

COLLEGE STUDENTS' DISENFRANCHISED GRIEF FOLLOWING A BREAKUP:
THE EFFECT OF RELATIONSHIP CLOSENESS
AND PERCEIVED STIGMA ON GRIEF

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Jennifer E. Reimer

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COMMITTEE MEMBERSHIP

TITLE: College Students' Disenfranchised Grief Following
a Breakup: The Effect of Relationship Closeness
and Perceived Stigma on Grief

AUTHOR: Jennifer E. Reimer

DATE SUBMITTED: May 2019

COMMITTEE CHAIR: Aaron R. Estrada, Ph.D.
Associate Professor of Psychology

COMMITTEE MEMBER: Jennifer Teramoto Pedrotti, Ph.D.
Associate Dean for Diversity and Curriculum

COMMITTEE MEMBER: Taylor Smith, Ph.D.
Assistant Professor of Psychology

ABSTRACT

College Students' Disenfranchised Grief Following a Breakup: The Effect of Relationship Closeness and Perceived Stigma on Grief

Jennifer E. Reimer

Grief is a universal reaction to loss. Losses are often associated to the death of a loved one, however, they may also originate from the end of an intimate partner relationship. Whereas studies have focused on grief after a divorce or on symptomatology students endure after a death, this article attends to the understudied college student experience of grief following a breakup. Within emerging adulthood, the loss of a close romantic relationship may be challenging to navigate alongside the daily stressors of college. Stigmatization by means of social cues convey sentiments, such as the need to get over an ex-partner, which in turn can lead to disenfranchised grief where individuals do not feel heard, accepted, or valid in their experience of grief. It was hypothesized that as endorsed closeness of the past relationship increases so does grief intensity, and that as feelings of stigmatization increase also increases grief intensity. Multiple regression models supported the main effects, although the interaction effect between levels of closeness and perceived stigmatization was not supported. Implications and future directions are discussed.

Keywords: disenfranchised grief, college students, breakups, closeness, stigma

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Chapter I

1. INTRODUCTION

While death related grief and loss are typically honored and acknowledged, grief resulting from a non-death related loss, such as the ending of an intimate partner relationship often are not. This can lead to disenfranchised grief where individuals feel invalidated, minimized, unheard, and unrecognized (Doka, 2002, 2008). When grief appears different from typical mourning practices or when the loss event is not socially sanctioned as worthy of grief, the bereaved may encounter stigmatizing social interactions. Subsequently, grieving individuals that fit the characterization of disenfranchised grief are unable to fully acknowledge or express their experience (Doka, 1999, 2002, 2008; Doka & Aber, 1989a).

Studies within the field of grief and bereavement suggest that students endorse a breakup as the most significant non-death related loss event within the past 12 months (Cooley, Toray, & Roscoe, 2010; Cooley, Toray, & Roscoe, 2014; LaGrand, 1985). Despite these conclusions that college students frequently experience grief following the end of an intimate partner relationship, the phenomenon is understudied and is overshadowed by the numerous literature entries on divorce (Balk, 2001; Cohen & Finzi-Dottan, 2012; Cooley et al., 2014; Lavner & Bradbury, 2012; Servaty-Seib & Taub, 2010). Historically, Erikson's (1950) culturally individualistic model of development signified early adulthood as a time to establish close relationships with peers and romantic partners. As such, experiencing a breakup in this time period can result in

cognitive, emotional, and physical distress, which may include a manifestation of grief (Cupit, Servaty-Seib, Tedrick Parikh, Walker, & Martin, 2016; Davis, Shaver, & Vernon, 2003; del Palacio-González, Clark, & O’Sullivan, 2017; Field, Diego, Pelaez, Deeds, & Delgado, 2009; Wrape, Jenkins, Callahan, & Nowlin, 2016).

The present study assesses grief intensity following the dissolution of an intimate partner relationship and how it is impacted by perceived closeness in the past romantic relationship and the endorsement of stigmatization surrounding the loss. Each of the predictor variables are supported in literature. Across decades, perceived relationship closeness has been a key variable in predicting grief intensity amidst the contexts of death, the end of the friendship, divorce, or a non-marital breakup (Bugen, 1977; Dibble, Levine, & Park, 2012; Servaty-Seib & Pistole, 2007). Unlike relationship closeness, stigma has not been extensively examined within various loss contexts. Extracted from loss events that the literature does investigate, such as a death from an overdose (Feigelman, Jordan, & Gorman, 2011) or the termination of a pregnancy following the diagnosis of a fetal anomaly (Hanschmidt, Trembl, Klingner, Stepan, & Kersting, 2018; Maguire et al., 2015), individuals endorse higher levels of grief when stigmatizing reactions are felt. Social interactions such as strained conversation or avoidance of the griever may lead to feelings of stigmatization (Feigelman et al., 2011; Gökler-Danışman, Yalçınay-İnan, & Yiğit, 2017; Hanschmidt, Lehnig, Riedel-Heller, & Kersting, 2016; Maguire et al., 2015).

Based on a review of the conceptual and empirical literature, it was hypothesized that individuals endorsing increased relationship closeness will report increased grief intensity. Similarly, greater feelings of stigmatization surrounding the loss of the intimate

partner relationship will endorse increased grief intensity. Lastly, the interaction between reported relationship closeness and perceived stigmatization will better predict grief intensity than both variables separately.

1.1 List of Terms

Grief is an individual's subjective experience of a loss containing various affective and cognitive reactions such as anger, sadness, guilt, confusion, anxiety, feelings of abandonment or even relief (Field et al., 2009; Shear, Boelen, & Neimeyer, 2011; Stroebe, Hansson, Schut, & Stroebe, 2008; Worden, 2018). The term mourning will be used to refer to the display of grief, the process of adapting to life following the loss, and the navigation of social interaction (Kastenbaum, 2008; Stroebe et al., 2008). Often, bereavement is used to describe the period of heightened distress or reactivity following the death of a loved one; however, bereavement can also pertain to non-death related losses (Corr, Corr, & Doka, 2018; Hames & Pedreira, 2003; Sandler, Wolchik, Davis, Haine, & Ayers, 2003).

Goffman (1963) defined stigma as an experience that "discredits" an individual and ultimately diminishes a "whole and usual person to a tainted, discounted one" (p. 4). Within the context of this paper, perceived stigmatization of grief may stem from undesirable interactions with friends and family, such as overt denial of the existing grief or a friend suggesting you move on from an ex-partner (Johnson et al., 2009). Closeness is operationalized differently than intimacy or romance. Relationship closeness, as defined by the creators of the Unidimensional Relationship Closeness Scale (Dibble et al., 2012), relates to the "degree of interdependence" existing emotionally, cognitively, and behaviorally between partners (p. 2). Lastly, intimate partner relationship loss is

terminology referring to a breakup between unmarried partners. Students may conceptualize their past relationship differently, including labels such as committed relationships, casual dating, or sex without commitment; however, this study did not require respondents to provide specific relationship characterizations.

Chapter II

2. LITERATURE REVIEW

Grief may arise following various death related or non-death related loss events. Death related grief has been studied extensively while non-death related losses are less commonly explored (Gold, Miller, & Rotholz, 2001; Gold, Neururer, & Miller, 2000; Goldsworthy, 2005; Miller & Servaty-Seib, 2016). Often, non-death related losses, like the end of an intimate partner relationship, are prone to be invalidated, minimized, and disregarded by others (Doka, 2002, 2008). Disenfranchised grief is the term Doka and Aber (1989a) designated to grief that society does not acknowledge as valid which may hinder grievers ability to seek support due to feelings of shame or embarrassment which in turn may prolong the mourning process. For such individuals, feelings of stigmatization arise when receiving interpersonal feedback from other individuals, such as avoidance of the bereaved or changing the topic when loss the brought up (Corrigan & Watson, 2002). Grief reactions are mediated by factors such as perceived closeness of the relationship, history of managing loss, age, gender, social support, and the presence of concurrent stressors (Worden, 2018). This study focuses on the non-death related loss of an intimate partner relationship among emerging adults in college.

College students tend to represent the Eriksonian (1950) adolescent and young adult developmental tasks ascribed to ages 12 to 40. More recently, Arnett (2000) suggested that the developmental stage of emerging adulthood, extending from eighteen years old into the later twenties, more accurately captures the impact of contemporary

social changes on psychosocial development. Furthermore, Arnett (2000) claimed that emerging adulthood is defined by this groups' propensity to complete milestones at later in life, including marriage, having children, and finishing their education later. This last facet is particularly important as more individuals are participating in postsecondary education for 2 to 8 years or more. Considering Erikson embodies a Western lens of development, it is important to note that the current study describes a sampling of experiences and does not assume to depict experiences across cultures nor societies that are more inclined to collectivism. Moreover, it aims to describe some peoples' experiences of grief and loss and does not claim that all individuals experience grief in the same way.

