

**A PHENOMENOLOGICAL STUDY OF UNIVERSITY OF LIMPOPO STUDENTS
FOLLOWING THE DEATH OF A PARENT**

by

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DECLARATION

I declare that A PHENOMENOLOGICAL STUDY OF UNIVERSITY OF LIMPOPO STUDENTS FOLLOWING THE DEATH OF A PARENT (mini-dissertation / dissertation / thesis) hereby submitted to the University of Limpopo, for the degree of MASTER OF ARTS IN CLINICAL PSYCHOLOGY has not previously been submitted by me for a degree at this or any other university; that it is my work in design and in execution, and that all material contained herein has been duly acknowledged.

Kubayi NZ

22/04/2022

DEDICATION

I would like to dedicate this mini-dissertation to the memory of my late mother Mihloti Baloyi (***May her soul rest in peace***), the pain from the loss paved the way.

ACKNOWLEDGEMENTS

I am thankful to God for giving strength and courage when I had none. Philippians 4:13

Without the support and encouragement of many great people, I could not have managed to complete this dissertation. I wish to extend my gratitude to:

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ABSTRACT

The study sought to explore the sequel of bereavement on parentally bereaved students at the University of Limpopo. The study was qualitative in nature. Ten bereaved students (4 Males & 6 Females) were purposefully sampled and interviewed. Data were collected using semi-structured interviews and analysed using a reflexive thematic data analysis method.

The major themes that emerged from the data were isolated and outlined. The results showed that post-parental bereavement, students experienced and expressed their loss distinctly. Notably, their grief was expressed both emotionally, cognitively, behaviourally, physically and spiritually. In spite of the grief having been experienced and expressed diversely, the findings revealed that factors such as - a) circumstances surrounding the death of a parent, b) religious beliefs and cultural practices, c) meanings attached to the death, and, d) lack of support post-bereavement, all influenced participating students' grief trajectory.

On the one hand, the results highlighted that students relied on diverse strategies (e.g., bereavement rituals, counselling services) which helped in their processing and coping with the death of a parent. In particular, psychological counselling was found to be beneficial, although it was associated with mental health stigma. The study findings therefore suggest that parental bereavement can result in the experience of grief, which is an emotionally painful experience that can be complicated secondary to a myriad of factors. A complicated grief experience could lead to academic underachievement in the student population. This therefore suggests that complicated bereavement needs to be treated as earliest as possible in order to avert its interference with the academic work of affected students. It is recommended further that higher institutions of learning need to invest more efforts to educate students on bereavement and its potential impact on their studies. Additionally, efforts should be directed at addressing the stigma of mental illness on-campus so as to help improve the user friendliness of on campus student psychological counselling services. The study is concluded by, amongst others, recommending that future research needs to look closely into university students' meaning making process in bereavement.

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CHAPTER 1: INTRODUCTION

1.1 Background to the study

University life can be stressful for students. Stressors come in the form of attending classes, meeting deadlines, academic performance, maintaining friendships, and the transition from living with family to living alone (Roberts, 2016). Although university students are vulnerable to various stressors, suffering the death of a parent can be more devastating (Berg et al., 2016). Research has demonstrated that it is not uncommon for university students to experience the passing of a parent/s or family member while in university (Seah, 2011; Varga, 2015). Balk (2008) proposed that roughly 22-30% of university students may have encountered the passing of a parent/s within the past year time frame, also 47% are in the initial two years of the grieving process. In a study by Servaty-Seib et al. (2006) it was found that bereaved students had problems with concentration and preparing for their assignments; they also showed reduction in academic performance which affected the completion of their degrees. Further support comes from a study by Oosterhoff and Kaplow (2018) on the link between bereavement and academic functioning. Their study found that parental death impacted negatively on students' academic performance.

The effect of parental death on university students "acts as a catalyst for students to re-evaluate their commitments and may lead to decreased educational performance, academic probation, or academic dismissal" (Servaty-Seib et al., 2006, p. 224). Losing a parent is also associated with multiple health outcomes. Studies have documented depressive experiences, intense emotional pain, post-traumatic stress disorder, suicide, alcohol abuse, and eating disorders (Hoeg et al., 2016; Pham et al., 2018; Tebeka et al., 2016; Berg, 2016; Walker & Shaffer, 2007). While grieving students need emotional support (Cousins et al., 2017), Roberts (2016) noted that, often institutions of higher learning do not always give enough support to help students recuperate from loss. It is against this backdrop that the present study is proposed and seeks to explore the sequel of bereavement on parentally bereaved students at the University of Limpopo.

1.2 Research problem

The goal of every university student is to complete their degree on record time. However, several stressors could interfere with this imperative including the loss of a parent. Parental death can be a fundamentally challenging event in the life of a university student (Murrell et al., 2018), and could derail a student's process of reaching their academic goals (Cox et al., 2016). Many institutions of higher learning incorporate the services of mental health practitioners to assist students with any potential life stressor. To mediate the impact of death and similar stressors on students, the University of Limpopo (UL) has gone as far as investing in a student counselling centre (Fungai, 2013). The centre promises to offer counselling and psychotherapy that aims at improving student's well-being and psychological wellness to determine or alleviate problematic practices, beliefs, compulsions, cognitions or emotions and to improve connections and social aptitudes (CSCD, 2019).

Despite the existence of the UL counselling centre, whether the centre is utilised and found efficient by UL students has not been empirically documented. Generally, the experiences of UL student's post-parental death have also not been well studied. A noted study was conducted with UL 1st year level students but only focused on their adjustment and coping strategies related to being university freshmen (Tom, 2015). With studies showing that parental loss could interfere with students' academic progress (Coyne & Beckman, 2012; Oosterhoff et al., 2018; Schoenfelder, 2015) and grief counselling could mitigate against the effects (Saha et al., 2018; Carr, 2012; Kim, 2015), it becomes important to also investigate the lived experiences of UL students. This would include identifying their coping mechanisms including whether they utilise and find UL counselling services helpful or not. The central question driving the study is, what are UL students' lived experiences and coping strategies post-parental bereavement?

1.3 Operational definition of terms

- **Death:** According to Sadock and Sadock (2011) from a medical perspective, death refers to the absolute cessation of vital functions of a human being. The same meaning will be applicable in the present study.
- **Bereavement:** Refers to the objective situation of an individual who has encountered the death of someone noteworthy (Stroebe et al., 2017). In the context of this study, bereavement will be understood to mean the loss of a parent/s through death, and respective students' personal experiences post such a loss.
- **Grief:** "Grief is the response to loss in all its totality including its physical, emotional, cognitive, behavioural and spiritual manifestations, and as a natural and normal reaction to loss" (Hall, 2014: p. 7). The present study shares the same meaning.
- **Parent/s:** A parent is defined as one who "begets or brings forth offspring" or "a person who brings up and cares for another" (Merriam-webster, 2019). In contrast, the South African Schools Act 84 of 1996 defines a parent as "a person legally entitled to custody of the learner". In this study, a parent means a biological father or mother of a UL student.

1.4. Study purpose

1.4.1 Aim of the study

The aim of the study was to investigate the lived experiences of UL students following the loss of a parent.

1.4.2 Objectives of the study

The objectives of the study were: To describe grief experiences of students following bereavement.

- To understand students' challenges post-parental bereavement.
- To identify students' coping strategies following parental bereavement.

1.5. Significance of the study

Although research on grief has escalated in recent years, few studies have focused on lived experiences following the loss of a parent in university level. Nonetheless, this study served as a baseline study to determine students' lived experiences and inform a broader UL community to investigate this phenomenon. The findings of the study could contribute towards the extension of our understanding of the study of bereavement, its manifestations and associated challenges in the lives of UL students. It is further hoped that the study could assist UL psychologists and counsellors identify UL students' needs and wishes in times of grief, which could also benefit the UL student counselling centre. Long term benefits of the study could also be used for intervention research on student grief.

CHAPTER 2: REVIEW OF LITERATURE

2.1 Introduction

The researcher will explore the existing literature that is pertinent to the research problem. The purpose of this study is to explore the lived experiences of UL students following the death of a parent. Therefore, the researcher will analyse current knowledge regarding bereavement, grief and mourning. The theoretical framework that guided the researcher in the present study will also be discussed.

2.2 Death and dying

Death is an unavoidable piece of life and how people process death and the process of dying is an experience that continues to be analysed. Eventually, how people respond to passing is subject to different components, including attitude towards death and cultural factors.

Regardless of how people define death, when it happens, it can prompt a disturbing period in the existence of surviving family members and the society at large to (Barry and Yuill ,2012). The different bonds that connect an individual to other people and to a more extensive society are, for a period at any rate broken; a period of unsureness where individuals need time to adapt and ideally restore their very own distinctive narratives. This is the reason family members perform different ceremonies after the death of a loved one, the motive behind is to fix and mend those social and individual bonds in order to heal and return to 'normal' functioning. The event of death upsets the amicability, union, and fortitude in both family and local area. Its consequence, more often than not, leads to irreversible and disturbing emotional, psychological and financial damage (Biwul, 2014).

2.3 Bereavement and grief

2.3.1 Bereavement

Bereavement is part of human experience following loss, and every individual experiences the process of grief after loss. Bereavement has been described as the period following death that an individual grieves or suffers the emotional loss of another person (Herkert, 2014). It is a state of sadness one finds themselves in after losing a loved one (Goodman et al., 2004; Li et al., 2008). Bereavement enveloped both passionate aspects of grief and the process of mourning and represents a natural

social process of coping with an emotional response to death (Clarke et al., 1996). People find bereavement distressing despite the fact that it is a universal experience (Mwamwenda, 2004). It is characterised by crying, having distressing thoughts about the deceased and feelings of sadness (Mwamwenda, 2004). As a result of these feelings, there arises the need to talk about the deceased person and the bereaved individual becomes preoccupied with images of the dead person feeling distressed by remembrance of the person (Hardy-Bougere, 2008). Differences in bereavement occur between individuals of distinctive beliefs, ethnic foundations, and nationality (Olasinde, 2012). People respond to loss through the experience of grief and, by also putting in place diverse cultural mourning practices intended to help in post-bereavement recovery (Pears, 2012 as cited in Makgahlela, 2015; Stephen et al., 2014).

2.3.2 Grief

Grief is more complicated than bereavement. Hall (2014) defines “grief as the response to the loss in all of its totality including its physical, emotional, cognitive, behavioural and spiritual manifestation and as a natural and normal reaction to loss” (p. 7). In the case of Shear and Skritskaya (2012), grieving is the process of coping with loss and grief, the endeavour to deal with these experiences. The manner in which grief is experienced and communicated differs extensively across cultures (Gire, 2014). Individuals’ experience of grief varies enormously, its intensity, timeframe, and their way of expressing it (Christ et al., 2003). Grief can be categorised into three severity-related trajectories that include: resilience, chronic grief, and chronic depression. Arizmendi and O’Connor (2015) characterise resilient individuals as those who express very little outward grief after a loss, and instead show a consistent low level of distress or absence of grief altogether” (p. 58). A chronic grief pattern exists when the bereaved individual experience critical emotional agonies identified with the loss and keep longing for deceased (Arizmendi & O’Connor 2015). While three of the four grief trajectories are portrayed by diminished emotional, cognitive, or social functioning, the individual exhibiting the depressed pattern actually improves after the loss. These individuals have an “improved ability to gain comfort from positive memories of the deceased, find meaning in the loss, and show increased perceived benefits from dealing with the loss” (Arizmendi & O’Connor 2015, p. 59). The last trajectory is known as continued chronic depression and is described by high pre-loss

depression levels. Reasonably, instead of recovery after the loss, depression endures and may even intensify as a result of the loss (Arizmendi & O'Connor, 2015).

