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TITLE PAGE

Title: The impact of practical support on parental bereavement: Reflections from a study involving parents bereaved through military death

Running title: Impact of practical support on parental bereavement

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ABSTRACT

This paper draws on data from a wider evaluation study to describe the impact that UK bereaved military parents ascribe to the practical support, comprising of help with home and garden maintenance, that they received following the death of their son. The type of practical support offered to these parents has had a wide-ranging and significant impact on them; helping them maintain continuing bonds; holding significant meaning in relation to the deceased; and contributing to their capacity to engage in restoration-focused coping. As a symbolic resource, this type of practical support may, therefore, be a significant moderator of distress in the psychosocial transition of bereavement.

INTRODUCTION

This paper describes some of the meanings and consequences that UK bereaved military parents ascribe to the practical support for everyday living that they received following the death of their adult child. It draws on data from a study commissioned by xxxx¹, a UK charitable organisation (the Charity) that offers this form of practical support to those bereaved in a military context. It outlines some of the features that make this form of bereavement especially challenging, before describing the study from which the data is drawn and the key features that parents experienced as meaningful. Through a reflection on contemporary theories of grief and bereavement, it discusses the contribution of this form of practical support to ameliorating some of the consequences of bereavement and enhancing the well-being of the bereaved.

THE CHALLENGE TO UK-BASED PARENTS BEREAVED THROUGH MILITARY DEATH

Since the beginning of conflict in 2002, there have been 626 UK military fatalities in Iraq and Afghanistan (Iraq Coalition Casualty Count, 2014). However, death as a result of 'hostile action' is not the only cause of military personnel death, and between 2001 and 2012 a further 1,355 members of the UK Regular Armed Forces have died as a result of poisoning or injury (deaths due to accidents, violence, and suicide and open verdicts), from disease-related conditions (cancer, diseases of the circulatory system, or other diseases), or from causes that are 'not currently available', that is, awaiting a verdict of the UK judicial system (Defence Analytical Services Agency, 2014).

Parents who are bereaved through a military death share many of the issues that face their civilian counterparts. The loss of a child is described as "harsh and relentless" (Brabant, Forsyth, and McFarlain, 1997, p. 255); it is often pervasive and prolonged (Worden, 2009), and can isolate parents both within their relationship but also from their social networks (Riches and Dawson, 1996), conferring a life-long re-negotiation of their fractured identity following the death of their child (Giannini, 2011). Furthermore, it represents a risk to parental mortality, especially in circumstances where the death is from unnatural causes (Li, Precht, Mortensen, and Olsen, 2003). The majority of deaths (72%) amongst the UK Armed Forces over the past 11 years have been sudden and violent (Ministry of Defence, 2014), and those who die a 'military' death are invariably young (Penny, 2010). This, in turn, leaves behind an unknown number of their young peer-group coping with loss, as well as older bereaved people such as their partners and parents, potentially together with siblings and their own children in each of these respective households.

¹ Name and web address to be added after review

The experience of bereavement is mediated through the broader social and cultural attitudes to death and dying. In common with their civilian counterparts who experience sudden or violent deaths, as well as the suddenness and possible violent nature of the death, bereaved military parents have additional moderators that appear to have a lasting effect on them. The method of notification of the death and subsequent investigation procedures restrict access to and control over their son or daughter's body. This lack of control can be exacerbated where there is a struggle to exert parental care and protection over the body and the personal effects of their still young 'child' if the parent(s) has not been designated next of kin, or when the legal and military regulations, processes and procedures are at odds with their needs. These 'custody battles' (Searcy, 2014) over dead relatives challenges the ability for parents to place their affection for, and identify with, the deceased's body, a situation which is "at odds with the positivist underpinnings of the jurisdiction" (Drayton, 2013, p. 278).

In the UK specifically, the experience of bereaved military families is further influenced by two additional dimensions that contribute to an added sense of 'cultural loneliness' – differences that combine to create an unusually nuanced experience of loss. Firstly, the way in which a State recognizes the sacrifices of their Armed Forces, together with their definition of what constitutes a veteran (Dandeker, Wessely, Iverson & Ross, 2006), impacts on the type and levels of care and support offered to them. In the UK, much less social value is given to serving in the Armed Forces, and an honourable discharge following completion of service is not venerated to the same degree as in other countries, notably the USA and Israel (Dandeker, et al., 2006). Secondly, public attitudes to military death have had an impact on the experience of the bereaved. Since the Second World War, public attitudes to military intervention – and, by default, to military deaths – have become much more complex and conflicted both in the UK and elsewhere (Levy, 2009). For example, Provost (1989) argues that the Vietnam War created a conflicted social environment that contributed to prolonged early grief phases and to struggles to resolve the loss about which families felt ambivalent. In the UK, the deployment of UK Armed Forces in Afghanistan and Iraq did not command substantial public support for whom there were concerns about the objectives of the lengthy and often controversial missions (Gribble et al., 2014). Nevertheless, despite this lack of commitment to what remains a controversial conflict, attitudes towards the sacrifice of Armed Forces personnel and their families began to change during this period. There is evidence of a growing appreciation of this sacrifice in the civilian-organised Royal Wootton Bassett Repatriation ceremony of the war dead (see <http://www.bbc.co.uk/news/uk-england-wiltshire-14726697>), which between 2008 and 2011, established an acute and emotive national and local focus for the loss (Drake, 2013), and by the significant charitable-giving to voluntary organisations supporting the ex-Armed Forces and their families.

For individuals bereaved through the death of a spouse or partner, parent, or son or daughter serving in the Armed Forces, the grief is of course primarily personal. Despite this, the perceived purpose and societal support for the mission - the conflicted social environment (Provost, 1989) in which the

death and bereavement is experienced – is an important variable that places demands on the resources of the military family (Mabe 2009), and impacts on the way in which their needs are recognised, legitimated, answered or ignored. By 2011, concern about the loss of understanding in the UK between civil society and military led to the Armed Forces Covenant that had as a core principle that “members of the Armed Forces should not suffer disadvantage as a result of their service and may receive special treatment where appropriate” (Ministry of Defence, 2011 p. 139); a principle that also applied to their families. The UK response to families bereaved through military death has improved substantially over recent years, with an extensive number of military and civilian organisations now offering support (Rolls and Chowns, 2011). Within these organisations, there are different types of support available including: *emotional support* – which may be self-help or more formalised support offering friendship, support and counselling; *advocacy work* – mediating families experience with the different legal systems that surround a death in the UK, as well as lobbying and influencing related policy; and *infrastructure support* – that is, to other organisations including providing funds, staff, or training. In addition, some organisations offer *practical support*, most notably in the form of offering advice and guidance to the bereaved that address the practical and legal matters surrounding the death, or that provided ‘special’ activities such as holidays (Rolls and Chowns, 2011). With the exception of the Charity, at the outset of the study, none offer practical support for everyday living primarily in the form of help with household and garden tasks.