Despite the developmental importance of romantic partners during emerging adulthood, college students' experience of grief from the end of an intimate partner relationship is understudied within grief literature (Balk, 2001; Cooley, Toray, & Roscoe, 2014; Servaty-Seib & Taub, 2010). As a result of both death related and non-death related losses, grieving students have reported impairment in physical, behavioral, interpersonal, cognitive, and emotional domains (Neimeyer, Laurie, Mehta, Hardison, & Currier, 2008). Specifically, symptoms of anxiety, anger, anhedonia, isolation habits, ruminations, or sadness are commonly observed among the college population (Neimeyer et al., 2008). Furthermore, emerging adults may undergo subsequent mental health concerns, such as depression, following the dissolution of an intimate partner relationship (Davis, Shaver, & Vernon, 2003).

2.1 Grief and Mourning

Grief and mourning are often used interchangeably when discussing loss. Wolfelt (2006) denotes grief as a reflection of internal thoughts and feelings following a loss, whereas mourning is the externalization of grief through actions, rituals, and seeking out support. The perception of how to properly mourn is heavily influenced by socially validated ways of grieving. Social convention manages individuals' expectations of grief; including how long to grieve, how and when grief should manifest, or which losses are appropriate to mourn (Worden, 2018). When the display of grief falls outside of socially sanctioned customs of mourning, the bereaved may encounter rejection and further complications, such as isolation or depression (Doka, 2002, 2008; Wolfelt, 2006). Societal and interpersonal messages, both verbal or nonverbal, impact how individuals outwardly express grief (Wolfelt, 2006) and ultimately may invalidate, discourage, and dismiss mourners' experiences (Attig, 2004; Doka, 2002, 2008; Lazare, 1979). While observed grief symptoms, such as unremitting crying, increases the likelihood of rejection from others, an atypical grief process can likewise lead to a disenfranchising experience of grief (Doka, 2002, 2008; Worden, 2018).

2.1.1 Process of grief. Research in the United States claims that following a loss, an individual's typical process begins with acute grief, which manifests as a period of longing, anhedonia, and recurrent thoughts of the loss (Shear, 2015). Shear, Ghesquiere, and Glickman (2013), assert that acute grief typically transitions to an integrated grief response known as uncomplicated grief. In other words, individuals move through the initial and often intense feelings of bereavement, grief eventually fades into a manageable and less raw piece of their self-narrative. After one year has passed following the loss,

acute grief can now be categorized as either uncomplicated or complicated grief depending on the severity of symptoms (Cohen & Hoffner, 2016; Crunk, Burke, & Robinson, 2017; Horowitz et al., 2003; Shear, 2012, 2015).

About ten percent of individuals with acute grief advance into this category of complicated grief, also called Persistent Complex Bereavement Disorder in the DSM-5 (American Psychiatric Association, 2013; Kersting, Brähler, Glaesmer, & Wagner, 2011). A few symptoms of complicated grief include intense sadness and rumination, anger and bitterness, the inability to enjoy life, and either an avoidance or concentration on loss reminders (Horowitz et al., 2003). For individuals labeled with complicated grief, heightened symptomology may result in a diagnosis of a more severe psychological disorder such as post-traumatic stress disorder or major depressive disorder (Shear, 2012).

Conversely, an alternate position claims that by labeling grief as either complicated or uncomplicated, grief shifts from a normative reaction to death and loss to a stance of pathology (Hibberd, 2013; Neimeyer, Baldwin, & Gillies, 2006; Stroebe, Gergen, Gergen, & Stroebe, 1992). Although this dispute exists outside the purposes of the current research, nonpathologizing language will be implemented to prevent further stigmatizing experiences of grief. Because complicated grief research is grounded in U.S. culture, the model may not apply to people of other, non-U.S., cultures. The ability of complicated grief to be diagnosed 12 months following the loss is restrictive to a variance of cultural norms indicating the normal length of bereavement (Walter, 2006). As such, complicated grief may not be an experience that is valid in other cultural contexts.

2.1.2 Symptoms of grief. Symptoms of grief are categorized into four basic groups of emotional, cognitive, behavioral, and physical. Symptomology varies between individuals and while some people may experience symptoms from various categories, others might not report any symptoms of grief. Various factors impact how grief manifests including, but not limited to, individual characteristics and specific details of the loss event, such as suddenness. Further factors influencing grief responses will be discussed following this section.

2.1.2.1 Emotional. Emotional reactions include feelings of numbness, anxiety, guilt, sadness, confusion, and anger (Kübler-Ross, 1969; Prigerson et al., 1995; Worden, 2018). Following a breakup, college students may also encounter feelings of betrayal which is specifically related to increased distress (Field, Diego, Pelaez, Deeds, & Delgado, 2009). After separating from their partners however, not all described emotions are negative as some students endorse feelings of relief, happiness, and freedom (Carter, Knox, & Hall, 2018; Worden, 2018).

2.1.2.2 Cognitive. Commonly cited cognitive symptoms include increased rumination, denial, or confusion (Shear, Boelen, & Neimeyer, 2011; Worden, 2018). Following a loss, individuals may perceive their reality and worldview as inexplicably shattered, leaving individuals to feel confused about the meaning of the loss, where it fits into their overall narrative, and how their own identity has been subsequently impacted (Neimeyer et al., 2006). Among college students, higher levels of distress are significantly related to intrusive memories, (del Palacio-González, Clark, & O'Sullivan, 2017) negative thought patterns, and cognitive avoidance (Wrape, Jenkins, Callahan, & Nowlin, 2016).

2.1.2.3 Behavioral. Grief may also lead to behavioral reactions such as sleep disturbances, social withdrawal, restlessness, or the physical avoidance of loss reminders (Hardison, Neimeyer, & Lichstein, 2005; Worden, 2018). Additionally, amid college students, breakups are associated to behaviors that impact their academic career including increased alcohol or drug use, less institutional belonging and engagement, and decreased academic performance which in turn, produce a higher risk of dropping out of school (Cupit, Servaty-Seib, Tedrick Parikh, Walker, & Martin, 2016; Miller & Servaty-Seib, 2016).

2.1.2.4 Physical. Lastly, there are various physical reactions or sensations frequently associated with grief. These may include decreased energy or motivation, physical tension, fluctuation in weight, heaviness in the chest, changes in appetite, tightness in the throat, fatigue, and a sense of derealization (Hardison et al., 2005; Rando, 1991; Worden, 2018). Further physical symptoms that arise from the dissolution of an intimate partner relationship include immune suppression, physical illness, and risk of suicide or homicide (Davis et al., 2003; Kiecolt-Glaser & Newton, 2001).

2.1.3 Factors influencing grief responses. Grief has a wide assortment of symptoms that manifest differently due to characteristics of the griever or aspects of the loss event, such as how suddenly the loss occurred. Reactions to loss range from infrequent crying spells to symptoms that mimic depression. Feelings associated with grief may be salient for only a couple of weeks or may last many years. Also, the experience of grief may be felt immediately following the loss or it might emerge after a few months of shock. Because the focus of this study is the end of an intimate partner relationship among emerging adults, the following factors are not an exhaustive list of

mediators for grief, but instead represent a focused overview that may apply to individuals experiencing a non-marital breakup.

2.1.3.1 *Perceived closeness of the relationship.* Historically, bereavement research has commonly cited the level of perceived relationship closeness between partners as contributing to grief intensity (Bugen, 1977; Robak & Weitzman, 1998; Servaty-Seib & Pistole, 2007; Worden, 2018). Regardless of relationship category, whether it be romantic, a pet, friendship, or the grandparent-grandchild relationship, perceiving the relationship as close is a predictor for heightened grief reactions (Servaty-Seib & Pistole, 2007). Furthermore, Archer (2001) argued that perceived closeness of a relationship is a better predictor for grief intensity than relatedness or kinship. Relatedly, Eckerd, Barnett, and Jett-Dias' (2016) examined grief in college students following a death of a pet or human and discovered perceived closeness to be the strongest predictor of grief regardless of which loss participants endorsed.