In some instances, grief could become complicated, and the risk factors can be many including the nature of the death suffered, prior relationship to the deceased and cultural attitudes. (Salters-Pedneault, 2014). Salters-Pedneault goes on to highlight that complicated bereavement also known as prolonged grief disorder becomes complicated when it is protracted, harmful, and disabling to the bereaved. Put another way, complicated grief refers to “the circumstances surrounding the death of a loved one and the debilitating grief symptoms that are potentially delaying or disrupting a process of healthy adjustment and recovery” (Higson-Smith, 2014). Grieving individuals are expected to continue with their lives without the deceased.

2.4 Grief diagnosis

There are various terms that have been coined to fit the symptoms that expand beyond the normative frequency, time frame, and seriousness of normal grief. It is essential to note the complexities of diagnosing a disorder related to grief. Shear et al., (2011) state that “a clinician evaluating a bereaved person is at risk for both over-and under diagnosis, either pathologising a normal condition or neglecting to treat an impairing disorder” (p. 103). The most common diagnoses for grief and bereavement are Persistent Complex Bereavement Disorder, and major depressive disorder with a specifier as bereavement. PCBD refers to the “circumstances surrounding the death of a loved one and the debilitating grief symptoms that are potentially delaying or disrupting a process of healthy adjustment and recovery” (Higson-Smith, 2014).

The DSM-5 has a proposed criterion for a diagnosis of PCBD. PCBD, “bereavement-specific syndrome characterised by prolonged and impairing grief” (Robinaugh et al., 2014, p. 510). According to Gotlib and LeMoult (2014), the diagnostic criteria for PCBD include “persistent yearning/longing for the deceased, preoccupation with the deceased or circumstances of the death, or intense sorrow and emotional pain, which is accompanied by at least six symptoms reflecting reactive distress (e.g., ongoing feelings of disbelief that the person is gone) or social/identity disruption (e.g., difficulty trusting others since the death) for at least 12 months after the death (6 months for children)” (p. 201). Grief and depression have been perceived as isolated entities with overlapping emotions, particularly among bereaved individuals. University students

experiencing the loss of a parent/s are at an increased risk of developing depression within the grieving process.

2. 5 Theories of grief

2.5.1 Psychodynamic theory on bereavement and grief

Freud's psychoanalytical theory of mourning is one of the earliest studies of grief. His perspective on bereavement is noted in his 1917 book entitled *Mourning and Melancholia* (Averill, 1968). According to him grief is an ordinary response to loss. The experience of melancholy for the most part follows an ordinary way; however, it could prompt extreme psychological consequences in the event that the grie to detach from the deceased (Averill, 1968). It appears that individuals develop attachment or love towards objects that are important to them (Stroebe & Stroebe, 1987.) Freud asserted that when an individual demise, the bereaved person needs to battle to cut off the tie and detach the libidinal (love energy) that has been invested in the perished. A healthy recuperation relies upon the fruitful cutting off of these emotional ties (Averill, 1968). When this process is successfully completed, the subject is slowly capable to separate itself from the lost object within a timeframe that cannot be abbreviated (Freud, 1917). However, failure to recognise and work through the loss leads to pathological grief. Therefore, it is important for the bereaved to withdraw libido invested in the lost object.

Freud portrayed how grieving and melancholia include a forced withdrawal of object cathexis. For instance, libidinal energy (physical energy) is sincerely joined to or cathected to significant objects. If the cathected object is lost (loss of a friend or family member) the libidinal ties must be broken through the separation of this physical energy. Since the withdrawal is automatic, it is experienced as an excruciating procedure against which the ego fights. The ego denies the misfortune when a loved one passes on and attempts to put inside its grip a substitute item, whether genuine or imaginary. Averill (1968) asserted that for the survivor to decatharsize the physical energy that they had invested in the lost object, they are required to evaluate reality.

2.5.2 Bowlby's theory of grief

Worden (1983) expressed that Bowlby focused in how the severity of grief may be affected by the kind of connection one had with the deceased, His attachment theory gives means for people to understand the bonds of love that they make with each

other and the intensity of the emotional response individuals make when the connection is broken. The point of connection is to keep a bond of affection and any threat to this bond will lead certain behaviours such as crying and clinging (Parkes, 1999; Worden, 1983).

As indicated by Bowlby 1971, 1975, 1980 (cited in Stroebe et al., 1992) “grief is conceptualized as a type of detachment anxiety and the aim is to recover proximity to the lost object”. Bowlby noted during his investigation with children the effect that detachment had on children when they were disconnected from their parental figures. He characterized the separation into three unique stages, namely the protest phase, the despair phase and the detachment phase (Bowlby, 1973 as cited in Worden, 1983) and distinguished how certain conditions surrounding the death of a loved one could influence the characteristics, intensity and duration of the bereavement process. His grief theory explained a cycle of phases the bereaved individual experienced, the grief response and the time to arrive at recuperation. During the initial phase of grief, grieving individuals experience a feeling of numbness and shock and may show outbursts of extreme intense distress or anger. In this phase, the bereaved is unable to comprehend the effect of the loss. In the second phase the bereaved battles the loss, and yearns for the deceased to return to life. This phase triggers crying, tension, loss of security and confusion (Stroebe & Stroebe, 1987). During the third phase, as the grieving individual learn how to live without the deceased, intense despair is experienced.

2.5.3 “Parkes’ analysis of grief”

Parkes bases his theory on past theories, to develop a new conceptualized grief experience. Like Bowlby, he viewed grief from a developmental point of view. He believed that “grief is not itself a unitary and universal phenomenon but is derived from the interactions of several components which are themselves universal” (Parkes, 2000, p. 323). He postulated the following presumptions;

- i. “All social animals make and keep connections which are essential for survival.”
- ii. “It is in the nature of attachments that they resist severance. In the event that a danger is perceived to the attachment (separation), neuro-

physiological arousal occurs and behavioural inclinations (crying and searching) begin to achieve a reunion with the separated object.”

- iii. “Attachments have high survival value; attachment behaviours take priority over other tendencies.”
- iv. “If the set goal of the behaviour is not accomplished, the behaviour will gradually diminish, and the person becomes open to other attachments.”

Parkes conceptualized grief as a progression of moving stages that are available for a while. These stages were numbness, complication, misery and recuperation. His conceptualization of despondency explained how it could be felt long after the loss of the loved object (Parkes & Weiss, 1983).

2.5.4 Kubler Ross' 5 stages of grief

Kübler-Ross (1969) adjusted Bowlby and Parkes' theories and suggested that a terminally ill patient would advance through the following stages of grief; 1). Denial and isolation; 2). Anger; 3). Bargaining; 4). Depression, and finally; 5). Acceptance upon learning of their illness (Kessler & Kübler-Ross, 2005). The first stage is denial, where the grieving person encounters the initial shock of the loss. For certain individuals, it might need some time for the truth of the loss to sink in, but in due time one comes to acknowledge the experience intellectually and continues to the emotional experience of grief.

Moran (2011)“detailed that the second stage of grief is bargaining. This stage comes from the powerful urge to see the deceased again or desire that the loss is not permanent. In most cases, people will engage in a dialogue with a higher power, promising to live a better life or even offering to exchange places with the deceased out of fear that life cannot proceed without the lost person. The third stage is anger, which is the consequence of the dissatisfaction with the inability to hold on to the deceased. This displeasure and dissatisfaction can be directed to various sources, for example, a higher power, doctors, the deceased or oneself. Moran further indicates that the fourth stage is depression, which is particularly different from clinical depression. In this context, depression alludes to the intense sadness and emotional pain after the loss of a loved one. The fifth and last stage is acceptance, where the bereaved accepts the reality of the loss and is able to continue with their life without

the deceased. In this stage, the bereaved is able to speak about the deceased without experiencing any prolonged emotional pain”.

According to Kübler-Ross (1969) theory, it appears that the experience of death can be favourable in our lives and we should embrace it since it helps us to mature and grow. She said;

“Death can be very hard to face, and we might be tempted to avoid it and flee from having to confront it. But if you have the courage to deal with it when it comes into your life – to accept it as an important and valuable part of life—then, whether you are facing your own death, that of someone in your care or that of a love one, you will grow”.

(Kubler-Ross, 1975, p. 117)

2.5.5 “The Dual Process Model (DPM)”

The Dual Process Model (DPM) of bereavement was developed by Stroebe and Schut (1999). The model is a classification that explains ways that individuals deal with the passing of a loved one (Stroebe and Schut, 1999). The DPM portrayed sorrow as an oscillatory cycle in which a deprived individual on the other hand encounters and tries not to endure during a similar timeframe instead of straight design with one phase finishing and another start (Wright and Hogan, 2008, p. 353). Melancholy is recognised as a vigorous wherein there is a rotation between concentrating on the loss of the individual who has passed on (loss orientation) and keeping away from that concentration (restoration orientation). The loss direction envelops distress work, while the reclamation direction includes managing optional misfortunes because of the passing (Dent, 2005).

The Dual Process Model puts more significance on better portrayals of adjusting and forecast of the undesirable life event. The model tries to comprehend the distinctions in the manner individuals manage death (Stroebe and Schut, 2010). For grieving to be resolved, people find themselves in a dual dynamic process; that of managing the effect of the loss from a psychological orientation (for example, shock, depression, bitterness, outrage) while the individual needs to deal with the hardships that might emerge because of the loss (like financial difficulties, family conflicts etc) (Dent, 2005).

2.5.6 African perspective of grief and bereavement

According to Monteiro-Ferreira (2014), the African viewpoint is theoretically established in the understanding of human experiences from their cultural and historical viewpoint. Afrocentric theory places an emphasis on African culture as the methodological way to deal with African customs and cultures while rejecting the inferior place that has consistently been given to Black experiences and cultures by Eurocentric researchers.

Most Africans believe in Christianity and African native convictions (Makgahlela et al., 2019). Devotees of African traditions regard their existence as controlled by their forefathers, God and witches (Mkhize 2008). According to Ngobese (2004) in Yawa (2010) when an individual dies, the person is not dead however, he has gone to the world of ancestors. Thus, believing in life after death maintains the connection between the dead and the living. In this manner, the thought of ancestors aids the bereavement process in light of the fact that the bereaved get psychological assistance in the hope that they will meet the deceased in the next life. Usually, it is believed that ancestors assume a significant part of protecting the surviving family members and helping them to be prosperous (Kgatla, 2014).

