections within the text and labelling or coding them to describe the content, and [3] *Generating themes* which help identify patterns among the data and starts generating themes which are broader than codes, several codes combine to form a theme. [4] *Reviewing themes* involves making sure the themes are useful and accurate representations of the data, [5] *Defining and naming themes* involves naming and defining each of the themes as this helps formulate what the researcher means by each theme and how it may represent the data and [6] *writing up* involves writing up the analysis of the data within various chapters that make up the results (Caulfield, 2019). These are the steps that were used to analyse the data that was collected throughout the interviews.

3.8. Limitations of the Study

There are a few limitations that were encountered throughout the research, the main limitation was that the researcher had initially hoped to interview 12 participants, however, it became difficult to find participants that had lost the same-gendered parent throughout childhood and thus, ended up with 10 participants. This indicates that by using the specified sampling technique, it is evident that more participants had lost the opposite-gendered parent throughout childhood

than those who had lost the same-gendered parent. As a result of this, it could have influenced the data, however regardless thereof, some common themes and issues occurred among the 10 participants.

A potential challenge for the study could also be the sample choice [specifically the diversity] although it assists and allows exploration of the topic, it is still in the end difficult to attribute the meaning of these findings to those differences occurring.

Although covid-19 protocols kept changing, online interviews were the safest option and method to stick to, however internet connectivity and data had to be something that the participant would have had access to, fortunately, this was not a problem throughout the research process, however, it could affect the data as it is more of a luxury to have WIFI and access to this within South Africa.

A possible limitation reflecting back after the research was conducted and which could form as a shortfall of the study would be that there are various qualitative nuances specifically within ‘negative’ and ‘positive’ and thus these should have been explored more in-depth. As the outcomes amount to more than being merely positive, negative or both and thus is ultimately very complex. More in-depth limitations pertaining to the study will follow below.

3.8.1. Emotionally Taxing

Another challenge was that although the interviews were time-consuming in general lasting anywhere from a minimum of an hour to about an hour and a half at the most. The topic researched that was discussed and explored is relatively difficult to discuss, and thus the interviews had taken an emotional toll or had made the researcher more tired than expected, therefore a maximum of one interview could be conducted per day, realistically.

It is emotionally taxing as throughout the interview process the relationship that develops between the participant and the researcher often facilitates the disclosure of emotions, depending on the topic explored, such as this one. However, it is often neglected that there is an emotional component within qualitative interviewing for both parties- the researcher and the participant. There is a profound effect when asking people to share their personal stories as participants may experience emotional distress, how they deal with these emotions, and also exploring the significance of these emotions while being interviewed (Mitchell, 2011). Thus, this is an important aspect that needs to be taken into consideration by the researcher before the interviews are conducted and there needs to be a plan for if the participant experiences severe emotions or distress, such as indicated within Appendix A [the Participant Information Sheet] where it provides a free counseling service known as the South African Depression and Anxiety Group and Psychological services at Lemmer Psychologists. Another limitation is memory as the questions refer back to the individual's childhood and upbringing which will be discussed below.

3.8.2. Memory

It is suggested that the science of memory and psychological trauma needs to be considered when it comes to the approaches and techniques used in interviews. This awareness is important because if someone is interviewed in a stressful or straight forward manner without any compassion, they may be intimidated or doubt themselves which could inevitably hinder them from recalling crucial information. Memories that are associated with any traumatic experience are encoded in the brain differently in comparison to the normal, everyday memories (Government of Canada, 2017). Thus, memory is something that may be difficult to solely rely on in terms of the accuracy of the information retrieved throughout the interviews. However, various participants spoke about various aspects in-depth and in detail as if the loss occurred yesterday, the oldest respondent who has to refer back the most, actually said:

> *"But it's amazing how well I can remember the detail now that I'm talking to you thinking back and I can remember the details"* (Amy, age of loss 8, opposite-gender, interview).

This indicates that although memory might be a limitation the participants could still reflect in-depth and speaking about it brought more of their memories back in the end.

3.9. Conclusion

This chapter indicates the methods that were followed and used throughout this research study, and are based on an appropriate research design, it also explained the sample and sampling procedure, the specific instruments used, the appropriate data collection procedures, ethical considerations, and how the data was analysed along with the limitations of the study. Thus, the results or main findings will follow within the next couple of chapters.

CHAPTER 4: THE FACTORS AND EFFECTS OF CHILDHOOD PARENTAL LOSS ARE NOT UNIFORM

4.1. Introduction

This chapter is going to describe the different factors that have an impact on the effect(s) of childhood parental loss throughout childhood and adulthood. This section will demonstrate that although there is a similarity being the loss of a parent throughout childhood, there are numerous factors that vary afterward or inevitably play a role and thus lead to the individuals' experiences and perceptions differing immensely. Thus, this chapter will indicate the individualistic nature of losing a parent, along with the subjectiveness thereof by reflecting and demonstrating the different responses and effects discovered throughout this research.

This affirms one of the main arguments and a part of the main research question regarding the overall contextual factors of childhood parental loss and the impact thereof on both childhood and adulthood. There are countless variables or factors that could contribute to the impact that childhood parental loss may have throughout childhood or adulthood, however, the ones that seem to play a key role are the age of loss, the relationship with the parent that passed away, the relationship with the remaining parent and which coping mechanisms may have been adopted by the child at that point in time. Another important aspect in terms of the overview of childhood parental loss involves a special case that indicated the problematic nature of the definition of loss and it merely referring to death. Loss is a very complex topic, thus what constitutes loss can differ from person to person which proves the definition thereof to be problematic and broad as will be discussed later.

The experiences along with the perception of childhood parental loss differ from person to person as it is highly subjective, thus there is a great deal of variation in responses based on several

factors. Thus, any policies or programs that may be designed to assist children or families who have lost parents would need to take this diversity into account as a standardized approach might help some children but may not help others. There are other implications thereof as well such as the social factors that impact grief and how grief may be experienced.

However, this all provides an indication that there is a greater need for this topic to be studied, the struggles therein, and the need for changes or programs to be implemented. Such as additional social support services, or a specified and in-depth assessment with an individualised program or approach in response suited for the child- this will be discussed in greater depth in chapter 7. By focusing on the respondents' experiences, a detailed understanding encapsulated how loss is complex and experienced differently, thus the multiple factors that will be discussed show how it influences that complexity. Furthermore, childhood parental loss is not merely one experience, it is multifaceted and complex because people and their relationships are multifaceted and complex. Thus, this chapter is aimed at showing this complexity of loss and will focus or present information regarding the factors to show the complexity, individualistic and subjective nature thereof, while the upcoming two chapters show the implications thereof.

4.2. Age of loss and perception or understanding thereof at the time it occurred

As explained within the literature review, the age that the loss occurred has an immense impact on childhood grief and moreover how the child may react, understand, or perceive the death or loss of their parent (Haley, 2013). Thus, it forms one of the contributing factors as to what impact the loss may have on the child and how the child goes on about life at that stage.

Some typical grief responses occur according to different age groups; however, every child differs as mentioned previously, moreover, age of loss is an important factor as it could impact how the child reacts to their parental loss in various ways.

> *"I walked into the living room and my mom was crying, my sister was crying and I asked like what happened and then they were like, yeah sorry. You know, it was even the neighbour that had to tell me, one of my dad's friends like he was the neighbour that had to tell me oh yeah this is what happened. And then everybody was just crying and I wasn't crying because I didn't understand"* (Samantha, age of loss 6, opposite-gender, interview).

The paragraph provided above suggests that the child didn't indeed grasp or understand what was happening, as she didn't cry as stated whereas everyone else was crying which is seen to be a normal response in this kind of situation. Thus, although the respondent was confronted with the news, the reality thereof had not been realised. Whereas an older respondent who seemed to understand the concept, only reacted when put into a situation wherein the parent that passed away played a major role as seen below.

> *"I think the biggest thing that I felt was his, the lack of his presence with my sport. So the first tournament I played, after my dad passed away, I couldn't even finish my first game. I was so unbelievably emotional and I literally walked off the court and I couldn't, I was crying so much I couldn't even see the ball"* (Jade, age of loss 12 years, opposite-gender, interview).