2.1.3.2 *Social variables.* Worden (2018) notes that bereavement is a “social phenomenon” with social support being a large alleviator in grief intensity (p. 73). Social support, both inside and outside the immediate family, decreases both the stress related to bereavement and symptoms of depression (Kaunonen, Tarkka, Paunonen, & Laippala, 1999; Stroebe, Zech, Stroebe, & Abakoumkin, 2005). Conversely, a lapse of social support has been related to negative grief outcomes such as isolation, anxiety, and feelings of shame or guilt (Bottomley, Burke, & Neimeyer, 2018; Jordan & McIntosh, 2011). Sharp et al. (2018) note that for bereaved individuals, peer support can buffer against a lack in family support which at times may be absent. Although outside the scope of this paper, an important caveat regarding social support is that an individual's

satisfaction and the quality of support are more significant for positive outcomes in comparison to the quantity or availability of such support (Bottomley et al., 2018; Worden, 2018).

2.1.3.3 Gender. In the experience and expression of grief, findings on gender differences are often mixed. Worden (2018) posits that instead of inherent differences within gender, socialization plays more of a role on increased grief outcomes, with social support, coping styles, and cognitive processes (Stroebe, Stroebe, & Schut, 2001) likely contributing to the observable gender variance. However, amid the current research, various cited studies did not find gender as a predictor for grief intensity. As such, gender has not been typically found as significant while examining social support as a mediator of grief (Stroebe et al., 2005) nor when examining perceived stigmatization following a sudden loss (Pitman, Rantell, Marston, King, & Osborn, 2017).

2.2 Disenfranchised Grief

Doka and Aber (1989a) defined disenfranchised grief as “grief that persons experience when they incur a loss that cannot be openly acknowledged, publicly mourned, or socially supported” (p. 4). When grief and loss present as different from the sanctioned norms, such as a widowed individual not crying at their partner’s funeral, mourners may experience social interactions that produce perceptions of stigmatization. The stigmatization of grief is congruent with aspects that define disenfranchised grief: exclusion of the griever, disavowal of the loss as meaningful, and invalidation of the griever’s behaviors and emotions following the loss (Doka, 2002, 2008). As the literature on disenfranchised grief is mainly from an individualistic model, much of the examples used does reflect that perspective. However, it is important to note that the experience of

disenfranchised grief can apply to individuals within other cultures who do not reflect the widely accepted grief norms from their society. Likely specific stigmatizing reactions from others (e.g. avoidance) or the act of mourning through death rituals would appear different from the provided U.S. based examples.

2.2.1 Stigmatization of grief. Although various situations and experiences are stigmatizing, within the context of grief, stigma arises from specific loss events such as death by overdose or suicide, the way an individual mourns, or grieving a loss that society does not view as permitting pain such as parasocial or one-sided relationships, often referring to relationships with celebrities or fictional characters (Daniel & Westerman, 2017; Lazare, 1979; Worden, 2018). Understanding stigma through Doka and Aber's (1989a) framework of disenfranchised grief may provide language to describe stigmatization within grief and can grant further insight to how socially enforced norms impact how individuals experience and perceive grief (Corr, 1999; Pillai-Friedman & Ashline, 2014).

The impact of stigma on grief can be understood through two established types of stigma: perceived stigma and internalized stigma (Corrigan & Watson, 2002). Perceived stigma refers to socially endorsed stereotypes, attitudes, and beliefs which are seen in interpersonal contexts including immediate social groups of friends and family or through less intimate interactions with doctors or acquaintances (Hebl & Dovidio, 2005; Vogel, Bitman, Hammer, & Wade, 2013). Pryor and Reeder (2011) claim that perceived stigma exists on a continuum based on how overtly an individual is stigmatized. For instance, stigmatized interactions may be overt through rejection, invalidation, and avoidance (Dovidio, Major, & Crocker, 2000). Experiences may include situations such as friends

ending a conversation when the source of the grief is mentioned or when clinicians are reluctant to accept new clients with certain stigmatized losses. On the other hand, covert stigmatization through non-verbal feedback might include an avoidance of making eye contact or shifting away from the speaker, which may further express feelings of discomfort, tension, or annoyance that the non-griever may be experiencing (Hebl, Tickle, & Heatherton, 2000). Kučukalić and Kučukalić (2017) denote higher levels of stress, social anxiety, and hopelessness as consequences of perceived stigmatization. Alternative to the external source of perceived stigma, internalized stigma is produced when an individual adopts the negative beliefs and feelings associated with perceived stigma (Pryor & Reeder, 2011). As perceived stigma reinforces mourning norms such as an acceptable amount of time since the loss for grieving, the typical symptoms associated with grief, or what losses are considered worthy of grief, individuals internalize these expectations which may influence their grief process.

When an individual perceives their grief as unpermitted, their grief symptoms and behaviors may intensify and lengthen (Doka, 2002, 2008). Grievers may also isolate, underutilize resources, and develop a perception that their grief is viewed as inappropriate (Tonkin, 2010). Sheehy (2012) asserts that a griever's lack of interpersonal openness, due to feeling stigmatized, can affect the quality and availability of offered support. Individuals with disenfranchised grief may experience invalidation from others that their loss is tangible, they may receive less familial and social support, or might sense others' discomfort when speaking about the loss (Gökler-Danışman, Yalçınay-İnan, & Yiğit, 2017; Lee, Kochman, & Sikkema, 2002; Maguire et al., 2015). As society continues to perpetuate these rules of bereavement, grievers go on suffering feelings of

shame, invalidation, and guilt if their process does not align with culturally sanctioned norms (Livingston & Boyd, 2010; Vogel et al., 2013).

2.2.2 Categories of disenfranchised grief. Doka and Aber (1989a) denoted five broad categories that describe common types of loss or characteristics of a griever that may produce disenfranchised grief: (a) the relationship is not recognized, (b) the loss is not acknowledged, (c) the griever is excluded, (d) the circumstances of the death, and (e) the way an individual grieves. Within the context of the present paper examining a non-marital breakup, the last two categories are irrelevant because first, death is not the cause for the loss which eliminates ‘the circumstances of the death’ category. Second, the current research is not examining how someone displays grief which eliminates the final category of ‘the way an individual grieves’. The common denominator between all categories is the perceived lack of empathy or validation that individuals perceive their loss as grievable. The three applicable categories of disenfranchised grief will be described amidst the framework of the dissolution of an intimate partner relationship.

2.2.2.1 *The relationship is not recognized.* Doka (2002, 2008) and Aber’s (1989a) first category of disenfranchised grief applies to relationships that do not fall within the socially constructed category of accepted types of relationships. Examples of relationships that may be considered as invalid include an extramarital affair, a parasocial relationship, or a non-marital partnership. Moreover, romantic relationships during emerging adulthood may be unrecognized due to the couple’s youth and perceived lack of experience. As a result, others may invalidate the loss of a romantic relationship by denying its capacity to be meaningful. Parts of U.S. society reflect these minimizing sentiments through the labeling of such relationships as ‘puppy love’, which indicates the

passing infatuation of adolescents which dissipates with age. Breakups among college students may also be minimized due to the perception that much of college students are experimenting and people are not wanting to enter serious or committed relationships; therefore, if these relationships end, they are not viewed as significant or capable of producing grief.

2.2.2.2 *The loss is not acknowledged.* The second category of disenfranchised grief suggests that certain loss events may not be viewed as sufficient to produce grief reactions (Doka, 2002, 2008). Whilst examining current grief literature, entering keywords like “grief”, “stigma”, and “breakup” or “dissolution of relationship”, revealed research to mainly focus on divorce as the relationship status. In comparison, the dearth of premarital research conveys that these dating relationships are not viewed as meaningful and may not merit bereavement if lost. Akin to puppy love, colloquial phrases like, ‘there’s more fish in the sea’, signify that the past partner can be easily substituted, which in turn undermines the perception that past relationships are grievable and irreplaceable.

2.2.2.3 *The griever is excluded.* The last relevant category that might produce disenfranchised grief concentrates on aspects pertaining to the griever (Doka 2002, 2008). Age is a common characteristic that impacts how people perceive grief amidst groups such as children, the elderly, and college-age adults (Doka, 2002, 2008). Within the context of the end of an intimate relationship, young adults’ pain can be diminished through stereotypical sentiments like, ‘You’re young, you have time to find the one’ or ‘You’ll get over it’. These statements invalidate individuals’ occurrence of loss and grief

due to socially sanctioned norms that wisdom or life experience is only gained with age and thus, their perception should not be taken seriously.