In an African setting, bereavement is managed through mourning rituals, and rituals are central to grieving ceremonies that are practiced. Rituals are traditions that are exceptional to a specific group and performed for the rebuilding of ordinariness within the individual, family or group (Mpono 2007:82; Hardy-Bougere, 2008:68). Common rituals include ancestor reverence rituals, cleansing ceremonies and the cutting of hair by the surviving family members (Yawa 2010). As per Matumba (2003:44), the cutting of hair by the surviving family members is done as a symbol of mourning that shows that one is moving on with their new life after the loss. Eyetsemitan (2002), as cited in Dlukulu (2010:63) notes that “life is concentrated in the hair, shaving symbolises death, and its growing again indicates the strengthening of life.”

The preceding discussion was an attempt to provide a synopsis of historical and contemporary perspectives regarding bereavement, grief, and mourning. From the works of Freud on *Mourning and Melancholia*, stage theories and now, contemporary views such as the Dual-Process-Model, all theories and models helped anchor the present study. And in particular, the African perspective was meant to help

contextualise the present study in order to help illuminate the reality under investigation. The theoretical framework chosen to guide or orient the study is presented here below.

2.6 Theoretical framework

2.6.1 Bonanno's four-component model

The present study used Bonanno's four-component model as its lens. The model emerged as an element of a hypothetical viewpoint that intended to build up an integrative, reasonably stable, and empirically testable framework for comprehending individual contrasts in grieving (Stroebe & Schut, 2015). According to Arcer (2001) the model elaborates on the sources of impact determining individual differences in grieving. Unlike other models, the four-component model tries to integrate models from different theoretical approaches into a comprehensive model that considers the social and practical parts of emotions (Wortman & Boerner, 2011).

The model regards the process of grief in terms of four primary components:

- *The context of the loss*, to make reference to whether the death of the beloved person was expected or unexpected;
- *A continuum of subjective meanings*, referring to how bereaved individuals make meaning of their loss and life;
- *Changing representations of the lost relationship*, for example, does the bereaved individual keep a continuing relationship with the deceased or not?
- *Coping and emotion regulation*, which is concerned with the processes that can alleviate or aggravate the strain of loss (Bonanno and Kaltman, 2014, p. 768-771).

This model was accordingly viewed as a suitable theoretical framework for the present study, as it helped the researcher theorise about students' lived experiences and coping mechanisms following the death of a parent. The model embraces individual differences in terms of grieving and coping; therefore, it was effective in helping the researcher to gain a better understanding of each student's situation.

2.7 Concluding remarks

The present chapter offered an overview of the literature on death and dying, bereavement and grief, and diagnostic issues. Several grief theories, starting with Sigmund Freud's *Mourning and Melancholia* were presented with a view to help anchor the present study. The Afrocentric viewpoint was also dealt with to help illuminate the influence of locality based beliefs and cultural practices on bereavement and its management. The chapter was concluded with a presentation of Bonanno's four-component model, which was adopted as a theoretical framework for the present study.

CHAPTER 3: RESEARCH METHODOLOGY

3.1 Introduction

The following chapter contains an exposition of the research design and research methodology used for the present study. De Vos et al., (2005) expressed that the term research methodology embraces the guidelines and procedures relevant to a particular research project and legitimizes the picked path by showing its legitimacy and unwavering quality. As a result, this section examines qualitative research as an approach that was utilized for this current study. The strengths and shortcomings of the approach will be highlighted. The section goes further to provide a discussion with respect to the setting for the study and how sampling was done. The discussion of data collection provides information on how data was collected. The data collection strategy that was chosen is described as well as data collection instrument. The data analysis method is also described in detail whilst issues relating to the trustworthiness of the study are highlighted. The last part of this study centres around ethical considerations for the present study.

3.2 Research design

The present study followed a qualitative research approach to explore the sequel of bereavement on parentally bereaved students at the University of Limpopo. (See figure 1 for an illustration of the process)

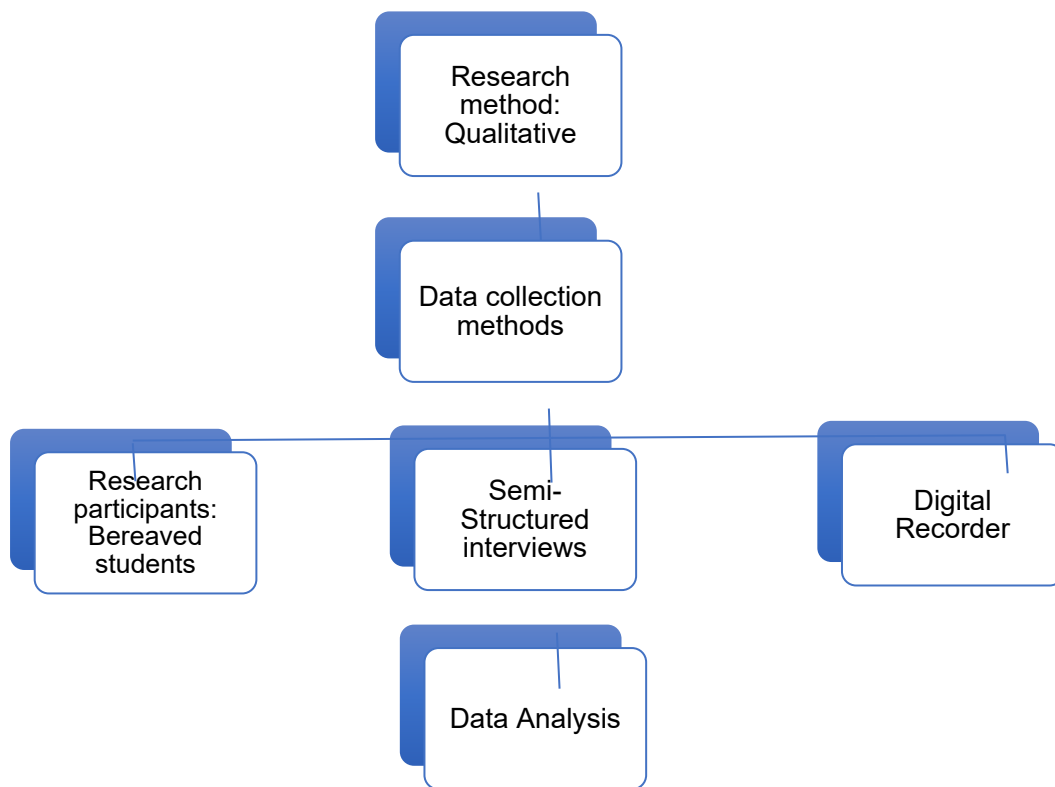


Figure 1: Schematic Representation of the Research design

The research design alludes to the plan to which the present study will be executed. It refers to all the planning included in the study as well as the choices that the researcher had to make in order to answer the research question successfully and effectively. Due to the nature of this study, a qualitative approach was found appropriate in that the study seeks to gain insights into the experiences and viewpoints of participants through rich descriptions of the phenomenon of interest (Strauss & Corbin, 1990). Bogdan and Biklen (2007, p. 274) define qualitative research as “an approach to social science research that emphasizes collecting descriptive data in natural settings, uses inductive thinking, and emphasizes understanding the subject’s point of view.”

As per Babbie (2010), the strength of qualitative research is its capacity to give complex textual portrayals of how individuals experience a given research issue. It is a flexible method to perform data collection, subsequent analysis and interpretation of gathered data. Qualitative research has a few weaknesses on the grounds in that the methodology is not an appropriate means for arriving at statistical descriptions of a large population. As per Meck et al., (2005) one strength of qualitative research is the

open door given to participants to using their own words, instead of compelling them to browse from fixed responses. Open-ended questions can bring out responses that are meaningful and culturally to the participants. The data is gathered from few people which implies that the findings cannot be generalised to a bigger populace. Meticulousness is progressively hard to keep up, survey and exhibit and subjectivity prompts procedural issues (Merriam, 2009; Hesse-Biber & Leavy, 2006).

The design of choice is the phenomenological approach. Solowski (2000) describes phenomenology as “the study of human experience and of the way things present themselves to us in and through such experience” (p. 2). Since the study attempts to investigate the lived experiences of parentally bereaved university students, the hermeneutic phenomenological design was embraced. According to Crowther et al., (2017) hermeneutic phenomenology is a research design that awards the researcher access to rich logical information and surfaces meanings from experience as it is lived. This design was embraced for comprehending, narrating and interpreting the lived experiences of parentally bereaved UL students (Apelian & Nesteruk, 2017).

3.3 Sampling and recruitment strategy

Nieuwenhuis (2007) express that a sample is a selection of various cases from a population for the purposes of the study. Selection “involves decisions about which people, settings, events, behaviours, and/or processes to observe” (Durrheim 2006, p.49). In addition, Durrheim stated that sampling strategies utilized should be in accordance to the research approach chosen for the study. As per Strydom and Delport (2005), in qualitative research, purposive sampling methods are utilized on the grounds that the researcher searches for participants and settings where the specific phenomena being studied will most likely occur. Purposeful sampling was used for the present study. This is a sampling technique wherein specific targets of individuals or occasions are picked purposefully to give imperative data that cannot be acquired from different decisions (Maxwell, 1996). It includes choosing participants who share specific qualities and can possibly give rich, critical and diverse information pertinent to the research question (Favor & Higson-Smith, 2000; Tong et al., 2007). With purposive sampling the researcher chooses the sample arbitrarily which he considers significant for the research and trust it as typical and representative of the population. In this study, purposeful sampling was deemed to be a suitable technique. Purposeful sampling strategy aids researchers to gain access to hidden populations, and

therefore gain in-depth knowledge or insight into a topic of interest. In this study, the target participants needed to have suffered a loss of a parent over 2-months and be a registered university student.

3.4 Data collection

For the present study, semi-structured interviews were utilized as instruments for data collection (see Appendix 1 for interview guide).

Semi-structured interview is a verbal exchange where one individual, the interviewer endeavours to solicit information from another individual by posing questions; the interviewer composes a list of prearranged questions (Clifford et al., 2016). As such, semi-structured interviews “are more flexible in nature and allow depth to be attained by providing the opportunity on the part of the interviewer to review and intensify the interviewee’s response” (Alshenqeeti, 2014, p. 40). Digital tape recorder was utilised to record the interviews and they will be interpreted before data is analysed.

The interviews were conducted in English. The information gathered was recorded and put away utilizing a sound recorder with the consent of the participants. The recorded interviews were transcribed verbatim. According to Blaxter Hughes and Tight (2006) the use of a digital recorder enables the researcher to concentrate on the interview and engage with the participant.

3.5 Data analysis

The gathered data were analysed using the reflexive thematic data analysis method. The reflexive thematic analysis is a data reduction method by which qualitative data are fragmented, classified, summed up and reconstructed such that it catches the important concepts within the data set. Thematic analysis is principally a descriptive technique that facilitates the search for patterns of experience within a qualitative data set (Ayres, 2012). Reflexive thematic analysis allows the researcher to extract meanings and ideas from data as well as identifying, examining and recording patterns of themes (Braun & Clauke, 2019). The accompanying steps of thematic analysis as described by Braun & Clarke (2006) were followed:

- **Familiarisation with the data:** The researcher evaluates data collected. Pope, Ziebland and Mays (2000) demonstrated that this procedure includes drenching in the raw information (or typically a practical selection from the data) by

listening to tapes, perusing transcripts and considering notes, to record key ideas and intermittent themes. At this stage, the researcher wants to get an “overall sense or feel for the data” (Wellington 2000, as cited in Watkins & Wallace 2012, p. 222). In the context of this study, the researcher made notes of relevant information to the study along the margin.

