Social support and Black mothers' bereavement experience of losing a child to gun homicide

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Abstract: Social support is important in facilitating survivors' psychological adaptation following loss to violent deaths. Although literature shows a positive relationship between social support and Black mothers' resilience after loss of a child to gun violence, no other evidence exists to clarify this relationship. This study used grounded-theory methodology to explore social support among 10 Black mothers following the loss of their children to gun homicide. The findings of the study showed that the mothers experienced altered relationships with friends and families following their loss, which left them feeling isolated in their grief process. Understanding social support in Black mothers' bereavement is important in devising appropriate interventions for them.

Keywords: social support, stress, gun homicide, bereavement, Black women

Homicide is a complex public health issue that has far-reaching social and psychological impacts. The World Health Organization (WHO) estimated 475,000 deaths to homicide worldwide in 2012. In the Americas, gun homicide accounts for one in every two homicide deaths (WHO, 2014). In Canada, guns account for approximately 32% of all violent deaths (Boyce & Cotter, 2012). Irrespective of context, gun homicide carries long-term consequences for grieving families and friends. The sudden and transgressive nature of homicide puts surviving parents at risk for severe psychological suffering that is not mitigated with time (McDevitt-Murphy et al, 2012). Parents who lose children to gun homicide struggle with prolonged and complicated grief, symptoms of post-traumatic stress disorder (PTSD), and multiple co-morbidities (McDevitt-Murphy et al, 2012; Miller, 2009). These parents screened positive for PTSD as soon as six months after the loss, and continued to show psychological distress after five years and beyond (McDevitt-Murphy et al, 2012; Murphy et al, 2003).

In countries like the United States, Black parents are not only disproportionally affected by gun violent loss (Phillips, 1997; Sharpe & Boyas, 2011); their psychological outcomes are different from Caucasian parents (Laurie & Neimeyer, 2008). At the core of their differential grief experiences is race (Bailey et al, 2013). Race-based stigma and other social disparities persist in Black parents' post-homicide experience, causing intense trauma, disenfranchised grief, and withdrawal of social support (Bailey, Clarke, & Salami, 2015; Lawson, 2013). Given that social support plays a critical role in homicide survivors' coping (Armour, 2002, Sharpe, 2008), it is important to understand Black mothers' experiences with social support following loss of children to gun homicide. This study explored social support in Black mothers' grief experiences.

Parental trauma and gun homicide

Research affirms the complex and traumatic consequences of gun homicide on surviving families and communities (Bailey *et al*, 2013; Buchanan, 2014). Parents bereaved by homicide suffer more intense and prolonged trauma (Amick-McMullan, Kilpatrick & Resnick, 1991; Keesee, Currier & Neimeyer, 2008). Even five years post-loss, parents who lose children to homicide experienced higher levels of PTSD (Murphy, Johnson & Lohan 2003). They grapple with complicated grief, PTSD, intrusive thoughts about the deceased, insomnia, and multiple co-morbidities such as gastrointestinal problems, and cardiovascular disorders (McDevitt-Murphy *et al*, 2012; Miller, 2009). Among surviving parents already exposed to vulnerable conditions such as poverty and discrimination, psychological disablements exacerbate into social, behavioural and physiological disorders (Mastrocinque *et al*, 2014; McDevitt-Murphy *et al*, 2012).

Black youths are disproportionally susceptibile to gun violence death across various contexts (Ratele, 2010; Phillips, 1997). As a result, Black mothers unduly bear the social, psychological and financial burden of gun-violent survivorship. Research shows that six months and later following loss of children to homicide, 88.9% of Black parents screened positive for symptoms of complicated grief (McDevitt-Murphy *et al*, 2012). Their trauma is intensified by diminished social and formal supports, and decreased access to victims' services (Bailey & Velasco, 2014). These experiences were often predicated by the intersection of racism, stigma of gun violence, and negative social interactions (Bailey, Clarke, & Salami, 2015; Bailey *et al*, 2013; Sharpe, 2013). This intersection often leaves Black mothers feeling victimised, with difficulty finding meaning in their loss (Bailey *et al*, 2013). The social and psychological experiences of gun-violent loss bear compelling impacts on their ability to persevere.