2.2.3 Commonly disenfranchised or stigmatized losses. Alongside Doka and Aber's (1989a) categories of disenfranchised grief, specific loss events are more commonly associated with stigmatized reactions. At the intersection of bereavement and stigma, much of the literature examines loss from suicide (Hanschmidt, Lehnig, Riedel-Heller, & Kersting, 2016; Scocco, Preti, Totaro, Ferrari, & Toffol, 2017; Sveen & Walby, 2008; Young et al., 2012). The literature on stigmatization and death by suicide reveals a strong positive relationship between the severity of grief symptoms and negative reactions from family and friends (Hanschmidt et al., 2016; Johnson et al., 2009). Worden (2018) outlines potential reactions experienced by people who have lost someone to suicide, or suicide loss survivors, including, physical avoidance of the griever, disengaging from the topic of suicide, or the absence of social support. Essentially, the more negative reactions a griever receives, the greater feelings of shame, guilt, self-blame, and maladaptive behaviors such as hiding the cause of death (Jordan & McIntosh, 2011). Furthermore, Ferlatte, Oliffe, Salway, and Knight (2019) examined how stigma shapes bereavement and found suicide loss survivors are more likely to keep secrets from others, feel abandoned by their support groups, and feel alone in their recovery. As such, this research may indicate that the negative feelings conveyed by perceived stigma are internalized by suicide loss survivors to make them feel atypical in their grief. Findings on ways in which stigmatization impacts suicide bereavement might also generalize to populations facing other loss events.

Besides the commonly studied loss by suicide, other specific loss events have been associated with stigmatization including: (a) death from an overdose (Feigelman, Jordan, & Gorman, 2011), (b) divorce (Konstam, Karwin, Curran, Lyons, & Celen-Demirtas, 2016), (c) HIV-AIDS (Lee et al., 2002), (d) infertility (Whiteford & Gonzalez, 1995), (e) loss of identity (Gökler-Danışman et al., 2017), (f) pregnancy termination following the diagnosis of a fetal anomaly (Hanschmidt, Treml, Klingner, Stepan, & Kersting, 2018; Maguire et al., 2015) and (g) parasocial relations (Hoffner & Cohen, 2018).

Across these numerous domains, participants generally endorse more grief when they have experienced more stigmatization (Feigelman et al., 2011; Gökler-Danışman et al., 2017; Hanschmidt et al., 2018; Maguire et al., 2015). Furthermore, Maguire et al. (2015) identified broad themes contributing to stigmatized grief including self-blame, guilt, and isolation. Lee et al.'s (2002) examination of a population with HIV-AIDS expanded on Maguire et al.'s (2015) theme of isolation. Together, their findings imply that individuals who endorse high levels of internalized stigma also report their families to be less accepting, are not as likely to attend support groups, and less frequently seek out individuals with similar circumstances.

2.3 College Students' Grief Experience

2.3.1 Emerging adulthood. Within the United States, Erikson's (1950) individualistic model of development has been commonly endorsed to denote developmental stages. Whilst considering the current research's population, two developmental stages of Erikson's (1950) theory capture the college students' stage of emerging adulthood: (a) Identity vs. Role Confusion, ages 12 -18; and (b) Intimacy vs.

Isolation, ages 18 - 40. Arnett (2000) expanded Erikson's psychosocial model to include emerging adulthood as a category of development to represent the period following high school until late twenties. During this transition to adulthood, establishing and maintaining romantic relationships is a vital task (Arnett, 2000; Erikson, 1950; Kan & Cares, 2006) which is often seen within the college context. Emerging adulthood depicts the lengthening of late adolescence as individuals are taking longer to complete tasks compared to previous generations, such as focusing more on postsecondary education, waiting longer to marry, and having children at a later age (Arnett, 2000). Balk (2009) found that when emerging adults enter such novel environment such as college, they continue to search for identity through the creation of new bonds and attachments with romantic partners. Walsh, Harel-Fisch, and Fogel-Grinvalds (2010) suggest that failure to create meaningful and fulfilling relationships may lead to isolation, loneliness, or depression.

Furthermore, the period of emerging adulthood applies within cultural contexts where role exploration is extended because young adults are postponing adult responsibilities (Schlegel & Barry, 1991). Whereas of cultures where postsecondary education is less viable, the need for emerging adulthood as a category does not appear as salient (Arnett, 2000). Due to these findings, the researcher cautions generalizability of findings to college students within other cultures.

2.3.2 Grief in college. Emerging adulthood is a unique context where many individuals are transitioning to college. Cox, Dean, and Kowalski (2015) report that the number of grieving students is higher than previously claimed, suggesting 30 to 36% of college students are in their first year of bereavement and almost 60% of college students

experienced at least one loss since the start of college. Although grief and bereavement are vast fields, college students' experiences of grief have received little attention within the literature (Balk, 2001; Cooley et al., 2014; Servaty-Seib & Taub, 2010).

Grief in the context of college is an important occurrence to study because of the large impact mourning has on students' lives. Common symptoms include sleep disturbances, intrusive thoughts, feelings of depression and anxiety, changes in drug-use or eating behaviors, diminished academic performance, and endocrine and immune dysfunction (del Palacio-González et al., 2017; Field, 2013; Field et al., 2009). Although some of these symptoms are distilled from death related losses, college students often endorse similar grief symptoms when experiencing non-death related losses (Balk, 2001; Cooley et al., 2010; Gold, Miller, & Rotholz, 2001; Gold, Neururer, & Miller, 2000). In Cooley et al.'s (2010) findings, students experiencing non-death related losses specifically endorsed symptoms of isolation, anxiety, physical symptoms, and negative thoughts about the loss. Furthermore, participants were more likely to report non-death related losses as the most significant loss they experienced within 12 months. As a whole, these studies suggest there is a significant, understudied population of students grieving non-death related losses.

Considering Cooley et al.'s (2010) research, Cohen's (1999) early findings are perhaps unsurprising, while comparing college students' hypothetical grief responses between (a) death related and (b) non-death related losses, students expected they would feel comparable levels of distress between the two loss types. When students examined hypothetical non-death losses, they endorsed higher levels of disenfranchisement opposed to while considering death related losses. Specifically, students claimed for non-death

related losses, they expect to receive a lack of recognition from others and further asserted that they would be less likely to seek out support from professionals, family, or peers.

College students often identify the dissolution of an intimate partner relationship as a significant stressor in college (Cooley et al., 2010; Gold et al., 2001; Reyes-Rodríguez, Rivera-Medina, Cámara-Fuentes, Suárez-Torres, & Bernal, 2013). Specifically, in the context of breakups, college students identify negative physical and emotional responses including feelings of anxiety and depression, immune suppression, and psychopathology (Kiecolt-Glaser & Newton, 2001). Regarding cognition, students endorse higher levels of intrusive and negative thoughts which are significantly associated with breakup related grief (Boelen & Reijntjes, 2009). Following a breakup, reported closeness of the relationship, length of the relationship, and time since the dissolution of the relationship are suggested to have positive correlations to grief and distress levels (Field et al., 2009; Locker, McIntosh, Hackney, Wilson, & Wiegard, 2010; Robak & Weitzeman, 1998; Simpson, 1987).

2.4 Summary

Grief is a universal reaction to loss. People express grief in different ways depending on factors such as individual differences, the relationship an individual had to the lost entity, or cultural influences. Predominantly in U.S. society, certain losses are more readily perceived as grievable while others are likely to be disenfranchised (Doka, 2002, 2008). Considering losses that are more likely to be disenfranchised, the resulting invalidation and minimization from other people can lead to perceived stigmatization within the griever (Feigelman et al., 2011; Gökler-Danışman et al., 2017; Hanschmidt et

al., 2018; Maguire et al., 2015). The effect of stigma on grief has been primarily studied as it pertains to loss events such as death by suicide, death by HIV-AIDS, or pregnancy termination after diagnosis of fetal anomaly (Lee et al., 2002; Maguire et al., 2015; Scocco et al., 2017; Sveen & Walby, 2008; Young et al., 2012). Despite Horowitz et al.'s (2003) findings that a breakup may result in intense and prolonged periods of grief, further research has neglected to explore how perceived stigmatization interacts with the endorsement of grief after this specific type of loss. Given that developing intimate relationships is a vital task in emerging adulthood, such relationships are likely to be common. Since college occurs during the period of emerging adulthood and has a large impact on students' future, it is beneficial to the field to understand how breakups influence students' emotional, physical, and cognitive functioning during this stage.

2.5 Hypotheses

After considering previous research in the areas of grief, stigmatization, relationship closeness, and emerging adulthood, three hypotheses emerge.

