

# Difficulties with inevitable and expected loss: middle-aged women and maternal death



Janet Edgar Taylor

**Janet Edgar Taylor, MSc**  
Marriage and Family Therapist

**Joan E Norris PhD**  
Associate Professor

Department of Family Studies,  
University of Guelph, Ontario, Canada



Joan E Norris

In comparison to the number of studies of grief in general, relatively few have focused on the nature of the bereavement experienced by an adult woman upon her mother's death.

Yet this is a loss most women will face, and recent research has shown that for many it is a significant one. This article reports on our study of 65 women and explores issues indentified by them as a consequence of this bereavement.

## A BEREAVEMENT IGNORED

The literature that examines the loss of a parent to a middle-aged child is relatively small and fairly recent. Check your local library and you will probably find that the majority of books on bereavement deal with losing a spouse, several deal with the death of a child, and one or maybe two address losing an elderly parent. This is not to say that losing a spouse or child is not traumatic. Indeed, unexpected and untimely deaths are particularly difficult. But what about deaths that are expected and occur at the end of a long life? Since this is a bereavement most of us will have to deal with, why has it been ignored?

The age of the deceased and the surviving children may be a clue. Death of a parent when you are middle-aged and your parent is elderly seems more part of the natural timing of events. It is assumed that middle-aged people not only have a greater readiness to accept the aging and death of a parent, but also have other demands such as spouses and growing, or just-grown, children that vie for attention, along with careers and community involvement. Furthermore, if the person has been incapacitated then death may be experienced by the bereaved as a relief.

Another reason this bereavement

may have been ignored is because of a devaluation of the elderly in Western cultures. As people age, they become less important members of society and since their death causes minimal disruption and moral shock it is not deemed worthy of particular notice or grief. Myers<sup>1</sup> points out that our society does not support or accept profound or extended mourning for the elderly. Does this mean that people do not grieve the loss of elderly parents, or if they do grieve, do they have little difficulty accepting this loss? Or is the lack of research more a reflection of the attitude of the larger social culture?

## RESEARCH ON PARENTAL DEATH

Research on this topic is fairly recent. For example, in 1974, Kimmel<sup>2</sup> reported that he was unable to find any research on the effects of parental death on middle-aged persons. Since that time theoretical articles have appeared, as well as preliminary quantitative and qualitative studies. Contrary to societal assumptions, this research has found that for many it is an important loss<sup>3,4,5</sup>. Kahrl<sup>6</sup> found that the words used to describe this bereavement included phrases such as 'very traumatic', and 'a terrible shock'. Although none of her participants

exemplified any serious psychological pathology, all of them indicated that it was a significant transition in their lives.

Because research on grief tends to use a volunteer sample, it could be argued that only people who have difficult mourning would agree to participate. In other words, people who were interviewed were not representative of the general population. This notion has been recently refuted by Umberson and Chen<sup>5</sup> who used a longitudinal study of 2,867 adults, and obtained pre- and post- measures of grief reactions to the death of a parent. They found that the bereaved adults showed higher psychological distress than the non-bereaved group. They also found some differences in the response of males and females. That is, bereavement outcomes differed depending on gender of parent and child.

## What is known about grief reaction?

Women whose grief reactions were more resolved reported close, mutually accepting relationships with their mothers. Conversely, women whose reactions remained unresolved one to five years after the death were more likely to have had relationships that were ambivalent, conflictual, or emotionally distant<sup>7</sup>. Women who had

## EDITOR'S NOTE

Taylor and Norris report on their study of 65 Canadian women who responded to a newspaper advertisement requesting women who had lost a mother to answer questions about their reactions to the death.

Between them, the papers in this edition show clearly that, while the majority of people survive the commonest of all bereavements, the death of a parent in adult life, without lasting psychiatric or other problems, there is a significant minority who do not and who need help from outside their own families. It seems that the attachments which arise between parents and their children often colour the relationships that these children subsequently make in adult life, with others as well as with the parents in question. Women, more than men, seem to be especially likely to seek help following the dissolution of problematic relationships with parents, although we have no sure way of knowing if this means that women are more vulnerable to such losses or simply more willing to ask for help.

Further research is needed to answer this, and many other questions regarding this group of people. We need to know which types of intervention are most successful with which clients. When is a group more effective than individual counselling? When is a psychiatrist likely to prove more effective than a counsellor? When is it appropriate and necessary for those who have lost a parent to spend time reviewing and revisiting traumatic events and circumstances from their childhood which have been stirred up by the death of the parent? Only carefully conducted comparative studies will enable us to answer these important questions. The Editors would be glad of the opportunity to report the results of such studies in future issues of *Bereavement Care*.

Barnett<sup>9</sup> studied the relationship between mothers and their mid-life daughters and found that the relationship with the mother and the role of daughter provided emotional gratification important to psychological well-being. The mother-daughter bond has been described as the strongest of the parent-child relationships in middle age.