The paragraph above suggests that the situation became difficult when she realised her dad wasn't there and he had always been there in the past, thus this made her upset indicating that she may grasp the reality of death more than the child had in the previous example at the age of 6. Moreover, this indicates that the differences among the ages may impact how the child reacts and their understanding of death and the finality thereof.

Thus, although the age of loss is an important factor and this could shape how they might have perceived or understood the occurrence at the time, there is a commonality occurring among the different ages as well.

> *"I'd wake up, and it's all the way back on December 8, and none of this had ever happened. You know, sort of just like, constantly hoping that everything throughout your day was just a nightmare. And, you know, it's just this continuous nightmare that you're looping through in your head. pleading for things to be different, all sorts of stuff like that. I mean, the amount of like, imaginary scenarios I would make up in my head, just to sort of like explain to myself as a kid, now, listen, this is what you're experiencing"* (Jacob, age of loss 10, opposite-gender, interview)

> *"Sometimes it still feels like a dream but the next morning you wake up and it's still, still the way it is*" (Mary, age of loss 13, same-gender, interview)

> *"I kind of convinced myself that it wasn't real, and that like one day, he would just appear out of nowhere and then tell me that oh, I was like a spy or I have to do this you know, I had to fake my own death"* (Samantha, age of loss 6, opposite-gender, interview).

The experiences provided above indicates that the individuals had made scenarios up in their head to protect themselves from the reality that had occurred and to try and help them work through what exactly they had experienced. This is just to provide insight and to provide a detailed picture of how unfathomable the loss of a parent is and how overwhelming it can be to that individual no matter their age. This indicates that although there are different understandings of death and different reactions as provided earlier, there is a commonality that the children came up with various ways to try and protect themselves from their reality. The relationship between the child and the parent that passed away also plays a massive role and has a big impact when the loss occurs, this will be explored next.

4.3. Relationship with the parent that passed away

The status of the relationship at the time of loss between the child and the parent that passed away is an important factor and thus inevitably plays a role and has an impact.

The first close attachment in most people's lives is the parent-child attachment. This relationship sets the foundation for many facets in a person's life, ranging from how you think about yourself, gender roles, romantic relationships, etc. So even though you may not have a good relationship with your parent or aren't as close, the loss of this important relationship still reaches deep into your psyche (Tschampa, 2019). Tschampa (2019) also states that even if you are estranged[23] from your parent or vice versa, you may still experience additional and unique aspects of grief. According to Kirsch (2018) the loss of a parent with whom a child may have had a strained relationship can be more severe or painful.

> *"So I couldn't, I didn't breastfeed. I didn't, didn't form that attachment with her" and "So when people ask me about my biological mom, I call her by her name and my grandmother as my mom"* (Sarah, age of loss 1year and 4 months, same-gender, interview).

The above paragraph indicates that the respondent didn't have some of the aspects of early-life bonding as it wasn't possible. Thus, she didn't experience that significant parent-child relationship to an extent that she didn't even refer to her biological mother as her mom but instead gave this title to her grandmother. However, this didn't make the grief and loss any easier for the respondent as seen in the comment provided below:

> *"I've made peace with the fact that I can live with the pain, you know, the pain doesn't go away. But I can, you manage to live with it. As much as you would wake up one day and*

[23] Of a person that someone is no longer close to or affectionate to, basically alienated

be like, I really miss her. Oh, my gosh, you know, you won't get, it won't get to a point where I was a child and I will just start slitting my wrists, you know because I can't cope with missing her. So I think it has it has gotten better. But I know that the pain and the hurt is still there" (Sarah, age of loss 1year and 4 months, same-gender, interview).

The description provided above regarding the respondents' experience and feelings indicates the extent of the pain. Although she stated earlier that no attachment took place, there is still a longing and missing feeling taking place now, with a substantial amount of pain or hurt.

Nonetheless, it is also important to examine the opposite continuum, the good and stable relationship between the parent-child.

"My dad was my person" (Beth, age of loss 10 years, opposite-gender, interview).

"Baie mamma vas" (Jacob, age of loss 10 years, opposite-gender, interview).

"We were besties" (Samantha, age of loss 6 years, opposite- gender, interview).

"Very, very good" (Jade, age of loss 12 years, opposite-gender, interview).

As evident above, although it is just a few snippets, the majority of the respondents had a better relationship with the parent that had passed away, and in some cases, this seems to have created a situation where the relationship with the remaining parent suffered. This specific factor will be discussed in the next section.

4.4. Relationship with the remaining parent

The relationship between the child and that of the remaining parent can also vary quite drastically after the other parent has passed away, whether it gets better or worse. According to Fowler (2013), a mother's death can alter the dyad in a father-daughter relationship, as it is more difficult for the man to teach his daughter to be a woman. Whereas on the other hand, Rosenthal (2020) states that her relationship with her dad changed after her mom died and what she had learned

from embracing a new dynamic- taking Taekwondo lessons with her remaining or surviving parent- her dad. As a result of that their relationship improved immensely. However, the majority of the respondents from the interviews experienced that their relationship with the surviving or remaining parent struggled or suffered after the time of loss.

> *"The first few years was tough. I was really, I was a bitch to her, I was like really, really mean" and "Everything she said I just said like you don't understand me, I'm not your child, I was mean"* (Beth, age of loss 10 years, opposite-gender, interview).

The above-mentioned comments portray the relationship that she had with the remaining parent at the time of the other parent's passing but also indicate the extent of the problem, however, a couple of years later, it seemed that it had improved as stated in the reflection quoted below.

> *"Anyway that's how I was until let's say 13, 14 then I calmed down a lot" and "But this year, so I wrote her a letter telling her that, I'm sorry for the damage that I've caused from my side and that I'm working on my communication"* (Beth, age of loss 10 years, opposite-gender, interview).

In contrast, another respondent stated that they had started to grow apart at the time of the loss, however, at this point she does not have anything to do with her dad as seen in the snippets provided below.

> *"We were slowly starting to drift away, but I started drifting away from him because he was giving his attention to other women and I didn't like that" and "Well at this present moment, my dad is currently nothing to me"* (Mary, age of loss 13, same-gender, interview).

This indicates that it could either improve over time or get worse, however, this plays a vital role as it could make things more difficult or easier for the child throughout childhood, as it could either increase the number of secondary losses that occur, or it could decrease it. However, it also

depends on various subjective and individualistic factors, of which one of them are coping mechanisms. The child may have a greater chance of adopting negative coping mechanisms if their relationship with the remaining parent is poor, this will be the focus next.

4.5. Coping mechanisms that were adopted by the child at the time the loss occurred

Coping mechanisms are just as individualistic and subjective and thus can also vary from being positive to negative to being constructive or deconstructive. Coping mechanisms are strategies that people adopt or use when they face stress or trauma which are supposed to help them manage their painful or difficult emotions. Coping mechanisms may help people adjust to stressful or traumatic events by helping them maintain their emotional well-being (*Coping Mechanisms*, n.d.). Signs of distress include working to give the appearance that they are coping well meantime they aren't, and the individuals may act out or may even engage in dangerous behaviour such as risk-taking which ranges from drugs, alcohol, etc (Haley, 2013). Thus, these signs of distress can come across as coping mechanisms, unhealthy ones in the long term as you could become addicted and reliant on drugs or alcohol.

> *"I used to cut my legs and my stomach where nobody could really see it, basically, my coping mechanism was self-injury, self-inflicted pain" and "I've also ended up in a rehab for two weeks during my matriculant year. I started doing crystal meth, cocaine and all that just to get through the pain"* (Mary, age of loss 13, same-gender, interview).

As indicated in the paragraph above, there are also very deconstructive and unhealthy coping mechanisms that can ruin your life, such as drugs. However, not everyone adopts these kinds of coping mechanisms, and it isn't a fixed factor forever, it can change as you get older. Moreover, it is also very subjective and individualistic and thus differs from person to person. As seen below, people have different ways and means of coping and thus adopt different coping strategies or mechanisms that can also change over time.

> *"At that stage, uhm definitely speaking, and now writing, I love writing. I wrote, the first time that I realised this is really like, ultimately real, was actually a poem that I wrote for my father. And that only happened 10 years after he passed away"* (Beth, age of loss 10 years, opposite-gender, interview).