THE PAUCITY OF RESEARCH ON PRACTICAL SUPPORT IN BEREAVEMENT

Within the bereavement literature, the majority of studies explore emotional support to the bereaved (see, for example, Aoun & Knight, 2014; Bellamy, Gott, Waterworth, McLean, & Kerse, 2014; Lundberg, Ollson, & Fürst, 2013; Nikkola, Kaunonen, & Aho, 2013). The primacy of psychological support to those bereaved through military death is evident in both US-based papers (see, for example, Cohen, Goodman, Campbell, Carroll, & Campagna, 2009; Cozza, Chun, & Polo, 2005; Dixon, 2010; Provost, 1989; Scott, 2010; Wilson and Supiano, 2011), and the majority of the Israeli-based literature (see for example, Geron, Ginzberg, and Solomon, 2003; Hamama-Raz, Rosenfeld, & Buchbinder, 2010; Lebel and Ronel, 2005; Malkinson and Bar Tur, 2000). Organizational responses to death in the US military have also been considered (Bartone and Ender, 1994). However, despite this rich literature, there is a paucity of research on the needs and experiences of those bereaved of a member of the UK Armed Forces. The exception to this is Cawkhill (2009) who provides a detailed and thoughtful account of the UK’s organizational response including the role of the Visiting Officer.

Studies that comprise any attention to the ‘practical’ dimensions of support focus on the practical challenges for the bereaved (Bellamy et al., 2014), or the practical issues that impact on those who provide emotional support (Boyden, Freeman, & Offen, 2010; Welch et al., 2012; Moyle Wright, Shea, & Gallagher, 2014). However, no attention has yet been paid to the provision of practical support to bereaved families in the form of help with the on-going activities of everyday living with which the

bereaved may struggle, as grieving places significant demands on both physical and emotional energy. Consequently, there has been no research that considers the value and meaning that this form of support can have for the bereaved, including those bereaved through military death.

THE STUDY

The study was commissioned by a UK civilian voluntary sector organisation² (the Charity), founded by an individual who was supporting the friend of a woman whose husband had been killed in Afghanistan in 2009. During their conversations, the need for the provision of practical support to the bereaved partner was identified, and the subsequent search for appropriate help revealed a lack of provision for this type of assistance. As a result, the Charity - now in its fifth year of operations – was created with the sole purpose of providing practical domestic help. The service utilizes the manual labour of teams comprising two men, and involves either garden work - tidying, maintaining or landscaping it, or household maintenance such as decorating. Each support project normally takes between two days and a week to complete during which time the team stay near the family in local accommodation. The need for practical support to those bereaved through military death was originally understood to arise as a result of the death of a family member who would 'normally' undertake these practical household projects. Over time, and with increasing experience working alongside military bereaved families, a 'site of remembrance' to the deceased also began to be created. This could take the form of the construction of an arbor sitting alongside a small area of the garden that contains a plaque upon which the deceased's name is written, together with other words of the family's choice. Other items such as particular flowers, military artefacts, or photographs that have associations with the person who died may also be included. The team are offered guidance about working in the bereaved parents' homes, including exercising caution in how they act whilst there. Thus, whilst the team will listen respectfully if family members choose to talk about the deceased or the manner of their death, they are specifically instructed not to 'counsel'; to give any opinion especially on potentially contentious issues such as military-related matters; or to initiate or make comments in emotionally difficult conversations. Whilst this support is offered to both parents and partners, the present study focused on bereaved military parents³ to identify why they approached the Charity alongside, or in favour of, other types of support that are available. The study aimed to identify what, if any, benefits they obtained; and how the Charity could improve their service in the future, including options for on-going evaluation.

² In the UK, the voluntary sector refers to not-for-profit, non-governmental organizations that provide publically-funded social, community and health-related support. Also known as the 'third sector', it contrasts with the public and the private sector.

³ In the context of this paper, the term 'parent' is used inclusively to refer to persons who have assumed parental responsibilities for a child whether or not they are genetically related.

METHODOLOGY

The study adopted the principles of 'constructivist grounded theory' (Charmaz, 2003). This allows for a focus on individual beliefs, personal motivations and interpretations of experience from the perspective of the participants themselves, and assumes "the relativism of multiple social realities, recognises the mutual creation of knowledge by the viewer and viewed, and aims toward an interpretive understanding of subjects' meanings" (Charmaz, 2003: 250). Ethical approval for the study was obtained through Heriot-Watt University.

Sampling

Using the original list of 81 individuals that had been supported between 2012-2014, an initial framework of theoretical categories was devised comprising: their status as parents; the partnership status of the parent; the gender of the deceased; the causes of death; and a spread of parental home location across the four countries of the UK. There was no stipulation on the time since death but, in order to ensure evaluation of the most recent 'model' of practical support, parents were selected from cohorts assisted by the Charity during the years 2012 - 2014.

Forty-six parents were identified as having experienced the loss of the son or daughter, of whom four individuals were excluded as they appeared, upon further investigation, to be non-parental members of the family household where a son or daughter had died, and a further two individuals were excluded for personal reasons. Theoretical sampling was, therefore, undertaken on the remaining 40 parents in 34 households in only one of whom had it been their daughter who died. Initial contact with potential participants was made by letter. If a couple agreed to be involved, they could decide whether to be interviewed individually or together. Through three stages of sampling, the study comprised of just under a third of the 34 households ($n=12$) and included 15 parents (12 mothers and three fathers) all of whom had been bereaved of a son. The response rate, therefore, was 40%; slightly above the rate of 28% take-up that is not considered atypical for bereavement research (Stroebe and Stroebe, 1993).

THE PARTICIPANTS

Across the cohort, the sons' ages at the time of death ranged between 19 and 29 years; the period from his death to the practical support was between one and nine years, and to the interview between three and eleven years. These details together with their pseudonym are outlined in Table 1.

Table 1

Pseudonym	Year of death	Son's age at time of death	Years since death to practical support	Years since death to interview
Leanne & Bernard	2011	22	2	3
Kate & Jim	2010	26	1	4
Alison	2010	29	2	4
Annie	2010	19	3	4
Mary	2011	26	1.5	4
Sonia	2009	21	3/2*	5
Emily	2009	27	3	5
Lauren	2009	21	3	5
Vicki & Kevin	2006	23	5	8
Evelyn	2005	22	7	9
Sandra	2004	19	2	10
Tina	2003	24	9	11

Table 1: Participant Characteristics *denotes the second job

Insert Table 1 here

Parents were drawn from England (7 sets), Wales (2), and Scotland (3). At the time of interview, two of the 12 mothers were widowed, and two were divorced or separated. With one exception, all parents had other children and, at the time of their son's death, seven sets of parents had other children living at the family home. Two sets of parents had also experienced either the prior or subsequent death of another child. Three sets of parents were known to be receiving welfare benefits. Apart from the initial support offered by the UK Armed Forces, only three of the 15 parents were known to have accessed any other form of support. Several families were or had been involved with associations such as the Military Families Support Group, one had help from SSAFA (Soldiers and Sailors Family Association), and only 2 mothers had counselling support – one receiving counseling support from her place of work intermittently over the four years since her son died, and the other receiving Cognitive Behavioural Therapy – an encounter she had found deeply distressing.