## OUR RESEARCH

With these issues in mind, a research project was carried out with 92 women between the ages of 35 and 55 (average age 45) in central Canada. We were curious about the content of the grief. These women had lost their mothers between two and six years previously (average four years). It is generally accepted that full resolution

childhood memories of a violent mother consumed more alcohol in response to a mother's death than did other bereaved children<sup>5</sup>. The functional impairment of the mother was another predictor in grief outcome. Women showed more distress if their mother was functionally unimpaired before her death<sup>8</sup>. This suggests that the mourning process may have begun before the death, that is, when the mother became functionally impaired.

Factors not found to be associated with grief reactions include the order in which the father and mother died, the amount of contact the daughter had with the parent prior to death, the disruption in childhood relationship with the parent<sup>4</sup>, the recentness of the death<sup>4,6</sup>, amount of caregiving provided by the child, whether the mother was in a nursing home<sup>8</sup>, socio-economic status, and strain in previous adult relations with parents<sup>5</sup>. In other words, there do not seem to be clear predictors of grief reaction.

## What does the loss of an elderly parent represent?

In other words, what is the meaning of this loss to the child? The bereaved is also an adult, most likely a parent as well. The losses associated with this death are often internal. For example, the loss of the role of son or daughter pushes middle-aged adults into the realisation that they are now the oldest generation, the next in line to die. The loss of the parent may also symbolise the loss of the family of origin and cause changes in the extended family structure. These meanings associated with this death are also themes of mid-life. On the other hand, some people experience this bereavement as a welcome severing of destructive family ties that provides an opportunity for growth unhampered by parental expectations. When death comes at the end of a long period of illness and functional loss, family members may also feel a sense of relief.

Meanings of the death differ depending on gender of parent and child. This is because mother-daughter relationships are different from mother-son, and from father-daughter and father-son relationships. A daughter's identity develops in relationship with her mother while a son's identity is in separating from his mother and identifying with his father and the male role. Baruch and

of the loss of a close relationship will not take place under a year, and for many, two years is more likely. These women responded to newspaper advertisements.

The participants were mailed the Texas Revised Inventory of Grief (TRIG)<sup>10</sup>. It is a self-report questionnaire used to classify grief style as typical or atypical. It takes about 10 minutes to complete and is done with minimum intrusion to the bereaved. Also included was a blank sheet with the question 'Have you observed any changes in yourself since your mother's death that you would like to comment on?'

## Grief category

In our sample, 77% (n=71) women were found to have an atypical grief reaction and 23% (n=21), a typical or normal reaction to their bereavement. These results are similar to those of other studies which also found a larger proportion of atypical grief in a volunteer sample.

## Thematic analysis on changes since mother's death

A thematic analysis was carried out on the open-ended question about changes the women had noticed in themselves since their mothers' deaths. The statements were listed and sorted into groups according to similarity of theme. Although this part of the questionnaire was optional and exploratory in nature, 70% (n=65) of the women answered it.

Though the women had been asked to comment on changes they had noticed about themselves, 66% started off by writing about how important a loss this was to them. One woman, aged 45, wrote: 'Even though my Mom has been dead for five years, I think of her often. I can't talk about her too much without getting a lump in my throat. I didn't want her to die but I also didn't want her to suffer anymore. When I was young my mother was just there but we were so close after I married. I just loved her so much. I can't describe how much she meant to me. It's like an ache.' Similarly, another 45-year-old woman who had lost her mother two years previously wrote: 'There is not a day that goes by that I don't think of my mother. She was also my best friend. Even if she hadn't been my mother she was the kind of person I wanted as a friend.'

In this category were comments such as 'No one knew me like she did', 'There is a void in my life', and 'I miss

## CHANGES THE WOMEN HAD NOTICED IN THEMSELVES

SINCE THEIR MOTHERS' DEATHS (n=65)	n	%
Her death was the loss of a special relationship	43	66
I've experienced a change in self-identity	31	47
Become more aware of my own mortality	16	24
Investing time in younger generation	21	32
Investing time in older generation	10	15
Her death a relief/release	4	6
Negative charged affect	8	12

my mother.' One wonders if they had a need to declare the importance of this loss since society seems to undervalue it.

### Change in self-identity

The next common theme revolved around self-reported changes in self-identity. 'I have no mother – I am the mother now', 'her death strengthened me as a female', and 'I took on her role in the family' were typical comments in this category. One 45-year-old woman, whose mother had died two years before sums it up best: 'When I do things with my daughters I am aware that now the roles are reversed – I am always the mother. Before Mom's death I had three roles – wife, mother, daughter. I am no longer a daughter to someone and I miss that. Occasionally it felt good as an adult to still be someone's child.'

### Awareness of mortality

Awareness of own mortality or personal finitude included statements like: 'My own death was brought into focus', 'I worry more about my own dying', 'I am aware my family won't last forever', and 'I feel older and wiser'. A 47-year-old daughter (mother died three years previously) wrote: 'I feel a little closer to my three daughters because I am very much aware of the possibility of my own death in the future and I want to spend more quality time with them telling them family stories, etc'.