- **Coding:** This process includes coding or marking of themes recognized by the researcher to help in recognising of themes determined. As per Clarke and Braun (2013) coding as a typical component of numerous ways to deal with qualitative examination includes creating brief labels for significant features of the information of importance to the (expansive) research question guiding the investigation. Coding is not just a strategy for decreasing information; it is additionally a systematic procedure as codes catch both a semantic and applied reading of the information. The researcher codes every data item and ends by collating all their codes and relevant data extracts. In this study, the researcher took expressions and sentences that seemed to have similar extracts them into a code under a subject. Various colours were utilized to highlight the expressions in order for the researcher to easily identify similar categories.
- **Searching for themes:** This step begins when a researcher has coded all the data collected. The aim is to sort out different codes into potential themes and collating all the important coded data extracts inside the recognised themes. According to Braun and Clarke (2006), the researcher should break down the codes and think about how various codes may join to form a broad theme.

Bearing in mind the ideas mentioned above, the researcher immersed herself in the data and identified relevant topics about the experiences of the participants. Coherent ideas or topics were grouped into meaningful categories and assigned descriptive themes.

- **Reviewing themes:** After the selection of themes and coding the researcher investigates the identified topics with the aim of contrasting areas of content and seek out data that may have been left during the coding framework. The aim is to go through data repeatedly until there is certainty that no new topics surface. As indicated by Braun and Clarke (2006) this stage includes the refinement of those themes. At this stage, some participants' themes may not by any means

be themes (e.g., if there is insufficient data to support them, or the data are too diverse), while others might collapse into each other (e.g., two evidently separate themes may form one theme) and different themes may need to be separated into different themes. This was achieved by drawing on deduced issues and questions from the objectives of the study.

- **Defining and naming themes:** This progression requires the researcher to conduct and compose a comprehensive analysis of every theme. The questions to be asked: 'what story does this topic tell?' and 'how does this subject fit into the general story in the data?'), recognizing the 'embodiment' of each subject and developing a compact, punchy and informative name for each topic (Braun & Clark 2006). The names should give the reader an idea of what the topic is about.
- **Writing up:** This step involves assembling a composed report with respect to the study utilizing themes identified in the analysis as sub-headings. Clarke and Braun (2013) reviewing includes weaving together the logical narrative and (striking) data extracts to illustrate a logical story about the data in relation to existing literature.

3.6 Quality criteria

To make certain that the findings of the investigation will be of scientific merit, the following qualitative research principles as outlined by (Shenton, 2004) were observed:

3.6.1 Credibility

Credibility is achieved if the researcher accurately identifies and describes the subject (De Vos et al., p. 346). Credibility is the substitute for internal validity. Durheim and Wassenaar (2002) allude to credibility as the confirmation that the conclusions of the researcher come from the collected data. In this manner, the principal concern of a qualitative researcher lies with the genuine exactness of their research and record of events, that is, they are not making up or misshaping things that they heard or saw (Huberman & Miles, 2002). Therefore, credibility is identified with whether the study findings represent what really happened in the analysis setting (McMillann & Shumacher, 2001; Merriam, 1998; Pitney, 2004; Babbie & Moun-ton, 2001). In the present study, the researcher identified the population and setting to place clear boundaries around the study. Prior to interviewing the researcher-built rapport with

each participant to create a suitable environment for interviewing. Furthermore, the researcher utilized semi-structured interview guide which allowed probing and recurring themes to be obtained..

3.6.2 Transferability

Transferability is the substitute for external validity; the discoveries of the study must be applicable to the rest of the population that did not participate in the study. According to Durrheim and Wassenaar (2002), transferability is how much speculation can be produced using the information and setting of the analysis to the more extensive population and settings. As such, transferability is viewed as how much the reader can take the results of the study and transfer them to different settings. As per Bitsch (2005) as cited in Anney (2014), the “researcher facilitates the transferability judgment by a potential user through ‘thick description’ and purposeful sampling” (p. 85). To enhance transferability, the researcher laid out the narrative of the study participants and research settings. As a result, the study will furnish readers with adequate data to pass judgement on the relevance of results to different settings (Patton, 2002; Seale et al., 2004). In this study, the concept of generalisability was a limitation due to small sample size of the population. However, the findings of the study can be applicable in other settings.

3.6.3 Dependability

Dependability is the substitute to reliability. Dependability alludes to how much the reader can be persuaded that the study results were credible (Durrheim & Wassenaar, 2002). Dependability relies upon whether the results would be equivalent if the study was conducted with similar participants or in a comparable setting (Pitney, 2004; Babbie & Mouton, 2001; Cohen et al., 2000; Merriam, 1998). Shenton (2004) further showed that to address the constancy issue all the more straightforwardly, the cycles inside the review ought to be accounted for exhaustively, accordingly empowering a future analyst to rehash the work, if not really to acquire similar outcomes. With regards to the current review, the scientist talked about the interaction that was followed and kept the recorded and translated interviews in a free from any and all harm place

3.6.4 Confirmability

Confirmability catches the conventional idea of objectivity. Babbie and Mouton (2001) portray confirmability as how much the discoveries of the study are the result of the

focal point of request, and not of the inclinations of the researcher. Here steps must be taken to help ensure as far as possible that the work's findings are the result of the experiences and ideas of the informants, rather than the characteristics and preferences of the researcher (De Vos, 2002; Shenton, 2004). Confirmability is "concerned with establishing that data and interpretations of the findings are not figments of the inquirer's imagination but are clearly derived from the data" (Tobin & Begley, 2004, p. 392). For the present study, the researcher drew up findings which depended entirely on the results of the participant's involvement. Furthermore, the researcher was always mindful of the potential impact of her own biases and the value of the ultimate results of the study (Linchon, 2002; Terre Blanche et al., 2006).

3.7 Ethical considerations

3.7.1 Permission to conduct the study

Before commencing with the study, the researcher obtained ethical clearance from the University of Limpopo's Research Ethics Committee.

3.7.2 Informed consent

As indicated by Du Plooy et al., (2014), informed consent is the endorsement given in full knowledge of the study. It is the obligation of the researcher to inform the participant about the importance of the study, its aims, purpose, objectives, and/or benefits as well as the risks regarding participation. The researcher should also explain all facets of the research to the participants before they agree to take part in the study (Christensen et al., 2014). In this study, each of the participants was informed of the nature of the study, inherent risks, and that they would be allowed to withdraw participation at any stage. Subsequent to such deliberations, only those students willing to participate were asked to sign informed consent forms (See appendix 2).

3.7.3 Confidentiality

Gregory (2003) demonstrated that paying attention to privacy does not only mean deliberately taking it upon oneself to not uncover to others what has been uncovered in confidence by the participants, however, it places more weight upon the researcher to ensure that confidentiality is not accidentally breached. To accede to this principle of finding out more about the participants and their respective identities and personal information will not be shared with anyone. Any information that could potentially be

traced back to each of the participants would be falsified. Rather than using their real names, the participants were addressed as “participant A, B, C...” This was explained to the participants by the researcher and was also included in the consent form (Du Plooy et al., 2014).

3.7.4 Voluntary participation

No prospective participant should be compelled to become a participant (Babbie, 2002). As per Strydom (2005) participants should be made mindful that participation is intentional. This suggests that they are not compelled to partake in the examination and may, anytime, be permitted to pull out from the research without exploitation. Strydom (2005) additionally adds that all invested individuals ought to be allowed to pose inquiries in case there is something they don't comprehend. Participation in this study was voluntary. Each participant was informed about terminating their participation at any time, should the need arise. This principle was indicated in the informed consent forms (see Appendix 2) and was discussed with participants prior to participation in the study.

3.7.5 Aftercare for participants

It is the duty of the researcher to make certain that participants are protected during and after the study. According to Strydom (2002) the duty to protect participants against harm goes far more than endeavours to fix or attempt to limit such harm. Therefore, a researcher should reassure the participants that they would be protected against physical or emotional harm. This includes conducting interviews in a manner that is sensitive. In respect of the emotional arousal the participants might have experienced following the completion of the interviews, the following precautions were made. Each participant was asked about their experience of the interview, to which, all expressed some relief and happiness at having shared their experiences. The researcher went on to provide the participants with contact details of a clinical psychologist at UL counselling centre for their post the interviews should a need arise.

3.8 Conclusion

The research methodology, which is essentially the plan according to which the research was executed, was outlined in this chapter. The selection of the target population and sampling frame, data-collection methods and procedures, as well as the data analysis was also accounted for. Furthermore, data collected from the

participants were collected using thematic analysis. Lastly, the strategies to enhance the objectivity and reliability of the study were discussed and explained.

CHAPTER 4: RESULTS

4.1 Introduction

In this chapter, the results of the study are presented, starting with demographic details of participants. This is followed by a presentation of themes that emerged from data analysis, i.e., a) Emotional manifestations of grief, b) Cognitive manifestations of grief, c) Behavioural manifestations of grief, d) Somatic manifestations of grief, e) Religious/Spiritual manifestations of grief, f) Challenges associated with parental death, and g) Coping with the death of a parent. The chapter will be concluded by providing a summary of the findings.

4.2 Demographic details of participants

Ten University of Limpopo students participated in the study. The demographic details of the participants are presented in the table below (Table 1). Pseudo names were utilized to protect the identity of each participant.

Participant no	Gender	Age	Level of study	Duration since loss was experienced	Medically certified cause of death
A	F	22	Honours	2 years	HIV & AIDS
B	F	24	Honours	3 years	Diabetes
C	F	20	2 nd year	11 months	Car accident
D	M	24	Honours	10 months	Fire
E	F	27	Honours	2 years 3 Months	Diabetes
F	F	31	Honours	3 years	Tuberculosis
G	M	32	PhD	3 Months	COVID-19
H	M	25	3 rd year	6 Months	Cancer
I	F	28	Masters	2 months	COVID-19
J	M	26	Masters	1 year	Hypotension

Table 1: Demographic details of the participants

The above table demonstrates demographic information of the participants that were interviewed. Participating students were drawn from the University of Limpopo student population. All participants were registered students and their level of study varied from 2nd year to PhD. Participants' age ranged between twenty (20) and

thirty-two (32) years old. The participants comprised of 6 females and 4 males who had experienced the loss of a parent within a period three years.

4.3 Emerging themes

The themes and sub-themes that emerged from the data are presented in table 2 below.

The themes and sub-themes that emerged from the data are presented in table 2 below.