At the time of their death, two sons were married, one with children; two were engaged, one with children; one was in a long term relationship; and seven were single. The deaths had occurred between 2003 and 2011 in Iraq (3), Afghanistan (7), and the European Union (2). All deaths were sudden; the majority (n=9) had been killed as a result of hostile action, whilst the remaining three had died in an accident or from a rapidly declining illness.

DATA COLLECTION

Through qualitative interviews, the meanings which underpin people's lives, thoughts, behaviours, and feelings can be explored in depth (Arksey and Knight, 1999:32). In order to guide questions related to the context of the parents' use of the service and their experience of it, a semi-structured interview schedule was devised and agreed between the two researchers who were conducting the interviews. The format was designed to allow participants to express their experience as freely as possible, and to enable the researchers to obtain additional information through more specific questions. One interview was undertaken over the telephone at the parent's request, whilst the remaining eleven sets of parents were interviewed in the parental home allowing easy access to photographs and other items that participants may have wanted to share (Giannini, 2011). In the majority of cases, attention was drawn to a photograph of the deceased son which was displayed prominently and often surrounded by military memorabilia such as citations, medals or other relevant objects, and these informal conversations and researcher impressions were recorded in field notes. This enabled the researchers to situate their interpretive activity within the multiple social environments of the bereaved parents (Gubrium and Holstein, 2008). Participants were asked to give their explicit informed consent to participate in the study and, prior to interview, consent was also sought for participants' details to be kept on the study databases. Each participant and any identifiable reference names were allocated a pseudonym. Data were kept on the password protected and encrypted computers of the respective researchers.

DATA ANALYSIS

In constructivist research, researchers are situated "at the interface of the fluid edges between, and the combining of, public, private and personal lives....poised on the threshold between these different experiences and social settings" (Edwards and Ribbens, 1998: 15). Whilst an emphasis on the transcribed texts of stories can strip narratives of their social organization and interactional dynamics, it is important to "expand the circumstances, conditions, and goals of accounts...how storytellers work up, and what they do with the accounts they present...the functions stories serve in different situations" (Gubrium and Holstein, 2009: xvi).

Data were analysed using a recursive grounded theory approach (Charmaz, 2006). Each interview, including the telephone conversation, was digitally recorded and then fully transcribed, and these were imported into NVivo, a computer based qualitative data analysis and management package, enabling links to be maintained between the interview transcriptions and fieldnotes, and the developing codes, memos and annotations. The transcripts were checked with the audio recordings for accuracy, and each researcher initially worked independently. The interview transcripts were read through a number of times. The first time that each transcript was read, the researcher's intention was to gain an overall understanding of the whole story which was presented. Next, they aimed to understand how the story was being told and here, the structure of the narrative was ordered to facilitate understanding. The stories were then read from the perspective of the parents, to gain an insight into the stories with their voice and finally, by reading for relationships and understanding the stories from the many voices contained therein. Once these multiple readings were completed, the

thematic dimensions were defined, being located in, but going beyond, the narrative and the story. The multiple perspectives were discussed by the two researchers, and any divergence in interpretation was reconciled, whilst recognizing fully the ambivalent relation of the researchers' texts to the realities studied. A consensus was reached on the content and description of key themes that emerged and direct quotations have been chosen to illustrate the respective themes.

FINDINGS

The themes and categories that emerged are considered under the following three headings: parents' experience of the practical support; the impact of this on parents; and the significance to them of the work that was carried out.

PARENTS' EXPERIENCE OF THE PRACTICAL SUPPORT

Several parents described the experience of having the work done as “wonderful” (Tina; Alison) or “amazing” (Elaine). Nevertheless, having workmen in and around the home can be challenging for many people, and some parents had initial concerns as, since their son's death, they had lost confidence in relating to people or inviting them into their home. However, without exception, the parents had a great deal of praise for their personal qualities, describing them as “the loveliest group of guys” (Sonia) or “really nice, really nice blokes”. (Vicki). During the time that the work was being carried out, the conversations between the family members and the team could turn to the lost son and the impact that the bereavement continues to have. Whilst parents found others unable to accept the depth of their grief, they discovered, in contrast and without exception, that they could be authentic with the workers about their feelings of loss and reported helpful responses by the workers in any conversation around this painful area:

Most people, when they ask [you] a specific question, they don't really want to know the answer. Everybody expects the answer to be 'Oh, fine thank you', and no one says, 'Right ok then, now tell me how you really are'. Whereas with these guys, I think if you were really having an off day, you could actually say to them, and they would just down tools and they would sit and listen. (Emily)

Parents also reflected on their experience of support from the Charity compared to their experiences of the Armed Forces or the Ministry of Defence [MOD]. One of the key differences was in the approach, with parents' encounter with the Charity experienced as less rule-bound and more flexible and responsive to their needs. Sonia, whose son was killed in an explosion in Afghanistan, describes the “massive difference in how you're dealt with”:

Because [the Charity] just came and said ...'Don't worry about it, we'll get it sorted. No, we'll get the paint, don't worry about the paint. It might take 2 days but we will get it sorted; it's absolutely fine'. And I didn't have to do anything and I didn't have to think about anything, and from the moment he walked out and said 'We'll do it; just give me a couple of weeks to organise' I didn't think about it again. Whereas, going through such

massive...that trauma and everything you're going through - for the Army, or the [UK] MOD, whoever is responsible, to make everything protocol and rules and regulations, and what you can or can't do, what you can or can't have, and how it has to be - is just..."Why does it have to be like that? I'm not in the Army. The rest of the family is not in the Army. Why do I have to adhere to those types of rules? We've lost the most precious thing in the world, and all you're thinking about are your rules and regulations... You've taken away Anthony. He's given everything now, and you're making me feel like I have to just tow a line". (Sonia)

Even where families had experienced good support from the Armed Forces, their son's regiment, or the MOD, they still identified the Charity as offering something particularly beneficial.

Parents also indicated that they preferred to have the Charity undertake the work rather than to be given the money to find their own contractor; as this would have been too burdensome. It also made a difference to them that the Charity knew both that their son had died and that he had been a member of the Armed Forces, as Alison explained: *"We didn't have to tell [them] that we'd lost our son because [they] already knew... The best thing about people knowing what's happened is not having to tell them, because putting it into words is one of the hardest things to do".*

Parents also valued the strong work ethic that was manifest in the reliability of the workforce and that nothing was too much trouble. Related to this, a major component of the experience of the Charity was that parents felt that the Charity's reaction need for help was respectful and compassionate – that they were: *"doing it out of the goodness of their hearts"* (Elaine) - and sufficiently comprehensive to lead them to feel their needs were fully met.