This illustrates that each person adopts their own coping mechanism, whether it be a healthy, constructive one or a negative, deconstructive one. It also proves that it isn't a set factor or standard and can indeed change throughout time and differs from person to person.

4.6. Problematic nature of the definition of loss

It has become clear that it is problematic to merely refer to loss as death, as it has become evident through one of the respondents that loss and grief as the reaction can indeed also occur without the parent passing away. Delher (2017) states that although they were also grieving, the only difference is that the person they were grieving was still alive, and that type of loss is often unrecognized and is a result of various factors: mental illness, alcohol, drug abuse, and dementia being the most common types. Thus, the respondent lost their mother to vascular dementia from the age of 15, and thus, although she was still alive, she had lost her years ago as indicated by the respondent below.

> *"When I say I lost my mom, I mean, I don't, in my mind, I lost my mom years ago"* (Charmaine, age of loss 15, same-gender, interview).

The respondent also indicated that as soon as her mother started declining, she would control and abuse her as seen in the response below.

> *"I would get home and then there would be like little labels on the food that says you can't eat this now wait until dinner, have this for lunch. And then it would be like a salad. And it wouldn't have cheese or anything, it would just salad and cucumber. And there would be water and things like that all the juice and all the coke and things she would*

hide away from me because she was scared, I would drink it or I would eat it" (Charmaine, age of loss 15, same-gender, interview).

This indicates that the term loss merely referring to death is problematic as this respondent's mother was still alive, however, she had lost her to dementia and thus she was not the same person as who she was beforehand. Moreover, this then is an unexpected but important finding, as their grief is just as important and acknowledgeable as someone whose parent has died. Thus, not only are the responses to loss varied but even what constitutes loss is varied, furthermore showing the diversity and the complexity of experiences of loss as well.

4.7. Conclusion

The various factors that may have an impact regarding childhood parental loss are very extensive and thus, the diverse experiences outlined in this chapter show the variation in the way that children respond to parental loss. Thus, it is evident that the effects of parental loss are not uniform, and each person experiences it differently, this involves all the different factors as well- age of loss, relationships between child-parent, coping mechanisms, and even the perception or understanding of the term loss. Moreover, it is a very dense topic and although there is a perceived commonality- loss, this is itself not a commonality, as the term loss is proven to be problematic, the age that the loss occurs differs, all these factors, responses, and consequently the effects thereof differ as well.

Thus, this chapter focused on various factors as stated previously, and just shows that childhood parental loss is incredibly complex, has various different outcomes, experiences throughout and these scenarios or snippets from the participants indicate the complexity thereof. Although they all lost a parent throughout their childhood their stories, experiences, understandings, perspectives and feelings in response thereof differs and thus is very complex.

CHAPTER 5: IMPACT OF CHILDHOOD PARENTAL LOSS THROUGHOUT ADULTHOOD

5.1. Introduction

This chapter will focus on the impact that childhood parental loss has throughout adulthood. Thus, this section will demonstrate what secondary losses may have occurred after the primary loss and the extent thereof. It also involves the overall impact with a focus on the effect on adulthood and the factors that influence this impact. These factors include the presence of role models, the grieving process, and the availability of resources at the time of loss.

As indicated in the literature review, there are numerous ways to how childhood parental loss may have an impact on the individual during adulthood which ranges from smaller or less serious issues to greater, more serious issues. The previous chapter suggested that there may be a great deal of variance from person to person, thus, the impact thereof may also vary throughout adulthood. This will be the focal point throughout this chapter, to establish any trends or patterns from the data.

5.2. Secondary Losses

As explained previously, secondary losses are what occur after the primary loss- losing the parent, thus it is anything thereafter, and this can range from smaller issues to bigger issues such as financial, psychologically, etc. It is evident that most of the respondents had experienced secondary losses, some were more severe than others, however, a few snippets will be provided to create a better understanding of what these secondary losses entail.

> *"During that period of time, um, I think mostly, I just detached emotionally and mentally from my family" and "Obviously, I lost a bit of my grandmother because she was also*

grieving, so she, she changed" (Sarah, age of loss 1year and 4 months, same-gender, interview).

"Um definitely going back to school, especially since, because my mom was a secretary at our school, it was very difficult because now obviously, they have to find a replacement for the secretary, but I mean, in a child's mind, you're not finding a replacement for the secretary, you're finding a replacement for your mom" (Jacob, age of loss 10, opposite-gender, interview).

"It was financial, and the thing is because my dad died, my dad died after being so sick so long, he had no life insurance, so when he died, there was nothing, nothing. So yeah, that impacts a lot, having a dad that goes quicker and that leaves some money behind for the family to support them, it does help, having that emptiness, but at least you know you cared for" (Amy, age of loss 8, opposite-gender, interview).

"Secondary losses yeah, because we kind of, we kind of fell out with his part of the family, they weren't there and then after some time they just weren't there" (Samantha, age of loss 6, opposite-gender, interview).

These numerous snippets above provide an overview that these secondary losses range and that they are likely to occur as a consequence of the loss of a parent. These secondary losses range and could cause issues at a later stage or continue to be a difficulty in one's life as seen in the quote provided below.

"At that time, you are not aware of the secondary loss till you're older, so one of the biggest things for me and still, like I'm battling with it, like almost late into my 20s now, but cooking, I didn't have a proper, like foundational grounding in terms of cooking" and

> "*we're gonna use Handy Andy to do this because that's going to give you the better outcome*" (Naomi, age of loss 9, same-gender, interview).

This shows that although it was a secondary loss throughout her childhood as a result of nobody being there and being available to teach or guide her, it has now been carried into her adult years and is still a problem from her perspective. These two tasks, cleaning and cooking usually form part of a basic task that is performed daily, however are taken for granted and appear to be easily implemented by those that had the underpinnings thereof. This shows how the loss of a parent can disrupt such a basic task or understanding for the rest of the individual's life, never mind the other effects it may have on adulthood. It is important to assess how having role models and having motherly or fatherly figures may help or hinder one's feelings after the loss, throughout their childhood and adulthood, this will be the next foci.

5.3. Impact of role models

Adults responsible for raising a child tend to adopt different roles, in a nuclear family, these often take the form of what is traditionally conceived of as "motherly" and "fatherly" roles. Families take many forms and among those forms parental roles vary, thus in this study, to allow comparability among the respondents, I have focused on nuclear families with a mother and father. However, the findings of how the loss of a father or mother figure affects the child within a nuclear family would also apply in many instances where parental roles differ, such as extended families, same-sex parents, etc.

However, there is a reason as to why it is important to have role models throughout childhood and while growing up, as parents generally adopt contrasting or complementary roles, thus the loss of a parent entails the loss of a role model for that specific role. However the majority of families in South Africa as mentioned in one of the previous chapters are not nuclear families,

thus the so-called ‘traditional’ role divisions are not necessarily mapped onto mothers and fathers specifically. It could be aunts, grandparents, uncles, older siblings, etc who play various roles. Furthermore, it is inevitable then to be aware of what implications this could have for the child throughout their childhood and specifically the possible effects thereof in adulthood.

There are various reasons as to how not having a mother could affect a child. According to Pal (2020) mothers are believed to provide care in a unique manner throughout childhood in ways better than what fathers do. However, this is due to the socially defined role of the “mother”. Thus, because there are socially defined and specifically gendered roles associated with parents and parenthood, the loss of a mother and a father is different.

Thus, the role of a mother cannot simply be replaced and as a result, it may have an impact on the child’s development, as children tend to prefer their mothers over their fathers at certain times in their lives and this involves when they seek emotional support, feeling hungry or sick and when they go through distress (Pal, 2020).

Pal (2020) suggests that children are more likely to become more hostile and can even become anti-social when the mother is absent and children that don’t have a mother in close proximity also have a higher rate of growing up emotionally immature and detached. Some of the common emotional issues with these children can include, but are not limited to *(1) rigidity:* low level of capability to adapt to changes, *(2) low-stress tolerance:* makes them vulnerable to experiencing various psychological disorders, *(3) emotional aggression and instability:* social issues and suicidal tendencies, *(4) cannot form healthy relationships:* which could have lifelong consequences and *(5) attention-seeking:* and may struggle with life in general (Pal, 2020). Thus, it is important to assess whether any role models, motherly or fatherly figures were involved and what impact they had, if any, and how other adults may have fulfilled these roles in the case of parental loss.