Theme number	Main themes	Subthemes
1.	Emotional manifestations of grief	<ul style="list-style-type: none"> ● Sadness and emotional distress ● Denial ● Blame and Anger ● Acceptance
2.	Cognitive manifestations of grief	<ul style="list-style-type: none"> ● Attention and concentration difficulties ● Loss of interest in previously enjoyed activities ● Disturbing dreams
3.	Behavioural manifestations of grief	<ul style="list-style-type: none"> ● Social withdrawal
4.	Somatic manifestations of grief	<ul style="list-style-type: none"> ● Appetite and sleep disturbances ● Physical pain
5.	Religious/Spiritual manifestations of grief	<ul style="list-style-type: none"> ● God and/or ancestral explanations ● Witchcraft explanations ● Spiritual explanations
6.	Challenges associated with parental death	<ul style="list-style-type: none"> ● Lack of material support ● Lack of emotional support

7.	Coping with the death of a parent	<ul style="list-style-type: none"> ● Reliance on bereavement rituals ● Reliance on psychological services
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Table 2: Themes and sub-themes that emerged from the interviews

4.3.1 Theme 1: Emotional manifestations of grief

4.3.1.1 Sadness and mental distress:

Sadness and mental distress were the most prominent emotional experiences reported by the participants. Grief was expressed as a saddening and distressful experience. The bereaved often cry or become depressed. Participants had this to say about their experience of sadness after losing a parent:

“I was very upset. I wished she could come back to us. I would cry in class, I would cry at home, I would cry anywhere and anytime. I was unable to sleep at night because I kept on crying. I would cry almost every day after losing her.” **Participant F, Female, 31 years old**

“I felt sad, I was upset. It was not nice amongst us. We could hardly eat. We always cried.” **Participant J, Male, 26 years old**

“I was always sad, the future looked blurry without my mom. I felt like there was no reason for me to continue with my life.” **Participant I, Female, 28 years old**

Most participants described how important their parents were in their lives and how they were saddened by their parents’ death:

“Oh my God!!! I'd say that I just became an emotional person after losing my mom. I became easily irritable, did not want to be with anyone, I would isolate myself every time I could not understand what was going on in my head, I was confused” **Participant F, Female, 31 years old**

“I was diagnosed with depression after losing my mom”. **Participant B, Female, 24 years old**

“Sometimes I would just feel like there's no use for me to go on with this life. I just feel like, okay, I lost the parent who was closest to me, and then relatives were all bad. By that time, I was even like, rude with my sister. My mom is unemployed we were depending on SASSA at that time. So, everything just became too much.” **Participant B, female, 24 years old**

From the above excerpts, it is evident that sadness and emotional distress were prominent grief reactions experienced by bereaved students.

4.3.1.2 Denial:

The findings also revealed that some students were in denial of their parental loss for some time. This is what some of the participants said:

“I was in denial, I thought, no man, it didn't happen. And I lived in denial for a long time” **Participant B, Female, 24 years old**

‘I didn't believe that she was gone. I experienced a gap in my heart, something was missing” **Participant A, Female, 22 years old'**

“Her death was sudden, she was admitted in hospital for about two weeks, COVID-19 restrictions made it worse. We were not allowed to visit her in the hospital. I couldn't believe she was gone.” **Participant G, Male, 32 years old**

“I don't know what caused the fire. My mother and sister called me and told me that there was someone in the house, your father has passed away. I took it lightly, I thought they were kidding.” **Participant D, Male, 24 years old**

After the loss of her father, participant B had difficulties with believing the reality of her father's passing. She kept on thinking that one day he could come back. From her response, like other students, it was clear that she experienced denial as expressed herein:

“I was in denial, I thought, no man, it didn't happen. And then I lived in denial for a long time, in a way that I just changed in a way like I kind of wore his character. And I wanted to live the life that he lived, I would say

things that he used to say. I used to speak his words to people around me. I wanted everyone to still feel like he is around, he is still here, and he is not gone. He will never leave us.” **Participant B, Female, 24 years old**

From the above excerpts, it does appear that some students persistently lived in denial and yearned for their late parents. This denial appears to have prolonged their grief experiences.

4.3.1.3 Blame and anger:

Study findings further displayed that some students also suffered from blame and anger following parental loss. Students blamed themselves for not being present when their parents took their last breath:

“I was angry that I was not at home when he passed away.”

Participant E, female, 27 years old

“I used to cry a lot and sometimes I would have anger outbursts. I was also irritable, every small thing would make me angry” **participant F, Female, 31 years old**

Participant G, whose mother was hospitalised for two weeks and died of COVID-19 detailed that, after he learned about his mother’s demise, he was angry that his mother had passed away in their absence. He said:

Participant G: *“I was very angry”* (silent for a few minutes)

Interviewer: What made you angry?

Participant G: *“I was angry that I was not allowed to visit her at the hospital. I didn’t get to say goodbye.”*

When asked about her experience of losing her father to COVID-19, participant I described her anger towards the people that were responsible for nursing her father as follows:

I am really angry, they neglected him until he passed away. I wish we had taken care of him here at home. **Participant I, Female, 28 years old**

Anger manifested in different forms among participants. Participant G and I's anger was directed towards the government systems. When probed further, they described their intense anger towards the hospital and the national COVID-19 regulations. Participant G said this about his anger:

"It makes me angry that she did not get the send-off she deserved. We were not allowed to view her body and her coffin was covered in plastic. It makes me angry" **Participant G, Male, 32 years old**

4.3.1.4 Acceptance:

The findings of the study revealed that bereaved students at some point in their lives, had to accept the death of a parent and moved on with their lives. This is what some participants had to say:

"It was painful for a very long time, but by the beginning of 2020 I had forgotten about the pain. I was fine. I would tell myself that I've lost my mother, accepted that I'm indeed bereaved" **Participant A, Male, 26 years old**

"After seeing his body in a coffin, I knew that he was gone for good" **Participant C, Female, 20 years old**

"I visited my father's grave 11 months after he passed away. I was able to accept that he is no more after seeing his name on the tombstone." **Participant B, Female, 24 years old**

It is apparent from the extracts that participants were overwhelmed with grief at the beginning, however, they were able to accept the loss of their parents and adjust to life without the deceased parent.

4.3.2 Theme 2: Cognitive manifestations of grief

4.3.2.1 Attention and concentration difficulties:

Parental death further affected student attention and concentration leading to impaired academic performance:

"I was always sad, my concentration in class dropped. I couldn't concentrate, I would cry until I lost focus. I couldn't even memorise what

*I studied. I lost interest in my schoolwork. **Participant A, Female, 22 years old***

“I failed 3 modules after the loss of my father, I could not concentrate in class, I had no motivation and sometimes I was too hungry to study.”

Participant E, Female, 27 years old

*“My academics dropped, my average dropped, I have always been an A student, but then after my mom passed away, I started passing with fifty’s.” **Participant F, Female, 31 years old***

*“I experienced academic challenges after losing my father, I struggled to memorise the stuff I had studied. My mind was always preoccupied by my father’s death.” **Participant E, Female, 27 years old***

Participant G, who lost his mother to COVID-19 shared his challenges with submitting his PhD thesis. The interview extracts below capture his personal experience:

***Participant G:** “Losing my mother delayed the submission of my thesis, I was supposed to submit end of November, but I couldn’t.”*

***Interviewer:** What made the submission of your thesis more difficult?*

***Participant G:** “I had no motivation and I struggled with concentration”*

Conversely, some participants described how losing a parent became a motivation for the completion of their studies, as illustrated by the extracts below:

*“In terms of studies I knew that it was the only way I was going to get myself and my family out of the situation. And then I made sure that I did my best and never failed any module, I completed my Degree in record time. I turned everything into something positive, something to motivate myself to do better.” **Participant B, Female, 24 years old***

*“Academically I would say I was affected positively when I want to study, I think of the situation at home, my sisters and my mother and the traumatic loss of my father motivated me to excel.” **Participant D, Male, 24 years old***

4.3.2.2 Loss of interest in previously enjoyed activities:

The results of this study showed that bereaved students experience emotional distress to such an extent that they lost interest in previously enjoyed activities.

*“I used to read a lot, but after my father passed away, I lost interest in reading. Nothing made sense anymore.” **Participant D, Male, 24 years old***

*“I was a bubbly person that loved going out with friends. But that changed as a result of my loss. I don’t like people anymore; it feels like my whole personality changed.” **Participant C, Female, 20 years old***

4.3.2.3 Dreams:

It appeared from the study results that bereaved students yearn for the bond they had with their parents. As a result, some participants reported dreaming about their deceased parent during their emotional difficulties:

*“After seeing his dead body, it affected me so badly. I could not sleep at night, I used to have bad dreams about my father. That was a sign that he is not resting in peace” **Participant D, Male, 24 years old***

*“After the funeral my mother visited me through dreams saying that I mustn’t be worried, everything would be fine. Ah! In the morning when I woke up, I felt relieved.” **Participant A, Female, 22 years old***

This subtheme highlights the cognitive symptoms experienced by the bereaved university students after the death of a parent. It is apparent that bereaved students struggled with attention difficulties, diminished concentration, anhedonia and disturbing dreams some of which impacted negatively on their wellbeing and academic work.

4.3.3 Theme 3: Behavioural manifestations of grief

4.3.3.1 Social withdrawal:

Another finding was that, participants expressed their grief experience through social withdrawal. Some of the bereaved students remarked that they lost interest in social relations, became isolated and lonely. Below are the excerpts that support this statement:

“I used to be isolated from other people. I was no longer interested in being in a crowd, I even lost my girlfriend and two of my friends.”

Participant H, Male, 25 years old

“I started isolating myself, I didn’t like going out anymore. Everything turned out to be boring.” ***Participant C, Female, 20 years old***

I started isolating myself. Sometimes I would just feel like there's no use For me to go on with this life. I always had mental breakdown. I was always crying. ***Participant C, Female, 20 years old***

From the above citations it is evident that participants became withdrawn after the loss of a parent.

4.3.4. Theme 4: Somatic manifestations of grief

4.3.4.1 Appetite and sleep disturbances:

The experience of sleep and appetite disturbances, loss of weight, and ill-health were also reported. It emerged from the findings that bereaved university students experience appetite and sleep disturbances during their emotional difficulties. This is what some participants shared:

I was struggling to get out of bed. Struggling with appetite. I lost so much weight, I started getting sick, and Doctors could not understand what was going on. I felt empty and hopeless. The future looked blurry without my mom. I felt like there was no reason for me to continue with my life.”

Participant I, Female, 28 years old

“I remained in bed every day. I did not want to see anyone. I did not want to eat anything. I could not talk to anyone. I thought of sadness only.”

Participant J, Male, 26 years old

“I lost a lot of weight because I did not have appetite to eat. I was always crying and thinking about how I am going to take care of my younger siblings.” ***Participant G, Male, 32 years old***

“On the day of the burial and two days thereafter I could not eat. I did not eat because my heart was sore and I was upset, I could not stop crying.” Participant A, female, 20 years old

4.3.4.2 Physical pain:

Some participants reported physical pain after the loss of their parents. This is what the participants said:

*“I always felt pain in my stomach, intestines and I had a headache”
Participant F, Female, 31 years old*

“It was like I was physically not well; my blood pressure was always high, and I had chest pains.” Participant H, Male, 25 years old

The above extracts highlight the impact that grief has on sleep and appetite overall physical health. The findings revealed that bereaved students lost appetite and subsequently lost their weight. Furthermore, findings revealed that insomnia and/hypersomnia was common following the death of a parent.