Social support and gun homicide

Long-term adjustment for homicide survivors requires extended social support (Buchanan, 2014). Individuals use support from personal relationships to access resilience-related resources they need to face challenges in their lives (Ungar et al, 2006). Social support is conceptualised as an individual's perception of being valued and cared for (Taylor, 2007), as well as tangible or emotional assistance received from others (Zimet et al, 1988). Perceived support from friends and family is important in reducing symptoms of grief, and diminishing vulnerability to bereavement consequences; thereby facilitating psychological adaptation (Dyregrov, 2003; Stroebe, Schut & Stroebe, 2005). Survivors with high levels of social support reported less complex grief and PTSD symptoms (Murphy, Johnson & Weber, 2002). However, while social support has been

recognised as a crucial variable in the adaptation to loss, the loss of a child can disrupt social support and social networks (Murphy, 2006). Poor social interactions in formal and social networks following the loss of a child to gun homicide have been shown to hamper parents' coping (Bailey *et al*, 2013). In particular, the fear of racial discrimination caused many Black survivors not to seek formal support, even with insurmountable grief. Instead they rely on informal support as the most common coping resource to mediate stressful life events (Burke *et al*, 2011; Sharpe & Boyas, 2011). Research shows that informal support from family and friends was the main, if not the only support available to Black homicide survivors for meaning making and building their resilience (Bailey *et al*, 2013).

Social support plays a restorative role in helping survivors to positively appraise their loss and rebuild their world views (Armour, 2002, Bailey *et al*, 2013). A study with Black mothers of homicide loss showed that social support related positively to their resilience (Bailey, Sharma, & Jubin, 2013). However, other studies showed that Black mothers, like other survivors of stigmatised losses such as gun homicide, experienced withdrawal of support, a gradual decline in support, changes in their social relationships, and/or negative reactions from their social circles following their loss (Armour, 2003; Bailey *et al*, 2013; Burke *et al*, 2010). Further studies are needed to better understand the dynamics of social support among Black parents who lose children to gun homicide (Burke *et al*, 2010).

Research question

The study addressed the following research question:

What is Black mothers' experience with social support in grieving the loss of their children to gun violence?

Methods

Study design

This study used grounded-theory methodology (Charmaz, 2006; Strauss & Corbin, 1990) to deepen understanding of the dynamics of social support in bereaved Black mothers' grief experiences. Grounded theory is suitable for studying social phenomena and social-psycho-social processes (Glaser & Strauss, 1967). As an emergent design, grounded theory allows the researcher to focus on the unique issues and core concerns of the participants and subject matter under study. It allows for the generation of explanations of events within the life experiences of individuals, groups, and process being studied (Strauss and Corbin, 1990). For this reason it was used to explore the influence of social support in the bereavement experiences of 10 Black mothers' who lost sons to gun homicide.

Sample

The participants in this study consisted of 10 Black mothers, whose children died as a result of gunshots. The mothers ranged in age from 35–67 years. Their deceased children ranged in age from 17 to 27 at the time of death. Eight of the mothers attended college, one had a high school diploma, and one had some high school education. Their individual incomes ranged between $25,000-$85,000. Two of the mothers reported attending church regularly. In six families the victim was a first-born child. Eight of the families had remaining children living at home. In one family, the victim was an only child, and one victim had a sibling who was living independently at the time of his death. In nine of the cases there were no apprehensions. Eight cases remained open at the time of the interviews; one was closed because the police believed the suspect was also a homicide victim. The interviews took place within 4 months to 8 years of the deaths. None of the mothers were under the care of a mental health professional at the time of the study.

Recruitment and data collection procedure

The study was conducted by the first author, a mental health therapist and approved by the University of Toronto, Canada. A snowball technique was used to recruit participants to the study. Interviews were conducted in a private setting such as the participants' home, office, or a private office. While an untested interview guide provided structure and consistency, a conversational interviewing format was used to elicit mothers' in-depth stories, thoughts, reflections, and clarified their subjective experiences of loss. The guide was based on Patton's (cited in Rubin & Babbie, 2001) recommendation for 'unstructured, informal conversational interviews while maintaining a relatively high degree of flexibility' (p407). Questions that elicited responses about social support included: 'Who do you turn to for support?' 'Who was

there with you through the funeral process?' 'Have there been any changes in your relationship with family members?' The wording and order of these questions were designed to ignite a conversation with Black mothers about their lived experiences with social support. To facilitate the interview process, gentle probing questions were asked to clarify and amplify the mothers' thoughts and reflections, such as: 'Can you elaborate on that please?' 'Would you explain that further?'

The mothers were given the space to take control of the interview to facilitate their subjective experiences of loss. Recognising that such in-depth interviews can pose the ethical challenge of re-traumatising participants, all participants were provided with a list of community grief resources and were offered follow-up grief support if needed. The interviewer (first author) used her professional skills as a counsellor to create a safe environment for mother's stories to unfold.