All of the participants in the study were fortunate enough to have role models, motherly or fatherly figures part of their lives, and it is said that they had a positive impact, possibly made the loss easier to cope with and helped in various ways as indicated in the comments below.

> *"So my aunts as they moved out and started having their own lives, they became like, also a huge impact in my life. And they helped me through all of those, you know, things that I needed to know, like, my period"* (Sarah, age of loss 1year and 4 months, same-gender, interview).

> *"He helped me to drive, to learn to drive a car and everything like that. He gave me a little car to get up and down his driveway and stuff like that, so yes, I did have a male role figure that helped a lot"* (Amy, age of loss 8, opposite-gender, interview).

The above comments indicate that an adult role model, motherly or fatherly figure(s) may help with these additional but basic aspects in life, whereas without the right support these minor, basic tasks or aspects could be missed and may result in additional consequences occurring- this will be explored in the next chapter.

> *"No it definitely made it easier. Definitely, definitely made it easier. I think because I wasn't, I never wanted to go to see anyone, like to a psychologist or anything, so those people were my, my vents you know, I went to vent by them, you know, I knew they were my safe haven"* (Beth, age of loss 10 years, opposite-gender, interview).

This indicates that although sometimes individuals may prefer to see a psychologist and seek help professionally from the beginning, this respondent preferred getting that kind of support and help from their role model instead. This shows how significant these roles and figures are to some individuals and the impact they may have. Another comment below shows how significant these role models or in this case a fatherly figure can mean to someone and that they are also grieved

when they pass away. Moreover, it can sometimes be worse than the primary or initial loss- being the parent.

> *"Definitely, my grandfather, my dad's dad, he meant a lot to me. He passed away four years ago, for our five years ago, so that was, his death felt more traumatic than my dad's"* (Jade, age of loss 12 years, opposite-gender, interview).

Thus, it is evident that any adult role model or motherly/ fatherly figures are important and play a huge role and contribute positively towards the individual's life throughout childhood and adulthood after one of their parents has passed away.

5.4. Accessibility to resources at the time the loss occurred

It is vital to also assess the accessibility the individual had to any external resources at the time of the loss, such as psychological services, additional family support, etc. This is also a factor that could hinder or help them throughout their childhood and further into adulthood.

Thus, it is advised that a grief counsellor provides support as the death of a parent can bring up past hurt and alter family relationships and dynamics. A grief counsellor, therefore, provides support and helps address any old and new conflicts, and may teach the individual constructive ways to heal and work through the loss. They provide support for the individual to talk about their feelings, their frustration or anger and help them cope and process these events and feelings (Ma, 2017). Some parents believe in counselling and therapy and thus will send their children for these services, however, it is important to assess whether they had the opportunity or not and if they would have liked to have access to these external resources. Thus, it is vital to assess who would have wanted access to external things, who had enough access, and how these two continuums have had an impact on the individual.

> *"When my make or break moment came, I was supported enough, you know I had big resources, I wouldn't have wanted anything else, whatever there was at that moment was*

enough to make me who I am today" (Beth, age of loss 10 years, opposite-gender, interview).

"After he passed away, my sister was the only one that went to therapy, my mom too, but I didn't go, but if I went it was probably just for like one day, it wasn't a continuous process, but my sister went and apparently because of that, that is why I have depression now" (Samantha, age of loss 6, opposite-gender, interview).

Although these two remarks vary, the first respondent didn't see the need for a psychologist as they felt that they had enough support and had what they needed at the time of the loss, whereas the second respondent's remark states the opposite. Thus, it may differ from person to person, but this is an indication that if you have enough support from family, then therapy may indeed not be necessary, however, if not then therapy might be necessary. This is important as many children don't go for therapy and thus are more at risk of suffering from depression during adulthood.

5.5. The impact of childhood parental loss throughout adulthood

The impact that childhood parental loss has throughout adulthood also varies as people have their perceptions and their experiences are unique to their personality, their environment, as indicated above it is also to an extent dependent on their relationships with the parent that passed away, the remaining parent, possible role models and what resources they had access to or not.

It is evident that the impact of childhood parental loss throughout adulthood does vary from person to person as half of the respondents said it impacted them negatively, while two of the respondents said it had a positive impact and the remaining four respondents said it had both a positive and a negative impact on them throughout adulthood. The specifics regarding what contributed to the negatives, positives and both will be included below.

"I would have to say it has a negative impact because I am terrified of having kids at this age. I'm terrified that if I have a kid what happens if I pass away? I don't want my child to go through what I went through, you know, a difficult childhood" and "I have a fear of rejection, I have a fear of attachment, I have a fear of being in a stable relationship because I fear, my anxiety if the person is going to leave me or the person is going to pass away you know, or what if the person won't love me with you know, me still grieving and still hurting?" (Sarah, age of loss 1year and 4 months, same-gender, interview).

"My fear of losing my husband, and my children that it happens to them. That was very real, very real, so like, I'm just thinking, if it happens to that you as a spouse, you don't want to lose your person that you love, to feel that I'm going to feel like my mom felt, I'm going to go through what my mom felt. And I often prayed and I said, God, please protect my husband. I do not want to go through what she went through. Yeah, that impacted, it was a huge impact" (Amy, age of loss 8, opposite-gender, interview).

"Uhm I think if I had to, those days when I was mean and everything. If I chose to continue with that, which I easily could of then I would be, I want to say a washout or something. But I know that I would not, I would have been on such a dark road, you know if it wasn't for my religion, if it wasn't literally for my faith, and the peace that I have you know found in God and just knowing that, knowing what I know. If I didn't make that choice, I would have, it would of been years of crap so I can, with so much confidence, say it was a positive influence" (Beth, age of loss 10 years, opposite-gender, interview).

This shows to what extent the childhood parental loss had on them throughout adulthood and the impact thereof, whether merely negative or positive along with the extent thereof, from the above-mentioned comments it shows that one can to an extent decide what impact it may have

on them, however, unfortunately not everyone can do this. In contrast, it also shows that losing a parent can instil various fears from the loss occurring.

However, childhood parental loss can also have a combination of a positive and a negative impact throughout adulthood based upon various reasons, as seen below.

> *"I would say both, I would say like, positive because it really did teach me a lot about life. You know, from me learning about finances and understanding from a young age that like, you know, nothing is forever, you know, and it really helped me be more appreciative"* and *"The negative, I think there's just, it's kind of skewed my how do I say my perception maybe of life in general, because like, all the men in my life, kind of like, left, and I know that it wasn't like their choice. Or like, it makes me kind of scared to get close to people, even if it's like in a romantic kind of nature because it feels like they might leave, you know?"* (Samantha, age of loss 6, opposite-gender, interview).

The reflection provided above indicates that it had both a positive and negative impact and to what extent specifically. Thus, this also indicates that it isn't merely positive or merely negative but can be a combination of the two as well.

5.5.1. The impact of milestones throughout adulthood

Milestones refer to important stages in one's life, such as a graduation or wedding for example. However, the question that was asked included Christmas time and any birthdays, and it is evident that all the respondents said that during these milestones, Christmas, and birthdays the longing and hurt get worse and increases. This is evident in the snippets provided below.

> *"As I'm sitting here, as a young adult at the moment, I got engaged a couple of months ago, and you know the first thing after getting engaged and letting everybody know, is that my father won't ever see this, he is not going to be here to be a part of it"* and *"It does definitely, every year so far, every year on my birthday I wish my father was present,*

Christmas as well, family time, it definitely makes it difficult. I haven't moved or progressed past that point where I can just accept okay, he won't be here for this birthday, even though he hasn't been there for the past 10 birthdays" (Ben, age of loss 14, same-gender, interview).

"Well on her birthday or on my wedding day, it was quite hard, It feels like there's something missing. Some days it's easier than most but like on their birthdays, or the day they passed away, that's when it will hit you like a runaway train" (Mary, age of loss 13, same-gender, interview).