4.3.5. Theme 5: Religious/Spiritual manifestations of grief

4.3.5.1 Blaming God and/or ancestors:

Another finding was that although university students understood death to mean the end of life, the thought of irrevocability of death left some participants with unanswered questions and blamed God. Below are the concentrates that support this:

“I blamed God for my mother’s death. I felt like I was too young to lose a mother. I was angry that God took her away from me so early. It is still painful to this day.” Participant A, Female, 22 years old

“I am a Christian, I asked God so many questions why I had to lose my father, he was my only pillar and God took the only person I was dependant on.” Participant E, Female, 27 years old

“I just thought, why God? Why did you do this to me at that particular time when I needed him the most?” Participant B, Female, 24 years old

For some students, their grief was experienced with some spiritual crisis, in that some students felt angry at God and abandoned church. For some, the crisis was

experienced in the form of feelings of hatred, anger and abandonment by God and the ancestors. Participants had this to say about their spiritual struggles:

“I somewhat developed hatred towards God, I did not understand why my father had to die painfully.” **Participant D, Male, 24 years old**

“I felt like God and my ancestors have abandoned me. I needed my mother to witness all my achievements. Let alone my PhD graduation.”
Participant G, Male, 32 years old

“I stopped going to church. How does one continue worshipping God when you’re in so much pain? (Voice became soft and slow). I couldn’t do anything anymore, all I wanted was to be with my mother. I will never forget this pain.” **Participant A, Female, 22 years old**

To further exemplify on the spiritual crisis, participant J who lost his father due to Hypotension believed that the ancestors were responsible for the death of his father. According to the participant, his father had a known ancestral calling but could not follow the practices as he was a Christian:

“My ancestors took my father away from me. He had an ancestral calling that led to his hypotension as a result of his non-compliance. I am angry that they could not spare his life.” **Participant J, Male, 26 years old**

On the one hand, participants who their parents died of chronic illnesses, knowing that their parents were relieved from the pain of suffering, and now in a better place, i.e., Heaven brought about some healing:

“I believe that she’s in a better place now. She was suffering physically here on earth. And in heaven, there is no pain.” **Participant F, female, 31 years old**

“My father suffered a lot, there was a time he was struggling to breathe, I saw him gasping for air and the minute he passed away, I knew that he was in pain no more.” “...God finally put her to rest, she was in a lot of pain” **Participant I, Female, 28 years old**

Participant F who professes the Christian faith lives in anticipation that she will see her mother in the next life to come:

God knew what he was doing. And I know I had so many questions that could not be answered. But now I believe that everything happens for a reason. And I live in anticipation of that day where I believe that I'm going to see her again.” **Participant F, female, 31 years old**

4.3.5.2 Blaming an act of Witchcraft:

Some participants associated the death of their parents with witchcraft. The witches are believed to have caused an unfortunate event that led to death. These unfortunate events include car accidents, spells and other unnatural causes of death. The following extracts support the above statement:

“We could not find the source of the fire that burned my father to death. We know it is witchcraft because our neighbours have always been jealous of the big house my father built for us. They wanted to end it all by burning the house” **Participant D, Male, 24 years old**

Participant C who lost her mother to a car accident shared her experience:

Participant C: *“I don't believe that my mothers' car accident was natural. How can a person die inside a car that did not have a single scratch?”*

Researcher: *What do you believe caused the accident?*

Participant C: *Witches obviously, my mom always had medically unexplainable illnesses. She would get hospitalised and the doctors could not find anything. They finally found something that took her life (said with a teary voice).*

4.3.6 Theme 6: Challenges associated with parental death:

4.3.6.1 Lack of material support:

Participants went on to highlight that they experienced some anxieties and worries when they started thinking about financial and security needs. These included adjustment to life without their parents, sustainability of their livelihoods, provision of shelter and availability of financial resources to help proceed with their studies. Financial needs were the most critical needs communicated by the participants. These requirements also appeared as having an impact on the emotional wellbeing of participants in this research as they were constantly worried over who might provide

for their studies. The following extracts illustrate the financial difficulties experienced by some of the participants:

“I was thinking about who was going to buy us food, who would provide for our needs, who was going to assist my mother, what would life be like when I go back to university.” **Participant, E, Female, 27 years old**

“Like I said, I needed money for transport, registration, school fees and stuff...food at home, mind you, we were depending on SASSA grant. When I went to the relatives to seek help, they offered me things like sex in exchange of food or transport or money to school and all those kinds of things. Losing my father was really tough, my younger siblings were going to a Private school and they had to change in the middle of the year to go to a public school. My mom also had to get involved with “loan-sharks” debts to make sure that she provides for us. **Participant B, Female, 24 years old**

“I had to take a gap year in 2015 because there was no one to pay for my tuition fees.” **Participant F, 31 years old**

“My mother is not working and now I’m the one responsible for family. It is a heavy burden to carry. I get stressed Each and every month that at home there has to be food, kids have to go to school. I have two little sisters and I am the one who have to take care of them. Whatever money I make including my NSFAS allowance has to be shared with my family.” **Participant D, Male, 24 years old**

My sister is an unemployed graduate, after my mother’s death everyone was left to take care of themselves. We also had to ask for support from pastors and relatives” **Participant A, Female, 22 years old**

Participant D echoed the sentiments and expressed how they did not have a place to stay after their house burned down resulting in the death of his father. He was sobbing and expressed sadness during the interview. The extract below highlights this:

“We had nowhere to go, our relatives turned their backs on us.”

Participant D, Male, 24 years old

Furthermore, the hostility that some bereaved students experienced from their relatives was another source of distress which negatively impacted on their Psychological well-being. Participant B uttered sorrowfully about her family that was emotionally brutal after the passing of her father. When she was asked about how she felt after the death of her father, she said this:

“I can say that it was a very traumatic situation and I was only 20 years old then. My paternal family showed a lot of hate over my mother and us. They were forcing us (me and my younger siblings from my mother’s side) to move out of our house. And they we are making sure that we don’t get a cent especially me who was at varsity by that time”

Participant B, Female, 24 years old

Herewith Participant D lends further support: *“I was angry at my relatives for neglecting us. I became an angry person even to my girlfriend.”* **Participant D, Male, 24 years old**

The consequences suffered post parental loss by some students appears to have also influenced their grieving process, causing psychosocial distress.

4.3.6.2 Lack of emotional support:

Findings in this study revealed that participants experienced negative or no emotional support from family members. Receiving no support may hinder recovery. Below are the extracts that illustrate this:

“I used to bottle up my emotions because there was no one in my family to support me.” **Participant H, Male, 28 years old**

“Whenever I would have a problem, I would have a challenge of not knowing where to start dealing with that particular problem because I was used to running to my father for everything that I needed.”

Participant B, Female, 24 years old

“I had no one after my mother passed away, she was the one who provided everything for me, food, comfort and I would go to her every time I needed to talk to someone. Participant C, Female, 20 years old

The participants in this study frequently received little or no emotional support from relatives. They described how family members were abusing them. Participant B indicated that her paternal family alleged that her mother killed her father. They treated them with hatred and hostility. She said:

“They were forcing us (me and my younger siblings) to move out of the house. And they we are making sure that we don't get cent especially me who was at varsity by that time. So yeah, I can say that it was a very traumatic situation and I was only 20 years old then, and they ended up having me and my mom arrested saying that we were invading the house, which was our father's house, and we were the ones entitled to the house.” Participant B, Female, 24 years old

4.3.7 Theme 7: Coping with the death of a parent

4.3.7.1 Reliance on bereavement rituals:

The participants were able to acknowledge the pain of grief following the loss of a parent. Healing for some was in the form of observing culturally rooted bereavement rituals.

“After my father's burial I had to shave off my hair, when you shave off your hair, your heart heals and you are also comforted” Participant D, male, 24 years old

“(After the funeral) we were at home and my mother said we could not leave before things were done the right way, before they conducted the cleansing ceremony. The ritual ceremony helps to ease the pain and help you to slowly forget about the deceased” Participant H, Male, 25 years old

“We conducted a cleansing ceremony immediately after the burial. This was done to help us forget the death and heal” Participant E, Female, 27 years old

“We consulted a traditional healer who performed a ritual to help my father’s soul to rest in peace, the traditional healer gave us molebatšša” to help us heal. I also accepted his death after the ritual.” **Participant J, Male, 26 years old**

“A day after we buried my father, we had a ritual where we slaughtered a white goat as an offering to our ancestors, asking for forgiveness because my father had rebelled against them. We ate the goat and wore the goat’s skin as a wrist band (isiphandla) to symbolize healing. The ritual helped us to heal and move on with our lives” **Participant J, Male, 26 years old**

Participants expressed the need to cope with the death of a parent by means of rituals. Hence shaving hair, going to church and consulting a traditional healer reinforces the process of healing. The shaving of hair symbolises acceptance of the death of a parent. Furthermore, it is believed that it helps the bereaved to let go of the old hair (that represents the past) and embrace the new hair when it grows anew (the future).

4.3.7.2 Reliance on psychological services:

Most students reported to have relied on psychological counselling which was experienced positively. Students used private counselling that was offered at the university student centre. For example, when asked about how he managed to deal with the with the difficulties he was confronted with, Participant H reported that he utilised the psychological services provided by the University of Limpopo. According to him, speaking to a professional counsellor was helpful because he could disclose any of his personal information. This is how he put it:

“I saw a counsellor at D-Block on campus. I realised that I was struggling to cope with my emotions. I needed someone I could trust, and I knew that professional counsellors will not tell anyone about my struggles” **Participant H, Male, 28 years old**

Some more support if herein offered by students who used counselling during their bereavement:

My father's insurance policy referred us for counselling, the counselling was good. The psychologist gave us the best treatment possible."

Participant D, Male, 24 years old

"I was seeing a psychologist on campus at D block. And I think that really did help me to manage my grief and also to manage my emotions. Counselling also helped me with my academics and to pick up my average." **Participant F, Female, 31 years old**

"My older sister supported me emotionally, I would call her every time I felt overwhelmed." **Participant E, Female, 27 years old**

Some participants reflected further as follows, to support that at some point, they managed to accept the loss and found some relief in some of the memories they shared with their parents:

"Oooh....my album helped me a lot and, there's this funny video which we took this other time at home. I would look at it now and then and it would make me feel better." **Participant E, female, 27 years old**

"I had my father's photo that I kept with me. I always carried it. When I looked at the photo I would always smile." **Participant D, Male, 24 years old**

The above excerpts illuminate the significance of consulting a traditional healer, viewing of the deceased body, visiting the grave and the performance of rituals in accepting the death of a loved one.

4.3 Concluding remarks

The present study comprised of 10 participants who are registered University of Limpopo students. The participants' age ranged from 20 years to 32 years old. The participants' grieving period is within 3-year period. All the participants were interviewed in the English language. There were five (7) major themes that emerged from the study i.e., a) Emotional manifestations of grief, b) Challenges associated with parental death, c) Cognitive manifestations of grief, d) Behavioural manifestations of grief, e) Somatic manifestations of grief, f) Religious/Spiritual manifestations of grief

and g) Coping with the death of a parent. It is clear from the findings of the study that bereaved university students experience emotional distress after the death of a parent. Furthermore, the findings revealed that grief manifests itself emotionally, cognitively, behaviourally, physically and spiritually. The cognitive symptoms experienced by the bereaved university students after the death of a parent were poor memory, diminished concentration, confusion, preoccupation about the loss and avoidance. The behavioural symptoms experienced by the participants were social withdrawal. The results show that participants became withdrawn after losing a parent. The findings further highlighted the challenges that bereaved students faced after the loss of a parent. These challenges include lack of material support and emotional support.