Data analysis

Consistent with the tenets of grounded theory, data collection and analysis occurred simultaneously from the beginning of the study, guided by the constant comparison method (Glaser & Strauss, 1967; Strauss & Corbin, 1990). The initial phase of analysis involved line-by-line coding of the transcribed interview. The data was carefully read over and each time a concept was indicated it was coded (Strauss & Corbin, 1990). All codes generated at each level of coding were compared against each other to identify similarities, differences, characteristics, relationships and general patterns. Similar concepts were then grouped together into categories until the categories were saturated (Charmaz, 2006). Finally memos were written to capture the researchers' theorising of the emergent concepts, help to sort the data into topics, and define how categories were connected within the overall process. Memos along with comparison of data and extant literature (Strauss & Corbin, 1990) provided the framework to capture and understand

Table 1: Participants' characteristics					
Mother	Marital Status	Income ($)	Child (age at time of death)	Time since loss (years apart from the 4 months)	Specific cause of death
	m	60-75	21	1	gunshot
	m	45-60	18	4	gunshot
	s	85+	19	7	gunshot
	m	35 -45	27	5	gunshot
	s	25-35	17	4 months	gunshot
	m	35 -45	18	5	gunshot
	m	85 +	22	4	gunshot
	s	35-45	20	3	gunshot
	m	35-45	21	6	gunshot
	s	60-85	23	4	gunshot

the bereavement processes of the mothers following the violent homicide death of their children. This article reports data that emerged on the occurrence and influence of social support on mothers' grief experiences.

Results

Three major themes emerged from the mothers' narrative about their experiences with support following the death of their children:

1.   Altered family support.
2.   Disruption in social networks.
3.   Withdrawal from social support.

A major consequence of the deaths that heightened mothers' stress was the disruption in relationships with family members, close friends, and people in their social networks. The circumstances of the deaths created strained relationships, negative and stigmatised reactions, and left mothers feeling unsupported and overwhelmed in their grief. Immediately following their loss, the mothers reported feeling supported by a caring community, friends and family. However, consistent with the literature, once the crisis had passed, some mothers experienced a withdrawal and loss of support (Braun & Berg, 1994; Peach & Klass, 1987). As one mother explained: 'At the beginning there are tons and tons of people, but as time passes you are on your own. You are all alone. You feel all alone.' As a result, the mothers faced a number of adaptive challenges as they attempted to adjust to and cope with the violent deaths of their children. The themes that follow captured Black mothers' experience with social support.

Altered family support

The loss of a child impacts not only on the individual parent but the parent dyad and the family system (Riches & Dawson, 2000). Families were thrown into a crisis as each family member became focused on their own grieving. The mothers reported that intimate relationships were tested as their spouses were also grieving in their own way; which left them feeling unsupported. This became a critical source of their stress and created relationship difficulties. Two mothers explained:

'I could not turn to my husband because my husband was walking around with his own guilt because he was the one that dropped my son to the club that night…I couldn't really turn to him.'

'It changed my relationship with my husband…I forgot I was a wife. All those things affected me and my family and that brought a breakdown in my relationship for almost a year.'

The death created disequilibrium in the family unit and disrupted family functioning, making it challenging for family members to support each other. According to one mother:

'I couldn't talk to my mom; it was like she was going crazy. She was crying all the time. And she did not want to hear anything negative about her grandson and she did not want to talk to anybody and my dad couldn't handle that…'

The mothers were bothered by the changes in extended family members' behaviours and attitudes towards them. They attributed these changes to the violent context of their children's deaths. Mothers felt they were avoided by extended family members due to the stigma associated with gun violent death. One mother explained:

'You know some people of my family would not even call me back, to ask how I am doing, because to them it's like (silence) he did something wrong and he died.'

This phenomenon is evident in the literature. At the time they were most in need, parents of murdered children found themselves feeling alone; as their social networks distanced themselves by withdrawing or shunning them. This often occurs out of a need to protect the feelings of vulnerability and anxiety that violent loss evokes (Masters, Friedman & Getzel, 1988; Wickie & Marwit 2000-01).

Disruption in social networks

The mothers' social support systems became impaired from the overwhelming impact of the loss. Their social network was often unable to cope with their intense distress and did not always provide needed support (Bonanno & Kaltman, 1999). Some mothers lost relationships with friends. When they reached out and did not receive support, or had unsatisfactory interactions with people considered close friends, they were left disappointed. One mother stated:

'It changed relationship with friends. If I called, they would say I will call you back because they would think that I want to talk about my son. It changed a lot of relationships.'