1. Endorsement of increased relationship closeness will positively predict increased grief intensity while lower reports of relationship closeness will predict decreased grief intensity.
2. Endorsement of increased levels of perceived stigmatization will positively predict increased grief intensity while lower levels of perceived stigmatization will predict decreased grief intensity.
3. The interaction of reported closeness and perceived stigmatization better predicts the endorsement of grief than the two variables separately.

Chapter III

3. METHODS

3.1 Participants

Of 368 completed surveys, 254 participant responses (69.02%) fell within inclusion criteria of experiencing the dissolution of an intimate partner relationship in the past 24 months. The demographics of the sample pool are seen in Table 1. Eight (3.15%) participants identified as Latinx, 0 (0.00%) identified as African American/Black, 26 (10.24%) identified as Asian American, 178 (70.08%) identified as Caucasian, 2 (0.79%) identified as Native American/Alaskan Native, 0 (0.00%) identified as Pacific Islander, 4 (1.57%) identified as Middle Eastern/North African, 34 (13.39%) identified as Biracial/Multiracial, and 2 (0.79%) participants did not report on race or ethnicity.

In terms of gender composition, 165 (64.96%) participants identified as female, 86 (33.86%) identified as male, 2 (0.80%) identified as non-binary, and 1 (0.40%) participant declined to report gender. Participants represented six different colleges with the largest endorsement for the College of Liberal Arts (34.65%), followed by the College of Engineering (16.93%), and the College of Science and Mathematics (16.54%). The age of respondents varied between 17 and 28 years ($M = 18.57$, $SD = 1.095$) and most students were within their first year of college ($M = 1.38$, $SD = .735$).

3.2 Procedure

Once the study was approved by the Institutional Review Board, students accessed an online self-report battery that was completed in a single, 10 to 20 minute

session. Students were compensated with credit toward an undergraduate introduction to Psychology course. An informed consent (Appendix A) was provided followed by a four-question primer to prompt a specific past relationship. Questions included, (a) Have you experienced a breakup or end of an intimate partner relationship within the past 24 months?; (b) If there is more than one significant breakup or intimate partner relationship, consider the most prominent and meaningful one. How long ago did the relationship end?; (c) How long were you together with this partner?; and (d) If there is more than one significant relationship, how many have occurred within the past year?

3.3 Assessments and Measures

3.3.1 Inventory of Complicated Grief. (ICG; Prigerson et al., 1995; Appendix B) The ICG is an instrument to assess symptoms of complicated grief including bereavement-related anxiety, disbelief, and depression. In the inventory's creation, the researchers intended for all 19 items to be evaluated through a 5-point Likert Scale to assess for complicated grief or uncomplicated grief. Once added together, a score greater than 25 would equate to a "syndromal" level of grief with scores of 24 or lower equating to "sub-syndromal". The ICG has high internal consistency ($\alpha = 0.94$) with a test-retest reliability of 0.80 (Prigerson et al., 1995). The item-total correlations were all above 0.48. Furthermore, the original ICG's test-retest reliability was 0.80 during a six-month follow up with participants.

Researchers commonly modify ICG statements to apply to events such as loss of an intimate partner relationship, pet death, sibling loss due to cancer, and caregivers of patients in palliative care (Boelen & Reijntjes, 2009; Guldin, Vedsted, Zachariae, Olesen, & Jensen, 2012; Packman, Carmack, Katz, Carlos, Field, & Landers, 2014; Sveen,

Eilegård, Steineck, & Kreichbergs, 2014). Following the precedent of the previous researchers, the ICG used in the current study was modified similar to Boelen and Reijntjes' (2009) alteration of statements to assess feelings following the end of a romantic relationship. One such modification transformed, the statement 'I feel I have trouble accepting the death' to the more relevant phrasing 'I feel I have trouble accepting that this relationship is over'. Guided by Field, Diego, Pelaez, Deeds, and Delgado's (2009) deletion of one of the original ICG items—'I have pain in the same area of my body or have some of the same symptoms as the person who has died'—the current study omitted the same statement because it could not be adjusted to reflect a breakup. The 18 remaining items were rated on a 5-point scale ranging from 0 (Never or N/A) to 4 (Always). For each participant, a total ICG score was calculated which ranges from 0 to 72 with higher scores indicating increased grief intensity.

3.3.2 Grief Experience Questionnaire. (GEQ; Barrett & Scott, 1989; Appendix C) The GEQ is a self-report measure originally made up of 55 Likert-scale items which can be divided into eleven thematic subscales with an alpha of 0.79. Moreover, all psychometric properties were found to be satisfactory with regards to reliability coefficients and inter-item correlations which ranged from .28 to .53 (Bailey, Dunham, & Kral, 2000). As modeled by Pitman, Osborn, Rantell, and King's (2016) research, only one of the eleven subscales were implemented to measure participants' endorsement of perceived stigmatization. The singular, 10-item Stigmatization subscale of the GEQ assesses the experience of perceived stigmatization associated with grief intensity. Participants' responses to each item are rated using a 5-point Likert-scale, which when summed, produces a total score ranging from 10 to 50 with higher scores indicating

increased feelings of stigmatization (Feigelman, Jordan, & Gorman, 2011). Similar to Pitman et al. (2016), instead of using all eleven subscales, only the stigmatization subscale was implemented within the current study.

3.3.3 The Unidimensional Relationship Closeness Scale. (URCS; Dibble, Levine, & Park, 2012) The URCS is a 12-item self-report measure assessing closeness between two individuals. In creating the URCS, Dibble et al. (2012) found college students' endorsement of closeness in different types of relationships, including romantic couples, friends, family members, and strangers. Results suggest the scale is unidimensional with high reliability across relationship categories ($M \alpha = 0.96$). Additionally, Dibble et al. found both partners within a couple endorsed similar levels of closeness (intraclass correlation = .41). The URCS has been utilized to quantify closeness in various types of closeness: friendships in adults with autism, the role of disclosure in relationships, relationship risk factors for drug misuse, and family interactions within the palliative phase of cancer (Mazurek, 2014; Möllerberg, Sandgren, Swahnberg, & Benzein, 2017; Papp & Kouros, 2017). Each of the scale's 12 items are rated using a 7-point Likert scale between 1 (Strongly Disagree) and 7 (Strongly Agree). Participants' responses are averaged across the 12 items to create a single value between 1.0 and 7.0 with higher scores indicating the participant viewed the relationship as increasingly closer. For the purposes of this study, no adjustment to the URCS were made.

3.3.4 Demographic information. Demographic information was obtained at the end of the study. Participants were asked to report their age, year in college, academic major, gender, and race. To account for biracial/multiracial students, participants were able to check multiple boxes for race.

3.4 Statistical Analyses

To examine the relationships between variables, data were summarized using a comparison of means for categorical variables and bivariate correlation for continuous variables. Separate hierarchical regressions analyzed the three hypotheses relating to how grief intensity is impacted by the endorsement of relationship closeness (H₁), perceived stigmatization (H₂), and the interaction between closeness and stigma (H₃).

A forced entry method of multiple linear regression was calculated to predict grief intensity based on participants' experience of closeness and stigma. The covariates of (a) gender, (b) time since the end of the relationship, and (c) length of the relationship were entered into Block 1 of the regression. Once these covariates were entered into the model, closeness and stigma were entered into Block 2 during separate regressions. Block 3 was used to analyze the effects of the interaction between closeness and stigma. Statistical significance was established at an alpha level of .05.

Chapter IV

4. RESULTS

4.1 Descriptive Statistics

Among undergraduate students, 69.02% of respondents claimed to have experienced a breakup within the past 24 months. On average, breakups occurred 8.08 months prior to the survey ($SD = 6.15$ months) with the relationship lasting around 12.46 months ($SD = 10.88$ months). George and Mallery's (2003) standards for Cronbach's alpha denoted the internal consistency of each scale. For each of the three measures used in the current study, Cronbach's alpha revealed strong internal consistencies for the Inventory of Complicated Grief ($\alpha = .928$), the stigma subscale within the Grief Experience Questionnaire ($\alpha = .903$), and the Unidimensional Relationship Closeness Scale ($\alpha = .911$).

Preliminary analyses were conducted to assess the assumption of normality, multicollinearity, and linearity. As such, grief intensity had a moderate positive skew, with skewness of 1.153 ($SE = .15$) and kurtosis of .963 ($SE = .30$); a square root transformation was applied to grief intensity which decreased skewness and normalized the variable with a resulting skewness of 0.390 ($SE = .15$) and kurtosis -.475 ($SE = .30$). Going forward, the transformed variable for grief intensity will be used in all data analysis ($N = 254$).