THE IMPACT OF PRACTICAL SUPPORT ON PARENTS

The effects of the work that was carried out were both beneficial and long-lasting, and appeared to have had an influence on the physical, social and emotional aspects of parents' lives. Parents' were grateful for how the physical changes to their environment enhanced their domestic situation. In the first instance, this practical help made home or garden maintenance a less burdensome or onerous task, and this feature was especially valued where a parent had been suffering ill-health since the death of their son. Before the garden work was carried out, many parents would not use this space, as Sonia described: *[in grieving] ..."something's got to give and it's generally - you just leave things a mess... [I] looked at my garden and thought, 'This was just embarrassing'. You'd just keep the blinds shut, not look out there, and definitely not sit out there".*

Many parents' in the study said how ashamed they had felt about the condition of their garden or house, and the impact that this was having on their engagement with friends and neighbours. When the work was completed, they felt able to allow people into their house, as Vicki described: *"Before I tended to come in and close my door and keep the world out. Now [I] feel that I can open the door to*

people". Social interaction was facilitated by the support given, allowing the parents to engage in everyday activities for which they had previously perceived barriers.

The emotional impact was experienced in two time-frames: whilst the work was being undertaken; and in the consequences over time.

Emotional effects during the time the work was being carried out

Tina described it as, *"a week of my life [that] was so different"*. This sense of life being different for this period was shared by others, and appeared to arise from four aspects. Firstly, parents experienced kindness and felt special. Many expressed the deep sense of surprise they felt that this work could be being done for them, as first Tina and then Sonia outlined:

They got in touch. It was quite a surprise. It was a lovely surprise, you know... But that to help me with that...I really was surprised...very surprised that they did it.... ... and somebody's done something for us [weeping]...I don't know...And I'm really grateful to him. I'm really, really, grateful. Because nobody has ever done anything like that before...nobody!

It was just...I've never experienced anything like that. I've never had anybody want to come and do something like that...just in my whole life, regardless of it being because of losing Anthony, I have never experienced that kind of kindness.

Not only were the team experienced as being sympathetic, but parents felt *"there is somebody out there who cares"* (Leanne), *"cares enough to make a difference"* (Sharon), and who makes them feel special enough to be 'remembered':

They were genuinely, genuinely interested in what they were doing, how they could help and you just felt like, well, you felt really special...at the point where you'd started to feel forgotten and [just] a number and... [just] another mum or another person that's lost someone in Afghanistan. (Sonia)

This sense of being forgotten makes being cared about all the more important: *"It means a hell of a lot. It was because people care. I didn't think anybody.... they just forgot about Jimmy... and people don't care about what happened to him and the family, and it totally destroys a family"* (Annie).

Recognition of, and response to, the parents' needs was a valuable aspect of the support offering.

Secondly, parents felt a strong sense of relief that their need for support was understood and responded to without having to fully express what these needs were. Many parents spoke about the release from the continual reminder that aspects of daily living were deteriorating, and that: *"It's a weight off your shoulders. It's a big relief to get it out of the way; it's like a light at the end of the tunnel kind of thing"* (Kate).

Sonia elaborated this:

So to have that [mess] taken away and cared for and put back to where you were before it happened, so then you can just maintain it...its massive. You know the government and the other charities might not think so. But it's a huge emotional weight off your shoulders to not have worry about the garden or the painting of the house or making something, fixing something - anything like that.

The unconditional nature of the support and the intuitive response by the labour force was particularly valuable to the parents.

Thirdly, parents felt relieved that their sorrow at the loss of a military son was understood and accepted for the burden it was:

They're going to know that [we] are military families. I just think they do it so well without... they don't push you for questions. They're just there, they know why they're there, they know that you've lost someone...and you are free to talk to them if you want. They ask some questions and there's nothing that you can't deal with. (Sonia)

Lastly, parents experienced a sense of normality and inclusivity through the actions of the Charity. Although the circumstances that brought the Charity and the parents together required a compassionate nature and sensitivity to emotional distress, the time that the team spent at the family homes was not always in an environment of sadness. Working closely in the parental environment meant that there was an opportunity for humour to be found in everyday experiences, as Vicki described: *"They were fun to have around because the banter between them was quite good"*. This introduced a welcome sense of normality to the parent's life:

Because the guys were friendly... I just had normal banter: chatting; laughing. It wasn't anything like "Ah bless you, you've lost your son in Afghanistan" which - I'm not saying that's horrible - but I'm much better when I'm dealt with, "Just ask me a question and I'll answer it". I don't want to be like pussy-footed around or anything like that. But again, I think everyone's different, but for me...it worked. They were straight with me; we just had a laugh. It was lovely. (Sonia)

The presence of the team in the home also had an impact on the siblings, and for this parents, including Jane, were very grateful:

They just made the girls laugh. My youngest daughter, she didn't really speak about anything and even she was speaking to them. They just made you laugh about things. They just lifted your spirits. It was the first time I'd probably laughed really hard in ages.

Enabling her other son to 'open up' was gratefully acknowledged by Sonia:

They were brilliant, the two guys that were here, absolutely brilliant. Really funny, they cheered us all up. They were lovely with John, you know, they were just really nice...And John doesn't often chat to people...he doesn't really know what to say. But he opened

up, he was chatting away to them. And talking about bikes and things, it was really nice.

The personal engagement of the team allowed the families to express positive emotions in a supportive environment, giving them the permission to test feelings of contentment and pleasure in a safe, social encounter.

The emotional consequences of the work over time

Parents described three different longer-term emotional consequences of the support that was provided. Firstly, they described the transformative effect of the improved environment on their daily life:

When you're going through a really rough time, if you're sitting in really drab surroundings, it just gets to you even more. If somebody was to come to you to do a little bit of decorating, it gives you a lift and it makes you feel good. You've got somewhere nice to sit and think, and I think maybe then you're memories are happier, because it's very easy to forget when you're in dire surroundings. (Emily)

Secondly, many parents felt uplifted and motivated both at the time and since the work was completed: *'It boosted me up. It gives me the energy to look at one bit, to go out and do the next bit, and keep up with it'*. (Kate)

...and the difference it makes, you know. I work it myself now; I'm up the garden nearly every day doing something, and I've been doing borders just to tidy the edges up, putting some stones down the edge because they had quite a big bag of stone left. [It] makes it - well, gives you something, an incentive I think ... You get very depressed sometimes. (Bernard)

One consequence of this emerging motivation was a renewed sense of their life: *"It puts us back into where we wanted to be"* (Kate) or of themselves: *"I got a bit of me back"* (Jane); feelings which she elaborated here:

They gave us like a haven back again, somewhere we could be ourselves and let go. It gave my girls back their freedom. It was just because not so much giving us our life back because our life will never be the same, but [it] kind of helped us a bit to get back on the track, if that makes any sense. I think things would've really, really got on top of me if it hadn't been for the Charity. (Jane)

Lastly, many parents expressed a deep and enduring sense of gratitude for the relief that this practical help provided, which began even before the work was carried out as Sonia described: *I just literally thought "Thank you, Thank you, Thank you!" because I could just forget [the garden] now*".