A common social expectation is that 'normal' bereavement should be completed within a year of a significant loss (Rosenblatt, 2001). Some mothers felt subtle pressure to curtail or terminate their grieving before their internal process was completed. They were often compelled to isolate themselves when family and friends either implied, or told them, they should end their grieving and 'get on with your life.' One mother succinctly stated, ' …you know people tend to say, why don't you move on?' In these circumstances, as a protective action, the mothers tried to control their environment by restricting their social network. At other times when they sought support from members of their social network, they often encountered invalidating interactions. Being left without a social context to support their grief became an additional source of stress for mothers. The mothers were especially pained when others did not want to engage in conversations about their deceased child. They felt that their children's lives were effaced when others avoided acknowledging their deaths.

One mother expressed:

'People get, act uncomfortable around me, and avoid or do everything to avoid saying his name. If you can't say my son's name, then I have nothing to say to you, nothing.'

When the mothers compared themselves to White bereaved parents they surmised that the interconnection of Black males' death to gun violence, and the uncertain circumstances of their deaths led friends and members of their communities to stigmatise and treat them differently. According to one mother:

'There were people who were busy making comments, maybe he was involved in this or that or maybe, kind of making their comments behind my back. Saying things like, she knows something. I know something. The majority of friends were supportive, but as a matter of fact, perhaps I should rephrase that, they were acquaintances because friends stick by you.'

Worden (2002) stressed the importance of support and stated that, 'grieving is a social phenomenon and the need to grieve together is important. The degree of perceived emotional and social support from others, both inside and outside the family, is significant in the mourning process.' (p43). However, for these mothers, the stigma of gun violence impinged on their ability to feel a sense of connection and support. Instead they grappled with feelings of alienation and isolation. Consistently they expressed that a stigmatised status was imposed upon them which then suffused them with feelings of shame. They felt they had become an object of embarrassment, avoidance, and blame; feelings which are consistent with survivors of violent loss (Riches & Dawson, 2000). When mothers encountered situations of stigma they often chose to avoid talking, or simply censored their self-disclosure. Unwitting, or intentional, the actions and words of others were often interpreted by the mothers as an evaluation or even a devaluation of themselves and their loss. This evoked a process of re-evaluation of their real friends and those who were not. One mother commented:

'At first everyone was supportive but then, you know people they like to talk. I couldn't handle the talking. I moved, changed my number. Guess I lost a lot of friends. No, let me take that back, I found out who my friends were.'

Negative social interactions left mothers feeling hurt, betrayed, and misunderstood. The perception that others did not understand their experience of loss was further troubling. Consequentially, relationships were re-evaluated, and in many cases lost. This experience supports findings that negative reactions, and unkind and hurtful comments, contribute to making the grieving process treacherous (Burke *et al*, 2010; Dyregrov, 2003).

Withdrawing from support

The murder of their children contributed to multiple losses for mothers that were both symbolic and actual in nature.

Symbolically, the mothers felt they were alone in their grief. Paradoxically, a factor some of the mothers discussed that altered their relationships with others was that they themselves retreated from social support out of fear of being judged or feeling that no one could understand the depth of their sorrows. 'I did not turn to friends because I did not want them to judge me,' said one mother. Another expressed:

'Who is there to help me, who I ask you. What can they do? They sure can't bring my child back.'

In public, mothers modulated their expression of grief and engaged in social withdrawal and avoidance of social interactions. At a time when they most needed to feel supported, it became easier and less devastating to retreat and distance themselves; even at the cost of becoming isolated. Retreating left the mothers with fewer opportunities to talk about and process their loss. Social relations were irrevocably altered or terminated when the mothers experienced their loss as interpersonally and socially negated. '…Nobody knows what I am feeling so I just avoid them,' said one mother.

This lack of support resulted in psychosocial stressors and disenfranchised their grief. The context of violent death and stigma was most responsible for altering the mothers' relationships and interactions with their social networks. Interactions within social networks remained important to the mothers for both social support and legitimisation of their grief and loss. However, the experience of grieving a child lost to gun homicide is embedded within larger social contexts; which often shape the victimisation and vulnerability of Black homicide survivors' bereavement trajectory (Lawson, 2013). Losing the initial support available in their social milieu made mothers realise the public shame in gun violent loss. Parkes and Weiss (1983) found that 'the presence of supporting relationships, while valuable at the time of bereavement had no significant association with later recovery. What seemed important was not whether support was initially available, but whether it was available and utilised' (p55). Even with the ongoing dilemma in desiring both closeness and distance, mothers continued to yearn for support in their time of grief:

'Burning issues for me is the lack of support. So many people talk about it. I think it is important for people to realise that you need some emotional support.'