A 42-year-old woman whose mother had died two years previously wrote: 'I find I push myself to get a lot accomplished every day just in case I have no time to prepare for my death. I find a great need to complete things since my mother died leaving projects to be finished'. Awareness of one's own mortality has been identified as a theme of middle age. The death of a parent seemed to be a reminder of this for some of these women.

### Different appreciation of older and younger generation

Many (32%) of the women mentioned that they felt additional investment in the younger generation since their mothers' deaths. They valued relationships with their children and grandchildren more, and enjoyed telling family stories. They felt it was important to pass on a legacy of love and caring. Statements such as: 'I have a legacy of love to pass on to my children and grandchildren', 'I want to be as much an inspiration to my children as my mother was to me', 'I want to tell grandchildren and children family stories', and 'I am more aware of my own motherhood' give the flavour of the comments in this category.

A change in themselves since their mothers' deaths, mentioned by 15%, was an interest in the older generation. 'I have a new respect for older women', 'I like to talk to friends' mothers', and 'I take time to visit older relatives'. One 38-year-old daughter, whose mother had died two years previously, wrote: 'I am currently enrolled in a recreation programme with special courses in gerontology. Since the death of my mother I have made a commitment to working with seniors and their needs. Oddly, before the death of my mother the idea of working with or around seniors was something that I avoided at all costs. My feelings of awareness regarding seniors has changed drastically and I'm not sure if her death is responsible in some way'.

### Negative charged affect

Not all women had good relationships with their mothers. A 42-year-old woman (mother died two years previously) wrote: 'My mother's death was a continuation of our life: a horrible ordeal to get through. I was surprised in an unpleasant way at the intensity of emotions two weeks

after her death. All kinds of people were acknowledging, 'Yeah, of course, your life was awful'. I thought it was hidden, in my memory, no one else's. On the whole, my mother's death is a relief to me, a release. I mourn for what we didn't have. I also feel horror at myself that I don't care more, that I can feel so relieved'. Another woman wrote about having 'guilt around unfinished business with Mom'. This was categorised under negative charged affect.

One woman, aged 45 (mother died two years previously) wrote: 'I will have to start my reply to this question by stating that I am an adult survivor of childhood incest. I had brought this topic up with my mother somewhere around 1976. At that time, she refused to accept what I said and I promised myself that I would deal with this whole issue after she had died. For the past 15 months I have been in counselling trying to come to terms with my memories and feelings'.

Another woman, aged 37, whose mother had died four years previously wrote: 'The changes that I have been through since she died are completely self-accomplished through the therapy that I began last year. I had been denying the anger and rage that had surrounded me while growing up and found myself in abusive adult love relationships as a result. I was forced to take a good hard look at the at the way I was neglected and uncared for by my mother and father as a child and admit my hatred and anger that I've been keeping buried'. It seems that the mother's death enabled these women to enter therapy. For them, the death of the mother was a welcome severing of destructive family ties.

Another negative charged affect was exemplified by a 38-year-old daughter whose mother had died two years previously: 'I feel anger for being left with her problems – an alcoholic father, whom I love, but I find it opens a lot of old wounds from my past, when I go home to clean and care for him and try to deal with his problems'. A 37-year-old woman whose mother died two years previously wrote: 'I grew up in 14 foster homes. After searching for my mother for many years I found her in 1988. She was a bag lady and a severe alcoholic. She lived on the streets of Toronto for 20 years. She died two years later in the fall. Her

cause of death was hypothermia. Since her death I have been very depressed and horrified by the way she had to die by freezing to death outside. Since her death I don't socialise with anyone. I find it very hard to get along with people my own age. I feel envious of them because of their backgrounds and for the fact that they had a mother. I didn't have the love of any parent growing up. And I find I don't have much in common with anyone'. The death of this mother represented to this woman the final loss in a series of losses.

## CONCLUSION

These comments give some idea of the many issues raised by the death of a mother. Dealing with unresolved issues from childhood, personal mortality, and change in self-identity are some of the issues that these women identified as changes since their mother's death.

The death of a parent is often the first major bereavement a person has to face. In my clinical practice I find that people are often unprepared for the intensity of their reaction to this loss. Some wonder if they are 'losing it'. Often they have not experienced

the loss of someone who was such an integral part of their lives, so they have nothing to which they can compare their reaction. Middle-aged people may enter therapy identifying depression as their current issue. Upon taking a history I often discover that a parent's death has precipitated the depression. The lack of social support for this grief as well as general lack of knowledge of issues associated with this loss must impact on the mourning process.

For some women the grief was around dealing with the loss of a special person and the realisations that come with middle age. For others it was the loss of the mother they never had. In some cases, the mothers' deaths allowed the daughters to do the therapy they could not do while the mother was alive.

Clinicians need to be aware of these issues. As one woman wrote: 'Nothing prepares one for the loss of one's mother. Even almost losing her three years previously did not prepare me for being without her when she died in 1987. I could not imagine being without her'.

The developed world, particularly

North America, experienced a baby boom between 1946 and 1964. With the aging of this cohort, a large number of women will be facing their mothers' death in the next few years. Clearly this loss is a normative life event which requires more attention than has been provided to date.

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