Bivariate correlations were conducted to assess the relationship between the covariates, predictor variables, and grief intensity. The strength of each correlation is at

best, weak. Seen in Table 2, a significant negative relationship exists between time since the end of the relationship and grief intensity ($r = -0.28, p < .05$). Additionally, grief intensity appears to decrease as participants complete more years in college ($r = -0.2, p < .05$). The length of the relationship has positive relationships with both students' age ($r = .20, p < .05$) and year in school ($r = .15, p < .05$). The strongest relationship exists between age and year in school ($r = .82, p < .05$) which is expected considering many students progress through college around the same age. By comparing means of the discrete variables, results show that neither major ($\eta^2 = .165, \eta^2 = .027$), gender ($\eta^2 = .085, \eta^2 = .007$) or race ($\eta^2 = .119, \eta^2 = .014$) has a strong relationship with grief intensity nor do they appear to explain variation of grief intensity.

4.2 Multiple Regression Analysis

The covariates entered in Block 1 of the regression model explained 9.3% ($R^2 = .093$) of the variance within the proposed model. Compared to the variance explained by predictor variables, the covariates are not significant predictors. In other words, knowing the participants' gender, time since the relationship, and the length of the relationship has a similar predictive ability as unrecorded covariate data.

Once the covariates were entered in the regression model, closeness was introduced to the model which explained 22.6% of the total variance ($\Delta R^2 = .134, F(3, 248) = 18.055, p < .05$). In a separate regression, stigma was entered into the model which accounted for 43% of the total variance ($\Delta R^2 = .338, F(3, 248) = 46.624, p < .05$).

Seen in Table 3, the regression model suggests that closeness ($t = 6.53, \beta = .398, p < .05$) and stigma ($t = 12.08, \beta = .588, p < .05$) were significant contributors and predictors of the outcome variable. In other words, if effects from all other predictors are

held constant, for every 1.024-point increase in closeness, grief intensity increases by 0.604 points ($\beta = .398, p < .05$). Additionally, for every 7.820-point increase in stigma, grief intensity increases by 0.895 points ($\beta = .588, p < .05$).

Block 3 of the regression model analyzed the interaction between closeness and stigmatization. After controlling for the covariates and accounting for variance explained by the main effects, the interaction effect did not explain any further variance ($\Delta R^2 = .00$) within the model ($F(6, 245) = 45.672, p < .05$).

Chapter V

5. DISCUSSION

Just over sixty-nine percent of the 368 respondents that comprised the sample, experienced a breakup within the past two years. Assessing the prevalence of college students with a recent breakup is significant: The precise number of students experiencing a breakup was not found in either college student or bereavement literature. With the intention to examine grief after a breakup, three hypotheses emerged from grief literature. The first hypothesis was that an increase in perceived relationship closeness should increase grief intensity. Second, an increase in perceived stigmatization should increase grief intensity. Third, the interaction effect between endorsed relationship closeness and perceived stigmatization should better explain grief intensity compared to assessing each predictor variable separately. The results of this study supported the first two hypotheses but did not support the interaction effect ($1 - \beta = .87$).

5.1 Main Findings

5.1.1 Hypothesis one. The first hypothesis states that the endorsement of increased relationship closeness will positively predict increased grief intensity. After controlling for gender, time since the end of the relationship, and the length of the relationship, grief intensity was partially predicted by reported relationship closeness. These results are consistent with prior findings that the level of closeness within a relationship is a significant predictor of grief intensity following the end of the said

relationship (Bugen, 1977; Robak & Weitzman, 1998; Servaty-Seib & Pistole, 2007) and suggests that some people experience non-death related losses as grief producing.

Currently, the primary body of research examines relationship dissolution in terms of how individuals cope after a divorce or the subsequent effect divorce has on children (Lavner & Bradbury, 2012), whereas less attention is provided to non-marital, romantic relationships. This year, Pew Research Center (8 Facts About Love and Marriage in America, 2019) released a report on current dating and marriage trends in the U.S. Their findings suggest that compared to earlier decades, individuals are staying unmarried longer and the number of unwed couples living together has increased. Despite these recent shifts in relationship patterns, U.S. culture arguably considers marriage as the ultimate form of romantic relationships, in part, due to the inherent expectation that a marriage is everlasting. The idea of permanence via marriage perhaps makes it easier for people to accept grief after a divorce whereas non-marital relationships, such as college-age dating, may be viewed as practice before marriage and hence, less appropriate to grieve when they end.

The present findings suggest otherwise as respondents reported that the ending of their non-marital relationship was significantly associated to grief intensity. Considering the findings from Pew Research Center, as the U.S. moves away from the taboo of life partners without marriage and cohabitation before marriage, society may continue to move toward acceptance of historically non-traditional relationships. In turn, this might increase the perception that individuals experiencing a non-marital breakup can experience feelings of grief which would decrease the amount of disenfranchised grief from these losses.

5.1.2 Hypothesis two. The second hypothesis states that the endorsement of increased levels of perceived stigmatization will positively predict increased grief intensity. After controlling for the model's covariates, grief intensity was partially predicted by perceived stigmatization. The findings of this study indicate that grief resulting from the end of an intimate partner relationship does produce a perception that reactions from other people are stigmatizing. These conclusions are similar to the relationship between stigmatization and grief amidst suicide loss survivors. Because much of the current research focuses on stigmatization following a loss due to suicide (Hanschmidt, Lehnig, Riedel-Heller, & Kersting, 2016; Scocco, Preti, Totaro, Ferrari, & Toffol, 2017; Sveen & Walby, 2008; Young et al., 2012), stigmatization of other loss events has largely been unexplored. Within the current study, the impact stigmatization has on suicide bereavement was theorized to generalize to the college sample's perception of stigmatization following a breakup. The hypothesis was supported as data shows a moderate positive relationship between perceived stigmatization of a breakup and heightened grief intensity. The aim is not to compare the grief or stigma between loss due to suicide and loss from a breakup, instead the goal is to indicate that a breakup can also produce perceived stigmatization similar to the most commonly studied loss event.

A key consideration when interpreting the present results is the premise that the intersection of diverse identities could exacerbate perceived stigmatization. For instance, individuals in the LGBTQ community might have increased feelings of grief, in part, due to concurrent stigmatization based on identity. Among this population, it is well established that perceived stigmatization is associated with negative health outcomes, such as depression and anxiety (Felner, Dudley, & Ramirez-Valles, 2018; Kaniuka et al.,

2019). Moreover, the LGBTQ population can experience double stigma where same-sex partnerships may not be recognized, which is a common source of disenfranchised grief (Doka, 2002, 2008), while also experiencing discrimination based on sexual orientation or gender identity (Piatczanyn, Bennett, & Soulsby, 2016). Other marginalized social identities may also contribute to stigmatizing encounters after a breakup. Such identities include students that identify as people of color, disabled, members of non-Christian faiths, or first-generation students. Ultimately, understanding how intersectionality impacts perceived stigmatization and grief intensity would be beneficial in creating a more nuanced and inclusive interpretation of grief and mourning.

5.1.3 Hypothesis three. The third hypothesis claims that the interaction of reported closeness and perceived stigmatization better predicts the endorsement of grief than the two variables separately. Despite finding the main effects significant, the interaction effect did not demonstrate significance and furthermore did not explain additional variance. The interaction would have suggested that stigmatization on grief intensity varies at different levels of endorsed closeness. In other words, when students' close romantic relationships end, their feelings of stigma appear different compared to couples who did not view the relationship as close. Because the main effects account for a large portion of variance in the model, a possible explanation infers that the interaction effect was not found to be significant due to a smaller amount of remaining variance.

5.1.4 Covariates and demographics of the sample. Within the proposed model, gender, race, and the time spent in the relationship do not explain a significant amount of variance in grief intensity. In terms of gender, studies of grief following a breakup found mixed results with some researchers asserting gender is a predictor for grief outcomes

due to influences from socialization (Burden et al., 2016; Worden, 2018) whereas others did not find gender as a predictor (Pitman, Rantell, Marston, King, & Osborn, 2017; Stroebe, Zech, Stroebe, & Abakoumkin, 2005).

Contradictory to numerous earlier studies (Locker, McIntosh, Hackney, Wilson, & Wiegard, 2010; Robak & Weitzman, 1998; Simpson, 1987), the current study did not find time spent in the relationship to predict grief intensity (Sbarra & Emery, 2005).