Discussion

Trauma literature has traditionally focused on the benefits of social support in survivors' stress experiences (eg. Armour, 2002; Lohan & Murphy, 2002; Sharpe & Boyas, 2011), without exploring the subtleties involved in the processes and influences of social support in these experiences. This study sought to understand Black mothers' experiences with social support after losing children to gun homicide. The findings showed that

mothers experienced negative interactions with their spouses, which increased their stress reactions. Feelings of guilt by one or both partners created emotional and relational disharmony in their relationships. This finding is consistent with research showing that parents who lose children to homicide experienced higher incidences of marriage breakdown (Murphy, Johnson & Lohan, 2003). Recognising that family support in enhancing positive bereavement outcome for Black survivors is paramount (Burke, Neimeyer, & McDevitt-Murphy, 2010; Laurie & Neimeyer, 2008), practitioners should be deliberate in targeting strategies at reducing the psychological toll on the family system. Community-based agencies, program, or supportive services should refocus priorities to decrease stress, enhance perceptions of self-control, and build resilience among Black families; with particular focus on coping measures that unify parental relationships.

This study indicates that the absence of support especially from friends impacts negatively on Black mothers' coping. The findings suggest that relational disturbances in mothers' social networks occurred because of underlying assumptions and cognitive schemas about the stigma of gun violent death. The stigma associated with murder had direct implications on how mothers related to their social environment. This stigma shaped interpersonal interactions, disrupted social supports, and left mothers isolated in their grief. Black survivors of gun homicide's experiences with isolation are a direct result of the debilitating, diverse, and wide impact of the processes of stigma on their access to community services, mental health services, victims services, and low levels of support from justice/legal systems (Bailey *et al*, 2013; McDevitt-Murphy *et al*, 2012). Stigma-generated isolation is problematic for homicide victims in general (Blakely & Mehr, 2008); however, the coalescing of the discourse of race and the stigma of gun violence gives rise to race-based stigma that perpetuates Black mothers' isolation and their psychological distress (Bailey, Clarke & Salami, 2015). Building an infrastructure for social support that is relevant and specific to Black mothers and other survivors of gun violence should begin with increasing understanding of the role of stigma in the disruption of familial and social support.

While grief was experienced alone in the intrapsychic world of the mothers, it was also a relational process that was highly influenced by interactions, reactions, connections and disconnections in a relational web. The data indicated that the bereavement trajectory of Black mothers was highly influenced by the interface of each mother's psychological makeup and the social context. In fact, their experiences of loss were much more multifaceted and interconnected with their social milieu than traditional grief theories suggest. The mothers' bereavement trajectory was shaped by their social environment, their relationships and interactions with others, and their sense of self. Given

this level of interface, the phenomenon of withdrawal and diminished social supports due to the 'taboo nature' inherent in murder documented in studies (Braun & Berg, 1994; Riches & Dawson, 2000) was intensified for Black mothers who believed that the interconnection of race and violent death led to them being ostracised. Mothers concluded that they were treated differently by family members and social networks because of the stigmatising nature of gun violent deaths. The mothers internalised this treatment as abandonment and confirmation that their grief and their deceased children were unworthy of attention. As a result, they modulated their expression of grief in public and retreated by cocooning or isolating themselves. However, the data suggest that there was an ongoing dilemma in desiring both closeness and distance, which paradoxically, left mothers feeling both connected and disconnected from sources of support. The recognition of the constricting nature of the social environment on Black mothers' grief process requires provision of a balanced and coordinated system of support that involves therapeutic care and community-based support. This system of support must begin with education and training on the impact of gun violence stigma on Black survivors' access to support and services.

Conclusion

This study provides evidence of the need for social support for bereaved mothers of gun violence. Loss of a child to gun violence is arduous for Black mothers and impacts negatively on their coping experience. The mothers in our study reported that negative interactions and treatments from family, friends, and significant others complicated their grief responses. Mothers felt judged, and eventually withdrew from others when they did not perceive them to be supportive. To facilitate grief work for these mothers, public health practitioners, social workers, and mental health specialists can work to enhance the capacity of families and friends to provide ongoing support during the crisis of the loss. Future studies should investigate social support on diverse bereaved families' experiences longitudinally, to determine how families are impacted and changed.

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