This gratitude appeared to be enduring, for despite the length of time since the death of their sons (between two and eleven years) and since the work was undertaken (between one and two years),

parents were still able to articulate their deep appreciation, as Sonia and Leanne describe:

I just felt so grateful. I felt so lucky and so grateful that they would take that, not letting me have to think about it. Not letting me have to worry about it, buy anything, it was just done. That has never happened in anything before Anthony or going through this with Anthony; it's only thing that's ever happened to us, you know, that I haven't had to do myself, process, work it out - anything like that. (Sonia)

I don't think they realise what they done for us...how big a thing they'd done for us. And it is gi-normous at the end of the day - it is! (Leanne)

And finally,

Because, sometimes I prefer to sit out there, even at night I'd sit out there if it's not raining. Just sitting - it helps [weeping]. Like I say... everything stopped after Laurie, so it's hard... Thank you! Thank you! [weeping]. (Tina)

The legacy of the support was therefore long-lasting and provided a reminder of the positive aspects of the help that had been received.

THE SIGNIFICANCE OF THIS FORM OF SUPPORT TO PARENTS

As well as the practical, social and emotional impact, the work appeared to hold significance as it enabled or strengthened links to their dead son, and this occurred in three inter-connected ways.

Firstly, the garden represented a form of posthumous 'gift' from their son, although it was a "double edged sword" (Alison). The improvements (and other 'benefits' such as new friendships or visits to Buckingham Palace) had only arisen as a result of the death of their son; the knowledge of which held a deep poignancy:

...a very high price to pay to get something... to get something free...well, not free (crying). And I sit out there crying. But without them, you wouldn't have [this]...a lot of families that would go out there and think that this is because of my son I've got somewhere to sit and be all quiet, you know. (Tina)

Secondly, the restored physical environment, the arbour, and the memorial provided parents with a more peaceful space - a sanctuary - in which memories of their son could be brought closer with greater ease. Parents, and the wider family, felt closer or more peacefully connected to their son.

...not just me: anybody, his dad, his sister. If you've got a place like that anybody in the family, friends, whatever if they come round for a cup of tea and they want five minutes in the garden they can just sit and wait with their thoughts...It's a little place that you can make your own, you know; it's his wee corner. I always look out and I know it will always be there, just having quiet moments just for him and me.... ...It feels almost as if their spirit is there, you know. I sit there at night once the sun goes down and it's just sort of

getting dark. I look up at the sky and I feel a great oneness. I feel as if he's all around me. I feel more as if he's with me, you know. (Emily)

This sense of presence enabled parents to keep their son's memory alive in the younger and new members of the family: the nieces and nephews who knew their uncle or those who were born subsequent to the son's death, as Sharon described: *"Even my wee grandson is starting to have a wee look at it now and we're saying, 'That's your uncle'".* Finally, it acted as a site of memorial to their son, as Evelyn identified: *"I think truthfully because we've lost our children, we feel like the gardens are dedicated to them now".*

For some parents, their son's grave was a considerable distance away making it difficult to visit. In other cases, whilst their son's name had been added to the local war memorial, there could still be a sense of emotional as well as actual distance and, crucially, a lack of privacy in which to reflect and remember:

He's not really there [in the grave 4 hours drive away], you know what I mean? I don't feel as though he's there. He's here and he's here [pointing to parts of the garden]... You couldn't really put it in words what they've done for us. Alright - to them, they probably have just done our garden. But it wasn't just doing our garden, it was everything, you know....They gave us back a little bit of Lennie...it actually made me feel 'I've got a bit of my son back... it's made us closer to him again....It's brought him home a bit, put it that way. He's a long way away, but it's brought him home. As I said, we could go down to the war memorial [but] he's here. He's always going to be here. (Leanne)

For Sharon, the memorial plaque meant that she felt people were able to remember her son and respect the sacrifice he had made for his country:

You get people coming by and stopping and having a wee look and reading it and you actually see some of them going by and saying 'oof' [oh my goodness]. It makes you feel as if they know who you are, who your son is. It is respect, a lot of respect. (Sharon)

The physical presence of a reminder of connectedness with their lost son was both comforting and inspiring, and was welcomed as a tangible reminder of the parents' ongoing relationship with their lost son.

DISCUSSION

This is the first study to explore aspects of the experience of UK parents bereaved as a result of military death, and also the first to consider what impact practical support for everyday living has had upon a bereaved cohort. The study has, therefore, considered a neglected area of bereavement support. These findings, however, need to be considered in the light of the limitations of the representativeness of the sample, and the prevalence of mothers in the study. In the case of parents

bereaved by military loss, details relating to families of the deceased could only be traced by media reports, and much of the information required for sampling was only available through sources such as the BBC (who kept an on-going list of those killed in Iraq and Afghanistan) and local media. This lack of information about relationship status, and the presence of surviving siblings made sampling difficult. Only parents who had received help took part in the research and, in the majority of cases, it was the mother who was the key contact for the research. Furthermore, whilst a few women have died whilst serving in the UK Armed Forces, very few parents of daughters have accessed the Charity, and none of these consented to participate. In addition, since much of the military population in the UK, especially in the 'Other ranks', are recruited from economically less affluent areas (see BBC News, 2006 for comment), some of the findings from this research may have been influenced by the lack of availability of financial and other social resources reflecting a particular need amongst this population. The representativeness of the sample in the present study can therefore not be assumed.

Despite these limitations, the overwhelming and, to a large extent, the unexpected finding of the study has been the extent to which this form of practical support has had a wide-ranging and significant impact in ameliorating the experience of parental bereavement. In particular, the support appears to have made a contribution to 'restoration-focussed' coping; a crucial element of Stroebe and Schut's (1999) seminal Dual Process Model of bereavement.

THE CONTRIBUTION OF PRACTICAL SUPPORT TO AMELIORATING THE EXPERIENCE OF PARENTAL BEREAVEMENT

Practical support appears to have contributed to improving the well-being of these bereaved parents by providing an encounter that offered the supportive experience of: acknowledgement, compassion, and inclusion, supported by re-engaging action (Giannini, 2011).

Acknowledgement

Acknowledgement occurred in three inter-related ways. Firstly, it validated the parent's position in the 'hierarchies of loss' (Robson and Walter, 2013). Many of the deceased in this study were young servicemen who had begun to engage in new partnerships and designated someone other than their parent(s) as their next-of-kin. In doing so, they had, to a certain extent, disenfranchised their parent(s) (Doka, 1989), putting them in second place in the hierarchy. This positioning is experienced as inappropriate and in contraindication to what is otherwise understood as the primacy of parents in the hierarchy, and has the potential to cause considerable distress. In acknowledging the legitimacy of the parents' experience and privileging their position in the hierarchy of loss, the response of the Charity thereby reduces parental experience of this form of disenfranchisement.