These findings indicate that the length of the relationship does not speak to feelings of closeness or the quality of a relationship. There are many reasons individuals stay in unsatisfying relationships, such high investment or undesirable alternatives (Finkel & Baumeister, 2019). Within such unsatisfying relationships that happen to be long-term, feelings of closeness may be low which would decrease relationship length's predictive ability in terms of grief predictors.

Consistent with Field, Diego, Pelaez, Deeds, and Delgado's (2009) findings, the strongest relationship among variables exists between grief intensity and time since the breakup ($r = -.28, p < .05$), which would signify that grief becomes less intense over time. Without comparison to other correlations, the relationship between time and grief intensity is weak and may slightly support the belief that time transforms grief into a less raw and painful experience. More likely, the weak correlation suggests that within the college population, either 24 months is not enough time to lessen grief intensity or it points toward the idea that in general, time alone is not a strong mediator for grief intensity. As such, time might be a piece of getting through grief (Saltzman, 2019); however, more likely is the idea that the bereaved heal over time as a function of quality

social support, individual factors such as adaptive coping skills, and personal history of dealing with loss and grief (Worden, 2018).

5.1.5 ICG within the current sample. Students endorsed an average of 15.36 points on the Inventory of Complicated Grief ($SD = 12.53$). For context, Prigerson et al. (1995) denoted that a total score of at least 25 would equate to a syndromal level of grief with scores of 24 or lower are considered sub-syndromal. Prigerson et al. designated these thresholds by comparing quality of life measures between various cutting points above and below groups. Furthermore, because one unrelated assessment item was removed, the cutoff of 25 points would likely change to a lower number. Although the current study is not using ICG scores categorically, comparing the study's average ICG score to the syndromal score does simply that participants' experience of grief would, on average, not be considered as complicated grief. However, since the inclusion criteria asked students to include breakups within the past 24 months, if the time frame was removed, higher scores of grief and stigmatization may be observed.

5.2 Limitations of the Present Study

The current study has several potential limitations. Concerning sampling practices, a potential limitation may be the self-selection technique used to recruit participants. A few biases arise from self-selection data including the possibility that respondents will not accurately represent the target population. Initially, students had the opportunity to choose from a plethora of various on-line studies. For those who did select to participate in grief from a breakup as a research topic, they might have been more inclined to share their experience compared to those who did not choose to participate in the study. Additionally, students may have been more inclined to participate due to the

shorter time-requirement which is listed before participating in various studies. Another limitation may include the utilization of self-report measures without a clinical interview to assess symptomology. While self-report methods allow large samples to be studied and easily replicated, participants might be subject to recall bias or social desirability bias which can create misleading results that do not accurately capture their experience (Althubaiti, 2016; Herzog & Bowman, 2011).

Another limitation may include the lack of questions assessing relationship characteristics including types of relationships, such as monogamous, long-distance, or casual relationships, who initiated the breakup, if the relationship was established before or during college, or if the relationship was same sex, heterosexual, or other. In assessing these relationship features, this research could have provided further context and nuance to how results may be generalized. For instance, denoting the coupleship as same sex, heterosexual, or other, could provide relevant data to potentially exacerbated feelings of stigmatization from both the breakup and possible experienced stigma relating to same sex relationships.

Lastly, a large potential limitation is the homogeneity of the current sample with little variance from White American, cisgender, female, undergraduates at a West Coast institution. As such, the study may have difficulty generalizing to a study at different universities either, domestic or international, where the participant pool is representative of a broader range in terms of gender identification, racial identification, culture, socioeconomic status, and geography. Furthermore, as the current sample was predominately female (64.96%), the effect size might have been too small to assess differences in gender due to a decrease in power. Another concern of effect size arises

when examining the sample's underrepresented racial groups, such as Native American/Native Alaskan ($n = 2$) or Middle Eastern/North African ($n = 4$). Due to the limited representation of each group, it is unreasonable to ascertain between-group differences.

Despite these potential limitations, the study's findings contribute to the body of work within disenfranchised grief as it applies to an individualistic, U.S. sample (Doka, 2002, 2008). Students' loss of intimate partner relationships are sources of non-death related grief that is less commonly studied. Furthermore, examining how perceived stigmatization affects college students' grief after a breakup was not found amid the existing literature. Increasing the conceptualization of grief to include the less frequently identified loss events like the dissolution of an intimate partner relationship could decrease responses and societal perspectives that are both stigmatizing and invalidating.

5.3 Future Directions

Considering the sample population is from a Californian university, future studies might examine how closeness and stigmatization impact grief intensity outside of a U.S. based model. Exploring how other cultures conceptualize grief norms could better inform variance in how individuals respond to the end of an intimate partner relationship. Furthermore, exploring how collectivism impacts the perception of relationships and bereavement would be more inclusive to societies that do not endorse individualism. Rosenblatt's (2017) cross-cultural study found cultural norms to impact mourning practices following a death. Likely, there would be heightened variance of who, mourning rituals are practiced with and the extent to which bereavement is openly displayed to others. Building on Rosenblatt's research, understanding how culturally sanctioned

mourning practices impact perceived stigmatization of various sources of loss would be beneficial to understanding how grief intensity is affected by various aspects pertaining to culture.

Another consideration for future research is the influence of social identity facets outlined by Hays' (1996) ADDRESSING model on grief intensity from a breakup. To determine how intersectionality might influence college students' grief experience, further examination of specific identities may include sexual orientation, gender identity, ability, national origin, race, socioeconomic status, or level of acculturation. Since previous studies found emerging adulthood to be less applicable in cultures where postsecondary education is less viable (Arnett, 2000), future research could extend the participant pool by selecting participants that are not involved in postsecondary education. Ultimately, understanding how closeness and perceived stigmatization are influenced by other identities may be beneficial in facilitating a more inclusive and exhaustive perspective on grief and mourning.

In previous studies of college students, initiator status, or who ended the relationship, was proposed to impact post-breakup emotions (DeLecce & Weisfeld, 2016; Barutçu Yildirim & Demir, 2015) and the likelihood of quickly finding another partner (Cohen & Finzi-Dottan, 2012). Within the context of this study, initiator status could influence the level of closeness individuals perceived their previous relationship to contain. Typically, initiators of a breakup express significantly less distress than individuals who were non-initiators (Boelen & Van den Hout, 2010; Bronfman, Ladd-Luthringshauser, Goodman, & Sockol, 2016). These findings imply that students who endorse higher levels of grief might not have initiated the breakup. To better understand

these correlations, the impact distress has on recall bias regarding closeness of the past relationship might be further studied. Additional exploration of initiator status' impact of feelings on grief and closeness would add more nuance to the literature on breakups in emerging adulthood.

The final consideration of potential research on emerging adults and breakups is the intersection of technology and the suddenness of the breakup. Advances in technology and social media have transitioned in-person breakups to events that do not require seeing or hearing the other person. Scholars have identified suddenness as a predictor for distress and depression resulting from a breakup (Lukacs & Quan-Haase, 2015; Robak & Weitzman, 1998) and as technology has become widespread, the more recent technique of ghosting has become a common occurrence among emerging adults. Ghosting is when an initiator leaves the relationship without notice and ends all further contact while leaving the other partner with limited answers, confusion, and feelings of rejection (LeFebvre et al., 2019). Exploring the interaction between the suddenness of a breakup and in-person breakups, compared to ones over social media or text messaging, would provide further understanding to how technology impacts breakups for modern emerging adults.

5.3.1 Clinical implications. As stated previously, results of the current study suggest about seventy percent of the sample have experienced the end of an intimate partner relationship with many participants endorsing feelings of distress and grief. Further sampling nation-wide and internationally would increase the generalizability of findings to other populations. Additionally, sampling other universities would be beneficial to capture differences in campus culture. As suggestions in utilizing the results

from this research are discussed, it is important to consider the participant pool's demographics to provide a scope for whom the findings are applicable to.

A significant consideration for clinicians is the ability to consider differential diagnosis between depression or anxiety and grief following a breakup in college. Misinterpreting normative grief reactions as a more severe mental health concern may lead to over diagnosing and the subsequent perception of invalidation. Because individuals in emerging adulthood are already often met with stigmatization, denial, and discouragement, understanding that a breakup can look similar to grief experiences is important to therapeutic applications. Framing a breakup through a conceptualization of grief would allow clients to put feelings into words to help regulate emotions (Rosenblatt, 2017; Torre & Lieberman, 2018), and increase feelings of validation and universality. Using a grief lens would assist counselors in addressing potential stigmatization from a breakup and could therefore help clinicians identify other community or social supports a client may need. For instance, the ability to view the resulting distress as a breakup instead of conceptualizing it as depression might direct clinicians to initially refer students to a general clinic opposed to an organization specializing in depression or suggesting they see a psychiatrist for medication.