"I definitely would say birthdays are still not my favourite time of year, birthdays, Christmas, basically anything that happens in December. Because I mean, all I did for the entire month of December, was, you know, attend funerals, have people come to the house and give us presents and shit the whole month. So I mean, that was, that's not a fond memory" (Jacob, age of loss 10, opposite-gender, interview).

This indicates that no matter how much time may have passed by, it is still difficult to not have that person present throughout that special time or occasion and it is indicated that it could have such a negative effect, that inevitably the whole month could become or be a difficult period.

5.6. Conclusion

It is evident that the majority of the respondents had experienced secondary losses as a result of their parent passing away and these range from being severe to small issues. This indicates that the child doesn't merely have to deal with the parental loss but also additional secondary losses and obstacles along the way that occur as a consequence of the parental loss, which inevitably makes the loss and the aftermath more difficult.

A vital finding is that fortunately, all of the respondents had a role model, an additional motherly or fatherly figure, or any other adult role model at the time of the loss who provided some sort of guidance throughout their lives, as the respondents indicated this had an immense impact on their lives. It is indicative that the respondents would have liked to have access to counselling or psychological services at the time of the loss as this may have prevented issues occurring during adulthood- such as depression. Thus, giving the child an option to go for counselling is only beneficial to the child throughout the time of the loss, whether it be play therapy or the usual type of therapy.

Although the overall childhood parental loss impact throughout adulthood differs from person to person, most of the participants indicated that it merely had a negative impact, while a fifth stated it was merely positive and the remaining third had stated it had both a negative and a positive impact on their adulthood. The negative impact that childhood parental loss had throughout adulthood ranged, however, there was a pattern that instilled a fear of either having children or losing one's partner. Whereas the main pattern according to the positive impact that childhood parental loss had throughout adulthood is that it enables one to be more independent and appreciative.

The similarities that were picked up throughout the study were that the respondents who said they had more than enough support and had adequate access to resources didn't experience severe secondary losses and are the respondents who said their parental loss impacted them in a positive manner. Another aspect was that the respondents who come from a "very poor" background have more severe secondary losses that range from suicide to drug abuse etc and stated that the childhood parental loss had a negative impact on them. This indicates that their socioeconomic status, amount of support, and access to resources among others influence the overall impact and severity of the secondary losses.

CHAPTER 6: GENDER DIFFERENCES AMONG CHILDHOOD PARENTAL LOSS AND THE EFFECT(S) THEREOF IN ADULTHOOD

6.1. Introduction

This chapter will focus on the impact that childhood parental loss has had later in life in adulthood, however specifically according to gender. Thus, it will compare the overall impact of the respondents who had lost the same-gendered parent in comparison to those who had lost the opposite-gendered parent. Thereafter, the secondary losses will be analysed to see if there are any differences among the gendered childhood parental losses. Moreover, the overall impact thereof will be discussed first.

6.2. Overall Impact

Assessing the *overall* impact of the respondents will indicate if there are any differences in terms of the impact throughout adulthood between the loss of the same-gendered parent in comparison to the loss of the opposite-gendered parent.

6.2.1. Overall impact of the loss of the same-gendered parent

The overall impact due to the loss of the same-gendered parent is important to assess and is provided below according to the child's gender.

6.2.1.1 Male(s)

Focusing on the male children who had lost the same-gendered parent- thus the loss of their fathers is spoken about below.

> *"How it's impacted negatively is finances quite a lot, I would of most probably gone a whole different route if it wasn't for my dad that passed away. The other negatives would definitely be, is the fact that I won't be able to share my adulthood with my father. Also,*

that I would not be in the same place in my life if my father had not passed, if my father did not pass, we would have immigrated when I was 13" (Ben, age of loss 14, same-gender, interview).

This indicates that the respondent experienced a negative impact due to the financial implication of the loss of the breadwinner and the reoccurring effects thereof and how it might have changed his life forward as he states they would have immigrated when he was 13, thus indicating the life forward might have been better than the current circumstances.

6.2.1.2. Females(s)

Focusing on the female children who had lost the same-gendered parent- thus the loss of their mothers is spoken about below.

"I would have to say it has a negative impact because I am terrified of having kids at this age. I'm terrified that if I have a kid what happens if I if I pass away? I don't want my child to go through what I went through, you know, a difficult childhood" (Sarah, age of loss 1year and 4 months, same-gender, interview).

"A bit of both. I think negative certainly. Yeah just missing that like person who'd have my back come hail come sunshine. So yeah, negative in that sense, but also positive, because I learned to be independent from a young age. And being left with a father, you there's certain things you learned very quickly about survival and making your way around the world and just navigating life" (Naomi, age of loss 9, same-gender, interview).

This indicates that the overall impact is mixed and varies even according to the same-gendered parental loss. From the above-provided snippets, it is indicative that two of the respondents state the overall impact of the loss of the same-gendered parent is negative and one respondent said

the overall impact was both negative and positive. The remaining two respondents said that it was merely positive and the other merely negative as well. A table is provided below in order to make a better understanding of the results according to the loss of the same-gendered parent.

Table 6.2.1.3

Detailed Description of the participants in the sample according to same-gendered loss

Participant No & Pseudo Name	Gender	Gendered loss	Age	Age of Loss	Socio-economic Status	Race	Impact in Adulthood	Secondary Losses	Extent of Secondary Losses
1, Sarah	Female	Same-gendered loss	24	1year, 4 months	Very Poor	Black	Negative	Yes	Suicide
5, Mary	Female	Same-gendered loss	21	13 years	Very poor	White	Negative	Yes	Suicide, Drugs
8, Naomi	Female	Same-gendered loss	25	9 years	Average	Black	Both	Yes	Cooking, cleaning
9, Charmaine	Female	Same-gendered loss	22	15 years	Above average	White	Positive	Yes	
10, Ben	Male	Same-gendered loss	27	14 years	Above average	White	Negative	Yes	Financial

Note. This table merely describes the specific details and outcomes associated with the sample used for this study

Thus, the majority indicated it impacted them negatively overall. It is important to compare the overall impact here to that experienced by the loss of the opposite-gendered parent.

6.2.2. Overall impact of the loss of the opposite-gendered parent

The overall impact due to the loss of the opposite-gendered parent is also important to assess and follows below, according to the child's gender.

6.2.2.1 Males(s)

Focusing on the male children who had lost the opposite-gendered parent- thus the loss of their mothers is spoken about below.

> *"Definitely negative, I think having a mother there for sort of like your adolescence into your young adult stage, at the very least until you're about 18/ 19 definitely has a big input in your your physical upbringing and stuff like that"* (Jacob, age of loss 10, opposite-gender, interview).

From the extract above it shows that the participant said that it would have helped to have their mom part of their life until atleast 18 or 19 years old as it helps with your upbringing and plays a massive role. It is important to assess the female component of the loss of the opposite-gendered parent as well.

6.2.2.2 Female(s)

Focusing on the female children who had lost the opposite-gendered parent- thus the loss of their mothers are spoken about below.

> *"Like I said, both the negative part of it is I always feared my husband, something happens to him, especially since I started family. And then the positive side, I taught my children to, you know, to stand on their own two feet. I had to do it since I was young so they had to do it and they did"* (Amy, age of loss 8, opposite-gender, interview).

Thus, this also indicates a varied response to the childhood parental loss of an opposite-gendered parent as a respondent indicated it impacted them merely negatively while the other stated it impacted them both negatively and positively. While the remaining respondents stated it had impacted them merely negatively, merely positively, and then also both negatively and positively. Thus, an equal amount stated that the loss of an opposite-gendered parent had impacted them negatively and both negatively and positively, and then the remainder stated the impact thereof was merely positive. A table is provided below in order to make a better understanding of the results according to the loss of the opposite-gendered parent.