Secondly, their grief has been 'faced'. These military bereaved parents experienced severe social isolation. McBride and Toller (2011) have drawn on Goffman's notions of 'face' and 'stigma' to consider the face threats that can arise in communicating with bereaved parents, including feelings of emotional inadequacy in responding to this type of bereavement; attempts to prevent discomfort; and to protect against unwanted or unsolicited advice. As a result, "communication between bereaved

parents and their network is difficult because talk about the child's death is inherently face-threatening for both parties" (McBride and Toller, 2011, p. 211). In 'facing' parental bereavement – experienced as profound by those in the study - the Charity helps to reduce the sense of shame and inadequacy that many parents described feeling as a result of 'not coping'.

Thirdly, it provided hope for the future by offering an 'extended warranty' (Kraus, 2009). As well as being recognised, validated and 'faced', parents felt the Charity understood the nature of their bereavement, including that it does not follow a simple trajectory and that their capacity to act was not assured. Enabling parents to feel that they can make further, ongoing and varied requests for assistance over time is a form of extended warranty which can itself be a sustaining experience of hope.

Compassion

Compassion is empathy with suffering (Partington, 2012), and the work of the Charity appears to offer bereaved military parents a form of practical compassion (Brown, Crawford, Gilbert, Gilbert, and Gale, 2014) in which the act of 'doing' something is experienced by parents as kindness. The 'gift' of the support was physically evident, and it represented a significant investment in them - both in terms of the cost of materials and the time and effort which was expended by the team undertaking it. This investment in their well-being was made when the parents knew of few other sources of available support and none offering this form of practical help that was given unconditionally. This practical compassion repertoire is one in which carrying out everyday domestic activities evokes compassion which can, in turn, lead to an 'opening up' and to disclosure of interior concerns. The easy way in which parents felt able to talk about their loss if they so wished, and to have gained a sense of being listened to without judgment, was experienced as an important compassionate dimension that accompanied the practical work. Furthermore, by lending parents their 'energy' to undertake tasks that the parents were unable to manage, the Charity was experienced as benevolent and kind, compared to others who may by now have expected them to have "moved on". This external non-judgemental recognition, and the potential for inclusion in the practical activity if the parent(s) so wish, is vital to bereaved parents who utilise compassionate understanding as a form of social support in their transition from 'silent victims' to more confident individuals, able to seek and ask for external psycho-social support when necessary (Hassanein, 2014, p. 187).

Re-engagement

The impact of the experience of compassion - communicated through practical action - appeared to have wider-reaching consequences by increasing parental motivation to re-engage with society and encouraging greater social inclusion. This appeared to occur in two ways. Firstly, at a practical level - by restoring the home and garden that had become 'a mess' with the energy that the parents did not have - a more attractive social space was created about which the parent(s) no longer felt so ashamed. Secondly, parents regarded the experience they had with the Charity as deeply affirmative and described feeling uplifted and supported by the team working in or around their home, and parents began, to differing degrees, to develop their confidence in their capacity to contribute to the ordinary discourse of everyday life. Much of this may be due to the personalities of the team and

reflected the charitable ethos of the organisation. Many parents indicated that they had previously avoided social contact where possible and had felt unable to talk about their loss with others. This withdrawal from social contact is known to extend the period of adjustment to the loss and to increase levels of psychosocial distress in bereaved parents (Lepore, Silver, Wortman, and Wayment, 1996). The time that the team spent in the home carrying out the work offered an important opportunity for parents to talk about their loss and what it meant to the family. In doing so, the team was acting as 'others'; that is, symbolically representing wider society. Since the parents' experience of the team was consistently one of compassion, respect and recognition for the magnitude of their loss, this may have facilitated their subsequent attempts to increase their interaction with the outside world. The team recognised the importance of the loss to the parents, without prejudice or judgement on the circumstances of the death or the politics of the conflict and, by extension, the parents could assume that same response may be elicited from others the parents they might encounter. The parents' constructive experience with the team encouraged subsequent attempts to reintegrate in society, demonstrating a long term benefit of the intervention lasting beyond the time scale of the project being undertaken. Many of the parents felt that the practical support marked a turning point in their adjustment to loss, from which they could then begin to increase the amount of social contact they engaged in and experienced an overall improvement in subjective wellbeing.

THE CONTRIBUTION OF PRACTICAL SUPPORT TO 'RESTORATION'

Few parents in the study found meaning in the loss of their son as a result of the contested engagements in Iraq and Afghanistan, although they valued the posthumous descriptions of their son's bravery. In addition, whilst none of the parents described having found meaning in their own suffering (Frankl, 1963), they all attributed significance to the support they had received, and a variety of meanings to the work that had been carried out. Parents valued the kindness shown, and for those mothers who still appeared to be 'overwhelmed' by their grief (Machin, 2014), the Charity remained as a symbolic reminder of this 'practical compassion' (Brown et al., 2014).

Many of these parents were especially challenged to readjust "to a new world without forgetting the old" (Rando, 1993, p. 627), and exhibited a strong desire to maintain a symbolic relationship with their child beyond death. In the case of these parents, externalised continuing bonds (Scholtes and Browne, 2014) were widespread and, to some extent, facilitated by the practical work carried out by the Charity. Many of the parents had gardening work undertaken that almost always included an area of special significance where a memorial was placed to the lost son. As well as the immediate tangible benefit of the landscaping work being done, and the restoration to parents of a more manageable outside space, the parents spoke specifically of the unique benefit of providing a "special" place within which they were able to remember their sons. Whilst they may have had no control over their son's funeral and place of burial - which may have been chosen by their son's partner or be subject to military regulations (Ministry of Defence, 2014), and may be at a considerable distance from their home - the memorial was created specifically and personally for them, and its immediate accessibility offered an opportunity for the personal expression of grief within private surroundings. Furthermore, they found meaning in the 'gift' of the garden from the Charity, and for

some parents this was also experienced as a 'gift' from their deceased son. Moreover, the significance of the support to parents has meant that the Charity itself has maintained a place of special importance in the lives of the many families that received help.

Externalised bonds have been depicted as immature grief, one which has not yet had an opportunity to be processed to the more sophisticated, spiritual level of internalised bonds (Scholtes and Browne, 2014). However, there may be something unique to a loss in a contested military context where the parents' individual experience of loss, and their attempts to create a 'hero' or other positive narrative, places them at variance with the dominant discourse that surrounds an unpopular engagement in armed conflict. This may exacerbate the grief response or stall the adjustment to the loss, resulting in significant distress still being felt many years after one would normally expect levels of distress to have reduced. The parents in the study were interviewed several years following the death of their son, and many displayed levels of grief consistent with more recent losses, and the memorial offering may be supporting first steps towards adjustment to their loss. Further research with parents bereaved in a military context would be required to consider whether this hypothesis can be supported.