CHAPTER 5: DISCUSSION

5.1 Introduction

Study findings are discussed, i.e., circumstances surrounding parental death, grief experiences and expressions, challenges associated with parental death, and coping and emotion regulation. An integrated summary of the discussion will also be offered towards the end of the chapter.

5.2 Circumstances surrounding the parental death

The present study reveals that death is occasioned by diverse natural and unnatural factors. For instance, the World Health Organisation (2007) has long observed that a wide range of illnesses and traumatic accidents could result in deaths. To support this, the present study found that, traumatic deaths that some of students' parents suffered were as a result of car accidents and a fire. Ill-health was another potential cause of death reported in this study. A defining feature of this study was that, in some cases, an act of witchcraft was believed to have caused a misfortune that led to the death of a loved one. This is because witches are believed to have powers to cast out a spell which could lead to suffering misfortunes such as motor vehicle accidents or life-threatening illnesses. Previous studies have also reported on similar notions or cultural death causality explanations (Makgahlela, 2019; Letsosa & Semanya, 2011). This formulation is in line with African traditional beliefs which understand death to be an occurrence that can be caused by either God, angry ancestors or sinister forces such as witches (Asuquo, 2011; Niehaus, 2010). Similar to previous findings (e.g., Pargament et al., 2000; Burke et al., 2011) in this study, students who held views suggesting that parental death had to do with an act of witchcraft had grief-related complications.

Comparatively, students whose parents died of chronic illnesses and did not associate the illness or death to an act of witchcraft reported feeling a sense of relief that their beloved were no longer in pain. Such students' grief experience appears to have been resolved without complications. They went on to praise God for relieving their parents of the pain of suffering, opposed to blaming him. These participants' positive appraisal of parental death seems to have lessened the intensity of their grief experience. Costello and Hargreaves (1998) have long established that anticipated grief allows the griever to work on their grief process in advance. It appears that indeed the grief

experience and expression thereof is largely influenced by the circumstances surrounding death. This view is also supported by a previous study by Lobb and colleagues (2014) which highlighted that factors that influence grief experiences, include circumstances surrounding death, religious beliefs, support received, and dependency on the deceased. The latter was also evident in the present study in that some of the university students who lost their breadwinner parents appear to have struggled in coping with the loss. This may have been because of the added stress of dealing with the financial strain also leading to poor academic outcomes. The findings on circumstances surrounding death, support Bonanno & Kaltman's (1999) integrative model of grief which suggests that understanding the process of grief starts with the understanding of the context within which death occurs. Overall, the conditions encompassing the loss of a loved one, be it a disease, an accident or the act of witchcraft has consequences on how the bereaved process and deal with loss.

5.3 Grief experiences and expressions

Parental loss as was supported by the findings is a devastating experience that manifests both emotionally, cognitively, behaviourally, physically and spiritually (Love, 2007; Hall 2014). As argued by previous scholars (Kübler-Ross, 1969; Kübler-Ross & Kessler, 2007) and reported in numerous studies (Worden, 2009; Hardy Bougere; 2008; Smith et al., 2010; McCarthy, 2010; Balk, 2010), and also established in this study, while grief manifests itself diversely, how it is experienced and resolved differs from person-to-person and across cultures (Gire, 2014).

More relevant to the student populace were the cognitive difficulties accompaniment parental death. In addition to the pain of loss, participating students suffered from poor memory, confusion, diminished concentration, and were preoccupied with the death of a parent. An occurrence which distracted and interfered with their schoolwork. Past studies have echoed the same sentiment and have suggested that bereaved students had problems with concentration and preparing for their assignments; they also showed reduction in academic performance which affected the completion of their degrees (Hinterlong, 2010; Roberts, 2016). Balk (2011) in particular found that grieving students' grades were fundamentally lower during the first semester of the loss. They further noted that grieving students had to write make-up tests and had submission deadlines for assignments extended. Roberts (2016) maintains that the effect of parental loss on university students act as a catalyst for students to re-examine their

family responsibilities and this may lead to decreased academic performance, academic probation as well as exclusion. Furthermore, Brent et al., (2012) reported that students who experienced traumatic and sudden loss of a parent (i.e., accident) had significantly lower grades compared to their non-traumatically bereaved peers.

Another important finding noted in this study was the experience of dreams by students. It appears that students who experienced '*positive dreams*' in the form of parents relaying messages of reassurance in dreams brought about a sense of relief that a deceased parent was in a safe place compared to those with '*negative dreams*'. Similar findings were recorded in a study by Sormanti and August (2011) which found that grieving individuals reported that 'positive dreams' brought them closer to their deceased and God; another reason was that 'positive dreams' serve as a confirmation that a deceased is in a safe place with God. In contrast, in this study, traumatic deaths were associated with negative and scary dreams and a prolonged grief experience. The authors Duval and Zadra (2010) indicate that dreams that have negative content can cause the bereaved to re-experience the trauma of the loss in their dreams. This particular finding supports Bonanno (1999) theory which suggests that bereaved individuals often yearn for a continued bond with the deceased. Thus, dreams can be a meeting place between the bereaved and the perished and can assist the bereaved with keeping a relationship with them (Belicki et al., 2003) which can assist the bereaved to cope with the grief (Worden, 2009). Dreaming of the deceased may thus provide comfort and enhance spiritual connection (Begovac & Begovac, 2012; Kwilecki, 2011; Wright et al., 2013) yet can complicate the grieving process if traumatic dreams are experienced (Zadra, 2010).

One important culturally relative finding in this study was the spiritual aspects of grief experiences. Unlike what is commonly reported about God being blamed for death (Gire, 2014; Zisook & Shear, 2009). In this study, existentially, in addition to blaming and questioning God, participants went on to question/blame their ancestors or query the involvement of sinister forces for a death suffered (Makgahlela, 2020). The conviction that a parent's death was caused by witches complicates the grief process. As a result, a traditional healer was consulted to find out the cause of death and to ensure that the deceased spirit is resting in peace. This area of study remains largely unexplored especially how such negative appraisals could complicate the grieving

process and calls for more studies to explore how such cultural notions or appraisals could complicate the grieving process.

5.4 Meaning making and grief experiences

Whenever an unfortunate event, such as the death happens people are activated in search of the causes and meaning to the. The results of this study showed that participants' understanding and meaning attached to loss varied on the basis of their differing worldviews. This suggests that special attention to meaning making in bereavement is warranted including how meaning can either facilitate recovery or complicate bereavement (Park & Folkman, 1997; Davis et al., 1998). For example, in this study, some students explained their own deaths either in terms of the supernatural explanations, which is, the involvement of angry ancestors or an act of witchcraft while on the other hand God was suggested. Letsosa and Semanya (2011) have also noted that ancestors and God are known for being warm and for the protection of their surviving family members. However, if angered or when their demands are not met, they have a tendency of forsaking their relatives thus leaving them unprotected against evil spirits and witches (Appel & Papaikonomou, 2013; Kgatla, 2014). In African culture, witches are dreaded because they are known for having the power to cast spells or even cause death (Makgahlela, 2020). Consequently, such negative death appraisals (punishing God or ancestors) **tend** to trigger a spiritual crisis which could in turn trigger a complicated spiritual grief experience (Wortmann & Park, 2009; Makgahlela, 2020).

On the contrary, positive religious meanings which suggested that God saved a family member from the pain of illness and suffering appear to have contributed positively to the resolution of participants' grieving process. Furthermore, Christian believers had some sense of relief in knowing that their parents were now in heaven with God where there is no pain. This is in line with Bonanno's (1999) model which suggests that the meaning that the bereaved attach to the loss extends on a continuum. Unfolding on this continuum are meanings that range from general issues to more specific problems, i.e., existential issues in this case that are triggered by the loss. Having said this, Davis et al., (1998) do support this by highlighting that meaning making after the loss of a loved one can reduce the severity of grief experience as it challenges the bereaved to integrate the experience into their assumptive world. Based on the meaning making process in bereavement, there is therefore a need for future research

to look into university students' meaning making process in bereavement and how this influences their bereavement outcomes.

5.5 Challenges associated with parental death

Parental loss has been associated with numerous challenges that are experienced by the surviving children. In this study, apart from battling with the pain of loss, surviving students were found to be struggling with emotional and instrumental support. To exemplify, students struggled with provision of shelter, lack of emotional support and loss of financial support to help proceed with their studies. In most cases, the lost parent was the supplier of material and financial needs in the family. Previous studies on bereavement have suggested that "economic poverty" has negative effect on the educational, social, and psychological being of children (Li et al., 2008:152). Similar findings were reported in a study by Apelian and Nesteruk (2017) on impressions of young adults on their experience of parental loss whereby their results showed that students reported dealing with multiple stressors (e.g., changes in daily routines, increased responsibilities, & financial difficulties). In another study, Balk (2008) highlighted that bereaved college students frequently became overwhelmed by new financial obligations and experienced difficulties fulfilling added roles in their lives.

Parentally bereaved students do not only lose a parent that cared and loved them, they also suffer from lack of resources including the provision of their basic needs (Li et al., 2008). It is for this reason that in some cases, university bereaved students go as far as seeking part time employment to cope with their financial strain (Apelian & Nesteruk, 2017). Generally, challenges associated with the loss of a parent in the student population negatively impact on their emotional wellbeing and academic standing thus predisposing them to poor academic outcomes.

5.6 Coping and emotion regulation

The grief experience and manifestations are diverse as well as the strategies employed to recover from the trauma of death. In this study, amongst other strategies employed, participants relied on mourning rituals, professional counselling, seeking support from significant others and by cherishing the moments they had with deceased parents. With regard to bereavement ritualistic customs, a traditional healer is trusted to facilitate the observances of a major healing ceremony called the cleansing ritual ceremony. The ritual encompasses the observance of diverse rituals such as the use

of traditional herbs, shaving of the hair, slaughtering of sacrificial animals, preparation and use of unsieved traditional beer (Makgahlela, 2019; Baloyi & Makobe-Rabothata, 2014; Tshoba, 2014). Part of the ceremony may also include recitation of traditional sonnets and calling the demised in all of their names so as to assist the deceased's spirit to rest in peace (Kgatla, 2014). Ritualistic practices have been remarked for their healing benefits in bereavement, only if they are appraised positively by the grievors (Mugisha et al., 2011; Reeves, 2011).