Table 6.2.2.3

Detailed Description of the participants in the sample according to opposite -gendered loss

Participant No & Pseudo Name	Gender	Gendered loss	Age	Age of Loss	Socio-economic Status	Race	Impact in Adulthood	Secondary Losses	Extent of Secondary Losses
2, Beth	Female	Opposite-gendered loss	26	10 years	Average	White	Positive	Yes	Bad relationship with Mom
3, Jacob	Male	Opposite-gendered loss	23	10 years	Above average	White	Negative	Yes	All fictitious
4, Amy	Female	Opposite-gendered loss	54	8 years	Very Poor	White	Both	Yes	Financial
6, Samantha	Female	Opposite-gendered loss	23	6 years	Average	White	Both	Yes	Financial, lost father's family
7, Jade	Female	Opposite-gendered loss	26	12 years	Above average	White	Negative	Yes	Lack of presence

Note. This table merely describes the specific details and outcomes associated with the sample used for this study

However, it is important to assess the secondary losses that occurred among the gender differences to assess which was possibly more severe in regards to the gendered nature between the child-parent, in comparison to one another between the loss of the same-gender and the loss of the opposite gender.

6.3. Secondary Losses

As indicated earlier secondary losses range and all the respondents experienced these, however, the severity thereof is important to focus on to assess whether the gender between the parent-child has an impact or not.

6.3.1. Secondary Losses of those who lost the same-gendered parent

From personal experience of the loss of the same-gendered parent I learned that there were certain topics that the child had to be informed about by the mother or same-gendered parent, in most cases, thus the question "And who taught you about, like sex and that kind of stuff?" was asked to which the respondent had replied:

> *"Well, I'm going to be brutally honest with you, a few weeks after moving to Hoedspruit when I was 13, I got raped. So that's how I learned about it. And I had cases against them and teachers teaching me things. So I would say, teachers, in a way taught me but was a bit too late"* (Mary, age of loss 13, same-gender, interview).

> *"They are and it drives most people to commit suicide like I've wanted to do it several times"* (Mary, age of loss 13, same-gender, interview).

> *"That caused a lot of depression and then obviously, it leads to taking action, which, which obviously lead to uhm. Sorry, I'm trying to like, gather my thoughts. It also led to I mean, depression. I mean, my first suicide attempt, I was 13, you know, and I didn't, I couldn't figure out why it happened"* (Sarah, age of loss 1year and 4 months, same-gender, interview).

> *"I've also ended up in a rehab for two weeks during my matriculant year, I started doing crystal meth, cocaine and all that just to get through the pain"* (Mary, age of loss 13, same-gender, interview).

As evident in the snippets provided above, it is evident that the secondary losses among the loss of the same-gendered parent are relatively severe, and involve a case of rape, suicide attempts, and drug abuse among others. Furthermore, there are certain life lessons and information one needs to gain from their same-gendered parent, if that doesn't occur it could put the child at risk of being raped as seen in the quote provided previously. These are the severe secondary losses that occurred as a consequence of the primary loss- the same-gendered parent had passed away.

6.3.2. Secondary Losses of those who lost the opposite-gendered parent

It is vital to compare the secondary losses that occurred among those who lost the same-gendered parent to those that occurred among the loss of the opposite-gendered parent. This will be done within this subsection and in the quotes provided below.

> *"No, they couldn't pay the bond. It was financial. Yeah. My mom had to choose. So and well, the house was theirs, so they were paying a bond. And she couldn't afford the bond on her own. So they basically had to get rid of the house and we rented the flat. So it was all about having affordable rent at that stage. And I started sharing a room with my mom, so that was also very hard"* (Amy, age of loss 8, opposite-gender, interview).

> *"Secondary losses yeah, because we kind of, we kind of fell out with his part of the family. ... they weren't there and then after some time, they just weren't there and then yeah, like you said, there were two incomes, because my dad was the breadwinner, and my mom wasn't. So now, she had to kind of like, you know, be the one the one sole provider. So we kind of had to learn from a young age that you know, when it came to finances, we had to just pick what was important"* (Samantha, age of loss 6, opposite-gender, interview).

> *"I stayed by Frankie, and, and my mom, so we still spoke to my mom on the Sunday. And I knew my dad was going to be in hospital for another week. And like, four o'clock in the morning, on a Monday morning, they woke me up and they were like, your moms on her way. And Frankie was like, maybe your dad's coming with. Now obviously you know we just woke up, and we were so confused and everything, and it's four o'clock, why would my dad come? So, I kind of knew he wasn't going to come. But I also had this expectation that he is. And then getting into the car and then hearing that he passed away. Now in my life, I have an issue with people saying they'll show up and they don't. It really that hurts me"* (Beth, age of loss 10 years, opposite-gender, interview).

As evident from the snippets provided above, the loss of the opposite-gendered parent mostly entailed financial losses or obstacles, along with losing contact with the parents' family that had passed away. Another factor was the way the news was received of the parent that passed away- as the individual still struggles with aspects related to that throughout adulthood: when the parent didn't show up, the individual now also struggles when people don't show up in their lives. Thus, the secondary losses experienced by those who had lost the same-gendered parent are more severe in comparison to those who had lost the opposite gendered parent as indicated above.

6.4. Gender differences based on respondents' experiences and perception

Another aspect that was included, was based upon the respondents' personal experiences and their perception of things, was that do they think there is a difference between the loss of the same-gendered parent in comparison to the loss of the opposite-gendered parent.

> *"Yeah, for sure. I think if I had to lose my mom at that age, I would have Yeah, that would have been worse, for sure. You know, like, I keep on saying that. For me, the impact of losing my dad was bad, but it was worse for my brother. And that's because it's the same gender. He actually he immigrated to England. And his words was he doesn't want to stay in a country where his dad died. No, he actually nearly committed suicide, it was hectic for him no, when he was older, even that whole impact, he was really battling with it for all his life"* (Amy, age of loss 8, opposite-gender, interview).

> *"Yeah, I think same-gendered parents, personally for me, is the worst. It sounds bad. It sounds like, I don't quite feel for my father. But I think I would have much rather stayed with my mom. But I really, the touch of a woman for a girl child is unique. It's unique. It's important, it's essential. I can certainly tell that there's that mentorship that comes from the same-gendered parent, that the other gender might mimic even if they try, because I've heard of a lot of people ugh my father's both a mother and a father. And of course, there are people who are brilliant at it, but it just still will never be the same"* (Naomi, age of loss 9, same-gender, interview).

> *"For me, I definitely think it's a different principle. And not only for gender-related, but individually related as well. Because everybody has a different relationship with a father, whether you had a good relationship or bad relationship with them, it's a loss, And everybody experiences it differently. So I can't, you know, I can relate to you to a certain extent, but then, even even if I, you know, some people else who lost their father, I can*

relate to them as well, but you can't say that it's the same. NEVER" (Beth, age of loss 10 years, opposite-gender, interview).

From the quotes above, it is evident that their perceptions vary, thus, the majority state there is no difference and that a loss is a loss and is merely difficult in and of itself. Whereas a fourth of the sample size said that the loss of a same-gendered parent is worse, however half of this group had lost the same-gendered parent and the other half had lost the opposite-gendered parent. Thus, although the individuals may share a commonality- being the loss of a parent throughout childhood, many factors make it unique and different. Thus, although their perceptions and experiences indicate one thing, the reality thereof may differ from person to person, thus it is very individualistic in the end.

6.5. Conclusion

It is evident that there are more negative experiences among the same-gendered parental loss in comparison to the opposite-gendered parental loss. There could be many reasons for this, however, the secondary losses within the loss of the same-gendered parent in comparison to those who lost the opposite-gendered parent are more severe and included aspects such as rape, suicide, and drug use in comparison to financial issues or no contact with the family of the parent that passed away. This could essentially mean that the same-gendered parent may provide more guidance and protection for the child from secondary losses occurring inevitably.

The respondents' perception about parental loss according to gender varies, however, the majority state that there is no difference, whereas a fourth of the sample state that the loss of a same-gendered parent is worse in comparison to the loss of an opposite-gendered parent. Thus, although there is a commonality being childhood parental loss, there are many factors that result in differences occurring as a result thereof.

CHAPTER 7: DISCUSSION, RECOMMENDATIONS, AND CONCLUSION

7.1. Introduction

This chapter will focus mainly on discussions and recommendations regarding the research conducted and revealed throughout this report. This will include analysing the data retrieved in relation to existing literature and then the applicable and appropriate recommendations to reduce the impact of childhood parental loss throughout adulthood along with reducing the severity or the number of secondary losses that occur.