The social constructivist model of grief (Neimeyer, 2001a; 2001b) argues that the bereaved must interact with another to build a narrative which essentially explains the impact of the loss within their own life story. If this view of grief is supported, practical support offers a highly valued resource for the bereaved. Although it is not predicated on a therapeutic relationship that specifically offers emotional support - and even though they can co-occur, practical support is understood to be distinct from emotional support (Shrout, Herman, & Bolger, 2006). The Charity provided parents with an opportunity to 'narrate' – to talk informally in an everyday setting whilst the work is being carried out. It also constitutes a tangible, external reminder of the loss with which others can engage: further enabling parents to construct their narrative through reminiscences about the deceased and about what the loss meant to them, their family and their wider community. Indeed, many parents commented on how the garden area had been used by friends and family and was a discernible resource to initiating conversations which may have otherwise been difficult to instigate.

Coping with loss is taxing and anxiety provoking (Stroebe and Schut, 1999), and the capacity to 'restore' is often compromised in traumatic bereavement. Parents described how, at the time when help was sought from the Charity, their levels of grief had restricted their ability to cope with some of the very practical aspects of their daily life. This provoked additional distress, and they felt, at times, overwhelmed and incapacitated by the enormity of the restoration tasks before them. In taking action, the Charity used *their* energy to undertake practical tasks, initiating the move towards a more restoration-focussed coping and a life which was adapted to take into account the lost son. As a result of the supportive practical intervention, parents were enabled to maintain their house or garden in ways that it had not been possible beforehand, and to engage a little more in supportive social relations. In doing so, the parents accepted that everyday social functions could feature in their lives again, thus safely facilitating their attempts to focus to some extent on the restoration of pre-

bereavement functioning. By initiating the oscillation between a focus on the loss to a restoring function, the support provided a unique and crucial intervention to reinstate the process of coping with bereavement and coming to terms with loss. Whilst some parents' had begun to engage meaningfully in the meaning making activity of 'doing a deed' (Frankl, 1963), for example, by fundraising for other charities, organising support groups or campaigning on behalf of military bereaved families, many felt compelled to reciprocate the 'gift' they had received from the Charity - by not letting the improvements deteriorate (and so 'let the Charity down') or by supporting and fundraising for them – thereby engaging parents further in restorative action.

The analysis of data went substantially beyond the initial remit of a service evaluation, and further research would be helpful with a wider cohort of participants, with bereaved military partners, and in comparison with other sudden violent causes of death. In addition, the specific contribution of practical bereavement support compared to emotional support and counselling also needs to be considered. Nevertheless, as both a practical and a symbolic resource for the parents, the study indicates that this type of support can a significant moderator of distress in the psychosocial transition of bereavement (Zittoun, 2006).

REFERENCES

- Arksey, H., & Knight, P. (1999) Interviewing for Social Scientists: An introductory resource with examples , London: Sage
- Aoun, S.M., Breen, L.J., Rumbold, B., & Howting, D. (2014). Reported experiences of bereavement support in Western Australia : A pilot study. *Australian and New Zealand Journal of Public Health*, 38, 5, 473-479.
- Bartone, P., & Ender, M. (1994). Organizational responses to death in the military. *Death Studies*, 18, 1, 25-39.
- BBC News (2006). Army "targeting poorer schools." Retrieved 23 October 2014 from <http://news.bbc.co.uk/1/hi/wales/6199274.stm>
- Bellamy, G., Gott, M., Waterworth, S., McLean, C., & Kerse, N. (2014). 'But I do believe you've got to accept that that's what life's about': Older adults living in New Zealand talk about their experiences of loss and bereavement support. *Health & Social Care in the Community*, 22, 1, 96-103.
- Boyden, P., Freeman, A., & Offen, L. (2010). Setting up and running a loss and bereavement support group for adults with learning disabilities. *British Journal of Learning Disabilities*, 38, 1, 35-40.
- Brabant, S., Forsyth, C. J., & McFarlain, G. (1997). The impact of the death of a child on the meaning and purpose in life. *Journal of Personal and Interpersonal Loss*, 2, 255-266.
- Brown, B., Crawford, P., Gilbert, P., Gilbert, J., & Gale, C. (2014). Practical compassions: Repertoires of practice and compassion talk in acute mental healthcare. *Sociology of Health and Illness*, 36, 3, 383-399.
- Cawkhill, P. (2009). Death in the Armed Forces: Casualty notification and bereavement support in the UK military. *Bereavement Care*, 28, 2, 25-30.

- Charmaz, K. (2003). Grounded theory: Objectivist and constructivist methods. In N.K.Denzin & Y.S. Lincoln (Eds.). *Strategies of qualitative inquiry*. (2nd Edition). London, England: Sage, 249-291.
- Charmaz K. (2006). Constructing grounded theory: a practical guide through qualitative analysis. Thousand Oaks, CA: Sage.
- Cohen, J.A., Goodman, R.F., Campbell, C., Carroll, B.L., & Campagna H. (2009). Military children: The sometimes orphan of war. In S.M. Freeman, B.A. Moore, & A. Freeman (Eds.) *Living and surviving in harm's way: A psychological treatment handbook for pre- and post-deployment of military personnel*. New York: Routledge, 395-416.
- Cozza, S.J., Chun, R.S. and Polo, J.A. (2005), Military families and children during operation Iraqi freedom. *Psychiatric Quarterly*, 76, 4, 371-378.
- Dandeker, C., Wessely, S., Iversen, A.C., & Ross, J. (2006). What's in a name? Defining and caring for "Veterans": The United Kingdom in international perspective. *Armed Forces & Society*, 32, 161-177.
- Defence Analytical Services Agency (2014). Retrieved 6 May 2015 from:
<https://www.gov.uk/government/publications/mod-nationaland-official-statistics-by-topic>
- Dixon, A.F. (2010). Honouring Evan's memory. *AARC Times*, 34, 10, 45-48.
- Doka, K.J. (1989). *Disenfranchised grief: Recognising hidden sorrow*. Lexington, MA: Lexington Books.
- Drake, M.S. (2013). Commemorating fatalities of war and national identity in the twenty-first century. In C.A. Ogden, & S. Wakeman (Eds.) *Corporeality: The body and society*. Chester, England: University of Chester Press, 121-132.
- Drayton, J. (2013). Bodies-in-life/Bodies-in-death: Social work, coronial autopsies and the bonds of identity. *British Journal of Social Work*, 43, 264-281.
- Edwards, R., & Ribbens, J. (1998). Living on the edges: Public knowledge, private lives personal experience. In J. Ribbens, & R. Edwards (Eds.) *Feminist dilemmas in Qualitative research: Public knowledge and private lives*. London: Sage, 1-23.
- Frankl, V.E. (1963). *Man's search for meaning*. New York: Washington Square.
- Geron, Y., Ginzburg, K., & Solomon, Z. (2003). Predictors of bereaved parents' satisfaction with group support: An Israeli perspective. *Death Studies*, 27, 405-26.
- Giannini, G.A. (2011). Finding support in a field of devastation: bereaved parents' narratives of communication and recovery. *Western Journal of Communication*, 75, 5, 541-564.
- Gribble, R., Wessley, S., Klein, S., Alexander, D.A., Dandeker, C., & Fear, N.T. (2014). British public opinion after a decade of war: Attitudes to Iraq and Afghanistan. Retrieved 30 April 2015 from
<https://www.kcl.ac.uk/kcmhr/publications/assetfiles/2014/Gribble2014b.pdf>
- Gubrium, J., & Holstein, J. (2009). *Analyzing narrative reality*. Thousand Oaks, CA: Sage.
- Hamama-Raz, Y., Rosenfeld, S., & Buchbinder, E. (2010). Giving birth to life - again! Bereaved parents' experiences with children born following the death of an adult son. *Death Studies*, 34, 381-403.
- Hassanein, S. (2014). Women, armed conflict, loss and support: From victims to activists, *Research on Humanities & Social Sciences*, 4, 19, 183-189.