Mkhize (2008) stated that in African cultures, when loss occurs, the surviving family members are immediately viewed as having '*isinyama*' or 'contaminated'. It is for this reason that the family consults a traditional healer to perform a traditional cleansing ceremony. The ceremony seeks to restore equilibrium and harmony in the affected and also helps re-incorporate the bereaved back into the community, the earth and the spiritual world (Ross, 2012). For instance, the shaving of the hair which is burned side-by-side some of the deceased's clothes symbolises an attempt to cleanse the bereaved of death contaminations and prevent the risk of the contaminations being carried around (Ritcher, 2005). According to Baloyi (2008) gatherings like ancestor reverence '*ku pahla swikwembu*' are believed to have healing results and are therapeutic and important to most Africans. A view supported by Yanklowitz (2012), in illuminating that mourning rituals serve a curative role, by empowering the management of feelings of the bereaved during the period of change. In this study, some participants maintained that ancestor reverence rituals represent a sign of respect as they assume a significant part of protecting the surviving family members and helping them to be prosperous. However, relatives who neglect to gratify their ancestors through performance of ritual ceremonies risk being left unguarded, and in this way, they are left vulnerable against evil spirits (Kgatla, 2014)

For Christian oriented affiliates, their rituals are in the form of petitions, prayers and supplications according to their Christian conviction system. According to Wuthnow et al., (1980) these rituals also endorse explicit petitions and practices, which comfort grievors and give them a sense of belonging to a broader society. Prayers and supplications are used as a form of therapy for the surviving family members (Appel, 2011). Through these procedures the grieving Christians are then helped to cope with grief or may find comfort over time, work through their grief in ways that help them find peace and acceptance (Halifax, 2008). Participants in the current study support this

view in that some did endorse that the rituals healed their pain of grief (Cohen, 2002; Parkes, Lungani & Young, 1997; Van Der Hart, 1983).

Apart from religious and culturally informed bereavement practices, students in this study also highlighted the importance of psychological services they received either from the university student counselling centre or from private mental health practitioners. Diverse strategies are employed in professional grief therapy to help students process their loss, change some of their dysfunctional thought patterns and help them find a positive meaning (Becker et al., 2007; Hussin, Olmos & Aho, 2018; Neimeyer, 2014). This is compatible with the findings of the study by Cousins and colleagues (2015) which highlighted that college students used counselling centres provided by universities to cope with their grief. The findings are further supported by Varga (2015) who conducted a qualitative study of graduate students' grief experiences, and found that the primary source of emotional support used by college students was counselling services and professional campus counsellors. Although such services seem beneficial to bereaved students, a risk is that some students often view counselling as a sign that they are not coping with their parental loss, thus running the risk of being stigmatised by peers should they be seen to be using mental health care services (Balk, 2001). It is therefore recommended that the university educate students about grief symptoms, its management, and support services available at the centre.

5.7 Concluding remarks

It is evident that grief is a unique and personal experience that is influenced by various factors. Moreover, the results indicate that various individuals attach different meanings to their loss. Despite the subjective meanings attached to the loss, there were similitudes in their cultural and religious descriptions as indicated by the themes. The lived experience of UL parentally bereaved students may be understood according to the themes that emerged from the study results. Themes such as circumstances surrounding the death, grief expressions, meaning making and coping and emotional regulation emerged from the results of the study.

It is evident from the results of the study that the circumstances surrounding the death of a parent influence the grief experience and expressions. For some participants, the loss brought about a sense of relief that their beloved was no longer in pain. For this

group of students, their grief experience appears to have been resolved without complications.

CHAPTER 6: CONCLUSIONS AND RECOMMENDATIONS

6.1 Summary

The aim of the study was to examine the sequel of bereavement on parentally bereaved students at the University of Limpopo. The objectives of the study were (a) to understand students' challenges post-parental bereavement, (b) to identify students' coping strategies following parental bereavement. Data generated through semi-structured interviews with 10 parentally bereaved students revealed that post-parental bereavement, grief gets activated, and its expression and experience is unique from person-to-person. Notably, student grief was expressed in the form of emotional, cognitive, behavioural, physical and spiritual symptoms. In spite of grief, being expressed and experienced varyingly, the findings further revealed that factors such as a) circumstances surrounding the death of a parent, b) religious beliefs and cultural practices, c) meanings attached to the death, and, d) Lack of support post-bereavement, all influenced students' grief trajectory. Equally, the study revealed student challenges post the death of a parent, and amongst others were financial difficulties and lack of emotional support which impacted negatively on their academic work. Through various means such as bereavement rituals and counselling services students were found to have managed to cope and heal from their parental loss.

The conditions encompassing the demise of a loved one, be it a disease, an accident or the act of witchcraft has a connotation on how the grieving individual processes and deal with loss. This is because post-death people are always activated in search of the meaning behind the death suffered. For instance, negative death appraisals (e.g., punishing God or angry ancestors) tend to trigger a spiritual crisis which in turn triggers a complicated spiritual grief experience source. On the contrary, positive religious meanings which suggested that God saved a family member from the pain of illness and suffering appear to have contributed positively to the resolution of participants' grieving process. In the same vein, Christian laden meanings such as believing that God spared a parent some pain and/or a parent was resting peacefully in heaven led to some sense of relief in some students. Furthermore, students who experienced positive dreams reported feeling a sense of relief as they believe that dreams are a confirmation that the deceased is resting in peace. In contrast, negative or scary dreams were associated with prolonged grief experience since they were interpreted

negatively. Meaning making is therefore an important component that needs attention especially in the management of student bereavement post parental death. The findings of the study also suggested the importance of mourning rituals in helping the bereaved find healing and acceptance. In this study, mourning rituals either of a Christian or African religious background were found to have helped students in coping and carrying on with life after the death of a parent. It is therefore important that student centre counsellors familiarise themselves with different ways of grieving and mourning practices to better be able to respond to various students' needs post parental loss.

6.2 Limitations of the study

Below are the limitations identified in this study:

- The sample size was small. Therefore, the sample cannot be viewed as an illustrative of the entire UL student community. Subsequently, the results of the study cannot be generalisable beyond this study.
- The study was conducted virtually due to COVID-19 restrictions, therefore, having relied on this measure may have compromised the quality of the interviews.

6.3 Implications

Based on the findings of the present study, here below study implications are offered:

6.3.1 Implications for Research

One important finding in this study was the influence of meaning making on student bereavement experiences. Therefore, this calls for more empirical research to establish students' meaning making in times of bereavement and how such appraisals influence their bereavement outcomes. This area of study remains largely unexplored thus for improved student grief counselling services, empirical evidence is needed.

6.3.2 Implications for clinical practice

Grief is a normal yet painful experience. However, with complicated grief it can affect students negatively and compromise their health and academic achievement. It is recommended that the university counselling centre prioritise mental health awareness and promotion while dealing with the stigma of mental illness within the university premises. The centre could also regularly consider screening students for mental wellbeing so as to help identify students at risk of mental health problems. Such

activities should also prioritise teaching students about the impact of bereavement on their wellbeing and academic achievement while encouraging them to use university-based student counselling services.

6.3.3 Implications for Policy

Since the study established that parental bereavement can result in loss of financial support for some students, it therefore becomes important for institutions of higher learning in consultation with government, to consider providing some financial subsidy for such students. This perhaps could be one strategy to help lessen students' financial worries while they adjust to the death of a parent.

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APPENDICES

Appendix 1: Interview guide

Objectives	Questions to elicit responses
<ul style="list-style-type: none">● To describe grief experiences of students following parental bereavement.	<ul style="list-style-type: none">● Kindly share with me how you remember losing your parent/s● Would you kindly describe for me your personal experiences following losing your parent/s?● Kindly share with me how the loss of your parent has affected you emotionally?● Kindly share with me how the loss of your parent has affected you mentally?
<ul style="list-style-type: none">● To understand students' challenges post-parental bereavement.	<ul style="list-style-type: none">● Please, share with me some of the challenges you encountered following the loss of your parent/s?
<ul style="list-style-type: none">● To identify students' coping strategies following parental bereavement.	<ul style="list-style-type: none">● Kindly share with me how you managed or you're managing to cope with the death?● What are some of the things you did/or are doing that you think are helping you cope with loss?● Have you sought any professional services as part of you dealing with the loss?● Did you use counselling services offered at the UL counselling centre?● What was your experience of the UL services?

Appendix 2: Letter to Centre for Counselling Services (University Of Limpopo)

Department of Psychology
Limpopo (Turfloop Campus)
Private Bag X1106 Sovenga
0727

Centre for Student Counselling and Development (University Of Limpopo)

Request for permission to interview UL students

Dear Sir/Madam

My name is Zelda Kubayi. I am a master's student at the University of Limpopo. The research that I wish to conduct for my master's mini-dissertation focuses the lived experiences of UL students following the death of a parent/s. I am hereby seeking your permission to interview the students who consulted for counselling

Thank you for your time and consideration

Regards,

Zelda Kubayi

Appendix 3a: Participant consent letter and form

Department of Psychology
Limpopo (Turfloop Campus)
Bag X1106
Sovenga
0727
Date: _____

Dear participant

Thank you for demonstrating interest in this study that focuses on the lived experiences of parentally bereaved university students of the University of Limpopo. This study seeks to investigate the lived experiences of UL students following the loss of a parent with a view to understanding their grief experiences, associated challenges and their coping strategies post bereavement.

Your responses to this individual interview will remain strictly confidential. The researcher will not attempt to identify you with your responses to the interview questions or to disclose your name as a participant in the study. Please be advised that participating in this study is voluntary and that you have the right to withdraw your participation at any time. Also note that, considering the nature of the phenomenon under investigation, some emotional discomfort may be elicited. However, the researcher will be ready to avail counselling services in the event that you may need attention from a professional.

Kindly answer all the questions and reflect your true reaction. Your participation in this study is very important. Thank you for your time.

Sincerely

.....
Ms NZ Kubayi
Masters Student

.....
Date

.....
Dr. M Makgahlela
Supervisor

.....
Date

Appendix 3b: Informed Consent form

I..... (Participant name) hereby consent to participate in the research study titled, “**A phenomenological study of University of Limpopo students following the death of a parent**”. The interviews are conducted by Ms NZ. Kubayi who is researching under supervision of Dr M. Makgahlela.

The purpose of the study was adequately explained to me. My identifying details will be treated confidential. The following check list was elaborated.

My participation is voluntary

I can/may withdraw at any given time

There is no penalty to my withdrawal

I am permitted to request clarification throughout the interview

I can/may express my discomfort at any time

A tape recorder will be utilised for interview purpose only

Signature

Date

Appendix 4: Ethical Clearance



University of Limpopo
Department of Research Administration and Development
Private Bag X1106, Sovenga, 0727, South Africa
Tel: (015) 268 3935, Fax: (015) 268 2306, Email: anastasia.ngobe@ul.ac.za

TURFLOOP RESEARCH ETHICS COMMITTEE
ETHICS CLEARANCE CERTIFICATE

MEETING: 16 September 2020

PROJECT NUMBER: TREC/289/2020: PG

PROJECT:

Title: A Phenomenological Study of University of Limpopo Students Following the Death of a Parent
Researcher: NZ Kubayi
Supervisor: Dr M Makgahlela
Co-Supervisor/s: N/A
School: Social Sciences
Degree: Master of Arts in Clinical Psychology

PROF P MASOKO
CHAIRPERSON: TURFLOOP RESEARCH ETHICS COMMITTEE

The Turfloop Research Ethics Committee (TREC) is registered with the National Health Research Ethics Council, Registration Number: **REC-0310111-031**

Note:

- i) This Ethics Clearance Certificate will be valid for one (1) year, as from the abovementioned date. Application for annual renewal (or annual review) need to be received by TREC one month before lapse of this period.
- ii) Should any departure be contemplated from the research procedure as approved, the researcher(s) must re-submit the protocol to the committee, together with the Application for Amendment form.
- iii) PLEASE QUOTE THE PROTOCOL NUMBER IN ALL ENQUIRIES.

Appendix 5: Turn-it-in Report