A recap of the two main research questions entails: [1] What are the effects in adulthood of the loss of a parent in childhood? Along with [2] What factors influence these effects? The additional research objectives are the impact of childhood parental loss on adulthood, any secondary losses that may have occurred, the impact of role models, if the loss or longing dissipates, remain constant, or increases over time [milestones], and the accessibility to resources at the time the loss had occurred.

The next section will compare the data retrieved throughout the report to existing literature to assess what this research has added.

7.2. Data in relation to the existing literature

As evident throughout the literature review, there is quite a lot of existing research within this topic or field, however, there are still gaps that could be explored in greater depth as indicated previously within the Rationale. Moreover, the data retrieved, and findings will be compared to existing literature to critically evaluate what the research has potentially added within the field or topic. This will be done according to the order of the sub-research questions and research objectives as stated previously.

7.2.1. Childhood parental loss impact throughout adulthood

From the onset, this study's main aim was to establish what impact childhood parental loss has throughout adulthood. Thus, the results indicate that there is indeed a degree of impact, although the impact thereof may vary, most of the respondents had stated it had merely a negative impact on them: this included suffering from depression as previously indicated by Tyrka et al. (2008), substance abuse as indicated previously by Azuike et al. (2021) and Otowa et al. (2014), and financial obstacles as previously indicated by Case & Ardington (2006). Thus, proving the hypothesis stated earlier correct.

An additional finding in regards to childhood parental loss was that it could instill fear, as some of the respondents had developed the following fears: people not showing up [same way as their parents had passed away- unexpectedly, is similar to people canceling plans or not showing up unexpectedly], being far from a loved one as they are worried something may happen, a fear of having children and them going through the same thing or losing one's partner.

A fifth of the sample stated that it merely had a positive impact as it had taught them a great deal of independence, appreciation, and a lot of life lessons or things in general, as previously indicated by Younge (2015). Thus, providing an unexpected finding and adds additional information to the field. Furthermore, a third of the sample had stated that childhood parental loss had both a negative and a positive impact on them throughout adulthood, however, no literature was provided in terms of this within the literature review. Thus, indicating that the complexity thereof was not known as although positive experiences were considered, the combination thereof was not considered. This was an unexpected finding then and proves that although it may have impacted the respondent negatively, the respondent could have learned to be more independent which is a positive attribute.

7.2.2. Secondary losses associated with childhood parental loss

It is evident that the majority of the respondents had experienced secondary losses. These secondary losses range from smaller issues to bigger, more serious problems such as ranging from financial issues to rape. This coincides with the existing literature previously provided by Rando (1988 as cited in Mahon, 1999) and proves the hypothesis correct, that childhood parental loss does most likely result in secondary losses occurring.

An additional finding regarding secondary losses is that, for the participants of this study, the loss of the same-gendered parent results in more severe secondary losses occurring, involving aspects such as rape, drug abuse, and suicide attempts among others in comparison to the loss of the opposite-gendered parent which includes secondary losses that aren't as severe such as financial issues. There is no existing literature specifically regarding the gendered loss, such as the loss of the same-gendered parent in comparison to the opposite-gendered parent, thus this research adds to the field regarding this specificity.

However, this also conforms with what Haley (2013) stated previously- a sign of distress between the ages of *12 and 20* include but are not limited to specifically suicidal thoughts and both respondents were within this age gap when they experienced this, and the one respondent had made an attempt as indicated earlier.

7.2.3. Role models and the impact thereof

Fortunately, all the participants within the sample had adult role models as part of their lives and this was proven to have had a positive impact and could have essentially made the loss a little easier to cope with. Moreover, this supports the hypothesis stated in the beginning that it made it easier to cope with, however does not specifically address whether it could reduce secondary losses or not.

The importance of a role model was distinguished previously by Steber (n.d.) however, the impact thereof within childhood parental loss within South Africa was not known and thus forms as a new finding and contribution within the field. Thus, also opens doors to new research which could be based upon specific role models and the impact thereof, etc.

7.2.4. The loss and the longing worsen at certain times

It is evident that there are certain times throughout the respondents' lives when the loss and longing are suggested to worsen. These include milestones such as graduation or one's wedding for example, however, also include the smaller important milestones or events such as Christmas or Birthdays. Thus, all the respondents said that throughout these milestones, the longing and hurt increase, regardless of how much time has surpassed since the parent passed away.

Moreover, this coincides with Schneider (2021) as the grieving process does not particularly end and some days are more difficult to get through than others. The respondents stated that it is merely something one gets used to and learns how to cope with throughout the years, thus the societal norms along with the minimal compassionate leave given (Ellis, 2019) is problematic as indicated here as it is not something that ends and is so complex that it cannot have a timeframe attached to it.

It was also evident that grief is an unfathomably unique experience, thus, the respondents had different responses to it, which again supports Schneider (2021) and the critiques of the 5 stages of the grieving process, as this cannot be universal as what may constitute as grief and loss may differ from person to person in the first place.

7.2.5. Accessibility to resources at the time the loss occurred

Whether the child would have liked access to various resources at the time the loss had occurred, also varies from individual to individual. However, it is evident that if the child has enough family

support or the help of various role models, their need for additional or external resources may decrease. However, children that don't go for therapy or who don't have the opportunity due to financial obstacles, have a greater risk of developing depression throughout adulthood. Moreover, this corresponds with Ma (2017) that it is advised that the child seeks support from a grief counsellor as not only does the child have to deal with the loss or death of their parent but also with possible family dynamic changes that could occur. It also provides the child with additional support that they may not have and a way to let their feelings out while still being provided guidance and help in terms of coping.

7.3. Recommendations

As much as this research report covered, there are still areas or gaps wherein future research could be conducted and thus recommendations were made upon this. This includes the following suggestions among many. Firstly, this research was purely based on qualitative methods as discussed previously, a better and more in-depth approach would include a mixed-methods approach, whereby there is both a quantitative and qualitative section. The quantitative could include a questionnaire or be based on secondary data such as from the NIDS dataset, whereas the qualitative would also include individual semi-structured interviews or possibly focus groups.

Secondly, various factors could form the main foci within childhood parental loss and the impact thereof, thus, there are a lot of research topics that still need to be explored. Such as the way the parent passed away- suddenly in comparison to a prolonged death, and how these impact [if any] the child throughout their childhood and adulthood. Or how seeing their remaining parent struggle and grieve and how this has an impact [if any] throughout their childhood and adulthood- as lots of respondents had said it was not nice to see or experience. Thus, I would have liked to have focused more on that or would have liked to dedicate a question to this specificity.

Thirdly, another future research aspect could approach it from the opposite continuum, thus, looking at how losing a spouse or partner impacts the remaining parent and what having to raise a child within those circumstances entail.

Lastly, research that could build on this specific research and the outcomes thereof would be to create a psychological assessment that specifically assesses wherein the child is struggling after childhood parental loss or what secondary losses are busy occurring, and then based upon the assessment it indicates where problem areas may be and thereafter provides the right individualistic treatment tailored to that child's needs. For example, if the assessment suggests therapy, then the child could attend therapy [at a government institution so that it is not costly], or if it suggests the child needs some sort of a role model or any sort of guidance, the treatment could entail a 'manual' or guide written as a children or teens book. This book could entail a range of aspects or chapters based upon age-appropriate teachings or lessons- such as cooking, cleaning, or even the birds and the bee's introduction.

The biggest recommendation is that there is a need for an individualistic treatment plan specified to the child's needs at the time of the loss as this could help prevent any secondary losses from occurring, as this could prevent any negative consequences from occurring later such as depression, relationship issues, trust issues, drug abuse, etc. By coming up with a specified plan, it will enable the child to get the much needed and deserved help that needs to be tailored to their specific needs, thus will also most likely have a higher percentage of succeeding as it takes the individualistic aspects of grief, parental loss, and the response(s) thereof into account, whereas other programs and plans do not do this as mentioned previously such as the Big Brothers Big Sisters of South Africa and Bright Stars. They are both also not specifically targeted or aimed at helping children who have undergone parental loss; thus, such a specified program would be beneficial and is needed.