Iraq Coalition Casualty Count. Retrieved 23 January 2014 from <http://icasualties.org/>

Kraus, F. (2009). The extended warranty. In B. Monroe, & F. Kraus (Eds.), *Brief interventions for bereaved children*. (2nd Edition). Oxford, England: Oxford University Press, 135-145.

Lebel, U., & Ronel, N. (2005) Parental discourse and activism as a response to bereavement of fallen sons and civilian terrorist victims. *Journal of Loss and Trauma*, 10, 383-405.

Lepore, S.J., Silver, R.C., Wortman, C.B., & Wayment, H.A. (1996). Social constraints, intrusive thoughts, and depressive symptoms among bereaved mothers, *Journal of Personality & Social Psychology*, 70, 2, 271-282.

Levy, Y. (2009) An unbearable price: War casualties and warring democracies. *International Journal of Politics, Culture & Society*, 22, 1: 69-82.

Li, J., Precht, D.H., Mortensen, P.B., & Olsen, J. (2003). Mortality in parents after death of a child in Denmark: A nationwide follow-up study. *Lancet*, 361, 363-367.

Lundberg, T., Olsson, M., & Fürst, C.J. (2013). The perspectives of bereaved family members on their experiences of support in palliative care. *International Journal of Palliative Nursing*, 19, 6, 282-288.

Mabe, P.A. (2009). War and children coping with parental deployment. In S.M. Freeman, B.A. Moore, & A. Freeman (Eds.) *Living and surviving in harm's way: A psychological treatment handbook for pre- and post-deployment of military personnel*. New York: Routledge, 349-370.

Machin, L. (2014). *Working with grief and loss: A theoretical and practical approach*. (2nd Edition). London: Sage.

Malkinson, R., & Bar-Tur, L. (2000). The ageing of grief: Parents grieving of Israeli soldiers. *Journal of Personal and Interpersonal Loss*, 5, 247-261.

McBride, M.C., & Toller, P. (2011). Negotiation of face between bereaved parents and their social networks. *Southern Communication Journal*, 76, 3, 210-229.

Ministry of Defence (2011). *The Armed Forces Covenant*. Retrieved 21 May 2015 from https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/49469/the_armed_forces_covenant.pdf

Ministry of Defence (2014). UK Defence Statistics Compendium, 2013, revised September 2014. Retrieved 9 October 2014 from <https://www.gov.uk/government/statistics/uk-defence-statistics-compendium-2013>

Moyle Wright, P., Shea, D.M., & Gallagher, R. (2014). From seed to tree: Developing community support for perinatally bereaved mothers. *Journal of Perinatal Education*, 23, 3, 151-4.

Neimeyer, R.A. (2001a). *Meaning reconstruction and the experience of loss*. Washington: American Psychological Association.

Neimeyer, R.A. (2001b). Narrative strategies in grief therapy. *Journal of Constructivist Psychology*, 12, 65-85.

Nikkola, I., Kaunonen, M., & Aho, A.L. (2013). Mother's experience of the support from a bereavement follow-up intervention after the death of a child. *Journal of Clinical Nursing*, 22, 1151-1162.

Partington, M. (2012). Forgiveness Project lecture. Retrieved 15 July 2014 from: <http://theforgivenessproject.com/events/past-events/>

- Penny A. (2010). *Supporting bereaved children and young people in military families*. London, England: National Children's Bureau.
- Provost, P.K. (1989). Vietnam: Resolving the death of a loved one. *Archives of Psychiatric Nursing*, 3, 1, 29-33.
- Rando, T.A. (1993). *Treatment of complicated mourning*. Champaign, IL: Research Press.
- Riches, G., & Dawson, P. (1996). Communities of feeling: the culture of bereaved parents. *Mortality*, 1, 2, 143-161.
- Robson, P., & Walter, T. (2013). Hierarchies of loss: A critique of disenfranchised grief. *Omega: Journal of Death & Dying*, 66, 2, 97-119.
- Rolls, L., & Chowns, G. (2011). *Meeting the needs of those bereaved through a military death: Findings from a literature review and scoping study*. Report to the funders. Retrieved 12 December, 2014 from <http://www.forcessupport.org.uk/images/stories/meeting%20the%20needs.pdf>
- Searcy, E. (2014). The dead belong to the living: Disinterment and custody of dead bodies in Nineteenth-Century America. *Journal of Social History*, 48, 1, 112-134.
- Scholtes, D., & Browne, M. (2014). Internalized and externalized continuing bonds in bereaved parents: their relationship with grief intensity and personal growth. *Death Studies*, 39, 2, 75-83.
- Scott, D.L. (2010). Social work practice with children and families. In N.B. Webb (Ed.) *Helping bereaved children: A handbook for practitioners*. (3rd Edition). New York: Guilford Press, 147-164.
- Shrout, P.E., Herman, C.M., & Bolger, N. (2006). The costs and benefits of practical and emotional support on adjustment: A daily diary study of couples experiencing acute stress. *Personal Relationships*, 13, 115-134.
- Stroebe, M., & Schut, H. (1999). The dual process model of coping with bereavement: Rationale and description. *Death Studies*, 23, 197-224.
- Stroebe, M., & Stroebe, W. (1993). Determinants of adjustment to bereavement in younger widows and widowers. In M. Stroebe, W. Stroebe, & R. Hansson (Eds.), *Handbook of bereavement: Theory, research and intervention*. Cambridge: Cambridge University Press, 208-226.
- Welch, J.G., Mannix, M.M., Boergers, J., Jelalian, E., Barbosa, F., Fujii-Rios, H., & Forman, E.N. (2012) Parental interest in a bereavement support visit when a child dies from cancer. *Omega: Journal of Death & Dying*, 65, 4, 335-346.
- Wilson, S.C., & Supiano, K.P. (2011). Experiences of Veteran's widows following conjugal bereavement: A qualitative analysis. *Journal of Women and Ageing*, 23, 77-93.
- Worden, J.W. (2009). *Grief counselling and grief therapy: A handbook for the mental health practitioner*. (4th Edition). New York: Springer.
- Zittoun, T. (2006). *Transition through symbolic resources*. Charlotte, NC: Information Age Publishing.