7.4. Conclusion

In concluding the research, it is applicable to say that the research question and sub-research questions have been answered, thus this will briefly be re-examined below.

The main finding is that there is a degree of impact as most of the respondents had stated that their childhood parental loss merely had a negative impact on them throughout adulthood. While a fifth of the sample stated that losing their parent throughout their childhood had a positive impact on them and a third of the sample stated that it had both a negative and a positive impact throughout adulthood. This indicates that the experience of grief and the response thereafter is unique, thus the need for individualistic programs/ treatments that can be put into place. Thus, this debunks and adds to the critiques of the five stages of grieving and indicates that childhood parental loss needs to be considered as an Adverse Childhood Experience.

The loss of the same-gendered parent is also proven to have more of a negative impact throughout adulthood in comparison to the loss of the opposite-gendered parent. A finding that goes hand in hand with the impact that childhood parental loss has throughout adulthood, is the fact that secondary losses are then most likely also prominent. It is also evident that secondary losses are more severe within the loss of the same-gendered parent in comparison to the loss of the opposite-gendered parent.

It also became evident that an adult role model was proven to have a positive impact and essentially made the loss easier to cope with and made the aftermath easier, however, whether it may reduce the number of secondary losses that occurred is unknown. It is also evident that there are certain milestones whether it be big such as a graduation or wedding or small such as a birthday, the loss and longing of their parent are suggested to worsen throughout that time. Thus, proving how complex grief is and the responses thereof.

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Appendix A

Participant Information Sheet

Participant Information Sheet

UNIVERSITY OF THE
WITWATERSRAND,
JOHANNESBURG

Good day

My name is Angie, and I am a master's student in Sociology at the University of the Witwatersrand, Johannesburg. As part of my studies, I must undertake a research project, and I am investigating the effects of childhood parental loss and the effects thereof in adulthood under the supervision of Dr. Ben Scully. This research project aims to find out what these specific effects are and if there may be significant differences among the different losses throughout childhood [same or opposite-gendered parent].

As part of this project, I would like to invite you to take part in an interview to answer questions that will focus on the loss of the parent and what effects, if any, this has on you as an adult. This activity will involve a once-off interview and will take approximately 90 minutes. With your permission, I would also like to record the interview using a digital device/ audio recording built into the online platform used- such as Zoom or Microsoft Teams.

There will be no personal costs to you if you participate in this project, you will not receive any direct benefits from participation and there are no disadvantages or penalties if you do not choose to participate or if you withdraw from the study. You may withdraw at any time or not answer any questions if you do not want to. The interview will be completely confidential and although anonymity cannot be provided throughout the interview itself, anonymity will be provided in the report. This will be achieved by using pseudonyms and not including any identifying information in the report as any information shared will be done in an anonymized way. If you experience any distress or discomfort at any point in this process, we will stop the interview or resume another time. There are also services made available for debriefing if needed, South African Depression and Anxiety Group 011 234 4837 for free telephonic counselling or Lemmer Psychologists 060 509 8975 ranging from R850 a session.

If you have any questions during or afterward about this research, feel free to contact me on the details listed below. This study will be written up as a research report which will be available upon request. The data collected from this research project will be stored electronically on a password-protected computer. If you have any concerns or complaints regarding the ethical procedures of this study, you are welcome to contact the University Human Research Ethics Committee (Non-Medical), Telephone +27(0) 11 717 1408.

Yours sincerely,
Angie Nel

Researcher:
Angie Meg Nel, 1644331@students.wits.ac.za.

Supervisor:
Dr. Ben Scully, Ben.Scully@wits.ac.za, 011 717 4331

Appendix B

Informed Consent Form

Consent Form

The effects of childhood parental loss throughout adulthood in a population of cross-gendered child-parent households.

Angie Meg Nel

I, ……., agree to participate in this research project. The research has been explained to me and I understand what my participation will involve. I agree to the following:

(Please circle the relevant options below).

I agree that the researcher may quote or use other information in her research report, provided that this information is anonymized so that it cannot be associated with the respondent	YES	NO
I agree that the interview may be audio recorded	YES	NO

…… (Signature)
…… (Name of Participant)
…… (Date)

…… (Signature)
…… (Name of Researcher)
…… (Date)

Appendix C

Interview Schedule

Interview Schedule

[These form part of the structure, however if the participant mentions something else then the researcher might go into that a bit before returning to these questions again]

1. Opening

a) *[Establish Rapport]* Hi, my name is Angie, _____ referred me to you as she/he are aware that you lost a parent throughout childhood and said you would be willing to be interviewed.

b) *[Purpose]* I am currently completing my masters in Sociology at the university of the Witwatersrand and am partaking in research, thus I would like to ask you some questions about the loss of your parent throughout your childhood and some experiences you may have encountered.

c) *[Motivation]* I am hoping to answer my research question and sub-questions and understand what the effects on adults are, who have experienced childhood parental loss.

d) *[Timeline]* The interview will take a maximum of 90 minutes, are you available to participate in the interview now? And may the interview be recorded?

Let me start by getting to know you and your background a bit better.

2. General Demographic Information

a) How old are you currently?

b) Where did you grow up [area]?

c) How would you describe your socioeconomic status throughout childhood?

d) What religious background [if any] did you associate with throughout childhood?

e) What is your highest educational attainment?

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3. Childhood Experiences

a) How old were you when you lost your parent?

b) Which parent did you lose? [mother/father]

c) How was your relationship with your [mother/father] that passed away?

d) How was your relationship with the remaining parent at that time?

Explain Secondary losses.

e) Do you think you experienced any secondary losses associated with the loss of your [mother/father]?

f) What major changes/ obstacles [if any] did you face? If you experienced anything positive what was it?

g) If you think back now- what coping mechanisms [if any] do you think you adopted at that stage?

h) Looking back, were there any role models part of your life that had an impact on your life that was a [motherly/fatherly] figure?

4. Adulthood Experiences

a) Do you think your parental childhood loss has had a negative or positive impact on your life currently during adulthood?

b) Do you think your parental childhood loss impacted your level of educational attainment? If so, how specifically?

c) Do you think your parental childhood loss has had an impact on your relationships currently? If so, how?

d) Does the loss and longing get worse or better at certain times? [e.g. life milestones]

i) Any positive experiences gained from the loss of your [mother/father] throughout your childhood? If so, what did you gain?

j) Looking back, what would you have wanted access to [if any] at the time of the loss that you didn't have access to? [e.g. psychological services, family support, role model etc]

Thank you for your time and being willing to participate in this research, it is highly appreciated.

Appendix D

Ethical Clearance Certificate

UNIVERSITY OF THE WITWATERSRAND JOHANNESBURG

SCHOOL OF SOCIAL SCIENCES
SOCIOLOGY AND DEVELOPMENT STUDIES ETHICS COMMITTEE
CONSTITUTED UNDER THE UNIVERSITY HUMAN RESEARCH ETHICS COMMITTEE (NON-MEDICAL)

CLEARANCE CERTIFICATE	**PROTOCOL NUMBER:** SOCL-2021-09
PROJECT TITLE	The effects of childhood parental loss throughout adulthood in a population of cross-gendered child-parent households.
INVESTIGATOR	Nel,Angie Meg
SCHOOL/DEPARTMENT OF INVESTIGATOR	Sociology
DATE CONSIDERED	26 July 2021
DECISION OF THE COMMITTEE	Approved unconditionally
RISK LEVEL	LOW RISK
EXPIRY DATE	26 July 2022

ISSUE DATE OF CERTIFICATE 27 July 2021 **CHAIRPERSON** _____
Prof Srila Roy

cc: Supervisor: Dr Ben Scully

DECLARATION OF INVESTIGATOR

To be completed in duplicate and **ONE COPY** returned to the Chairperson of the School/Department ethics committee.

I fully understand the conditions under which I am are authorized to carry out the abovementioned research and I guarantee to ensure compliance with these conditions. Should any departure to be contemplated from the research procedure as approved I/we undertake to resubmit the protocol to the Committee.

_____ 30 / 07 / 2021
Signature **Date**

END OF RESEARCH REPORT