Findings suggest that clinicians at institutions and in the private sector have a responsibility to increase sensitivity to college students' experience of grief following a breakup. Understanding the challenges unique to students in college can direct counselors toward methods to support students in improving academic performance and institutional belonging which in turn would decrease the likelihood of dropping out of college (Cupit, Servaty-Seib, Tedrick Parikh, Walker, & Martin, 2016; Miller & Servaty-Seib, 2016). As

universities ameliorate students' distress and grief, this would allow students to continue attending college while simultaneously exploring their breakup which could benefit universities that aim to increase retention rates and student success. As such, increasing university-based mental health programs may be beneficial to students and the institution. Because mental health services within universities are often underfunded with limited resources, college-based support groups could provide a way to serve many students at once. This could be a feasibly cheaper and less time-consuming response to address a mental health concern among college students. While not all students want or require mental health support, offering support groups for individuals following a breakup could provide validation, universality, and connection among peers. As participants within the study were on average within their first year of enrollment, it may be beneficial to provide particular attention to first-year students. For such students in the transition to college, they may be feeling homesick, alone, and without their social group, which may exacerbate grief intensity following a breakup.

5.4 Conclusion

Grief is a normal response to loss that generates a variety of consequences based on features such as individual differences in coping skills or the suddenness of the loss. Specific losses within the United States, like the death of a parent or a divorce, are often met with increased validation and understanding of the resulting grief response, whereas other losses such as a non-marital breakup, are prone to be disenfranchised (Doka, 2002, 2008). Despite the suggested connection from previous studies (del Palacio-González, Clark, & O'Sullivan, 2017; Field et al., 2009, Servaty-Seib & Pistole, 2007), little research has examined emerging adults' grief reactions following the dissolution on an

intimate partner relationship. Additionally, though the effect of stigmatization on grief has been primarily studied as it pertains to loss events such as death by suicide (Feigelman, Jordan, & Gorman, 2011; Gökler-Danışman, Yalçınay-İnan, & Yiğit, 2017; Hanschmidt, Treml, Klingner, Stepan, & Kersting, 2018; Maguire et al., 2015), similar stigmatization of the griever may generalize to the end of an intimate partner relationship among college students. Given that within emerging adulthood creating and maintaining relationships is a key developmental goal, understanding reactions following the end of romantic relationships is vital to minimize symptoms, including depression, anxiety, increased distress, or intrusive thoughts (Cupit et al., 2016; Davis, Shaver, & Vernon, 2003; del Palacio-González et al., 2017; Field et al., 2009; Wrape, Jenkins, Callahan, & Nowlin, 2016).

The purpose of this study was to determine the effects closeness and stigmatization have on grief following the end of an intimate partner relationship. Initial hypotheses asserted that endorsed closeness of the past relationship would predict grief intensity. Also perceived stigmatization would positively predict grief intensity. The data revealed the main effects to be supported while the interaction effect between closeness and stigmatization was not significant. Due to the homogeneity of the sample in terms of race, education and gender identification, the study's most significant limitation may be the concerns of generalizability to individuals who do not identify as White and female amidst postsecondary education. Future studies can overcome limitations of generalizability by replicating the design with a more diverse sample outside of California. Furthermore, the study's results facilitate understanding and compassion toward the end of a romantic relationship for emerging adults. Expanding grief and

bereavement literature to encompass non-death related losses should not diminish death related losses but instead, could to bring awareness to sources of grief that are underappreciated and understudied.

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Table 1

Demographic Characteristics of Participants

Demographic Characteristic	<i>n</i>	<i>M</i> or %	<i>SD</i>
Gender			
Female	165	64.96	
Male	86	33.86	
Non-binary	2	0.80	
Not specified	1	0.40	
Age		18.57	1.10
Year in college		1.38	0.74
Race or Ethnicity			
Latinx	8	3.15	
Asian American	26	10.24	
Caucasian/White	178	70.08	
Native American/Alaskan American	2	0.79	
Middle Eastern/North African	4	1.57	
Biracial/Multiracial	34	13.39	
Not specified	2	0.79	
College			
Agriculture, Food and Environmental Sciences	36	14.17	
Architecture and Environmental Design	2	0.08	
Business	38	14.96	
Engineering	43	16.93	
Liberal Arts	88	34.65	
Science and Math	42	16.54	
Not specified	5	1.97	

Note. Demographics are representative of students within inclusion criteria. Regarding race, no participants identified as African American/Black or Pacific Islander. *N* = 254.

Table 2

Bivariate Correlations Between Grief Intensity and Predictive Variables

Predictor	1	2	3	4	5
1. Time since end of relationship					
2. Length of relationship	.01				
3. Age	.11	.20**			
4. Year in school	.17**	.15*	.82**		
5. Grief	-.28**	.11	-.13*	-.20**	
<i>M</i>	8.07	12.46	18.57	1.38	15.36
<i>SD</i>	6.19	10.88	1.10	.74	12.53

Note. $N = 254$.

* $p < .05$. ** $p < .01$.

Table 3

Regression Analysis Summary for Variables Predicting Grief Intensity

Variable	B	SE B	β	95% CI
Constant	4.31	.31		[3.70, 4.92]
Covariates				
Gender	-.15	.19	-.05	[-.51, .22]
Time in relationship	.02	.01	.12	[-.00, .03]
Time since end of relationship	-.07	.02	-.28	[-.10, -.04]
Predictors				
Closeness	.60	.09	.40	[.42, .78]
Stigma	.11	.01	.59	[.10, .13]
Closeness x stigma	.00	.01	.15	[-.01, .02]

Note. $N = 254$. CI = confidence interval.

Appendix A

Informed Consent to Participate in a Research Project

A research project reviewing response styles to a widely used self-report grief assessment being conducted by the primary investigator Jennifer E. Reimer and Dr. Aaron R. Estrada as Faculty Advisor within the Department of Psychology and Child Development at Cal Poly, San Luis Obispo. The purpose of the study is to explore grief that results from the dissolution of an intimate partner relationship.

You are being asked to take part in this study by completing the battery of questionnaires. We ask that you complete these surveys in as open and honest a fashion as possible so that you might provide the most accurate representation of yourself and various aspects of your identity, despite your participation being completely anonymous. Your participation will take approximately half an hour to 1 hour and your answers will be maintained anonymously. Please be aware that you are not required to participate in this research and you may discontinue your participation at any time without penalty. You may also omit any items on the questionnaires you prefer not to answer.

The possible risks associated with participation in this study include minor psychological or emotional discomfort in responding to the questionnaire items. If you should experience psychological or emotional distress from participating in this study, please be aware that you may contact Cal Poly's Health & Counseling Services at (805) 756-1211 or on site at Building 27 Room 135. You may also email the researcher at jereimer@calpoly.com or call Dr. Aaron Estrada, Faculty Advisor (858)756-2125 for assistance.

Your responses will be provided anonymously to protect your privacy. The central potential benefit associated with the study is that your participation will provide information that may add to our understanding of how grief arises from the dissolution of an intimate partner relationship. As an incentive for participation, your PSY 202 course instructor will offer you course credit.

If you have questions regarding this study or would like to be informed of the results when the study is completed, please feel free to contact Jennifer E. Reimer at jereimer@calpoly.edu. To be clear, the results that will be available and discussed are those of the combined research participants. No individual feedback on individual surveys and assessments will be offered. This would not be possible in any case as you will not be able to be linked in any way with the packet you complete. If you have questions or concerns regarding the manner in which the study is conducted, you may contact Dr. Michael Black, Chair of the Cal Poly Institutional Review Board, at (805) 756-2894, mblack@calpoly.edu, or Dr. Dean Wendt, Dean of Research, at (805) 756-1508, dwendt@calpoly.edu.

If you agree to voluntarily participate in this research project as described, please indicate your agreement by completing the questionnaires and returning them to the researchers. Please retain this consent cover form for your reference and thank you for your participation in this research.

Appendix B

Inventory of Complicated Grief

Please check the boxes that best describe how you feel, where **never** is taken to mean less than once monthly, **rarely** means more than once monthly but less than once weekly, **sometimes** more than weekly but less than daily, **often** about once a day, and **always** means more than once a day.

		0: Never/ N/A	1: rarely	2: sometimes	3: often	4: always
1	I think about my past relationship/ partner so much that it's hard for me to do the things I normally do.					
2	Memories of my past relationship/ partner upset me.					
3	I cannot accept the loss of my past relationship/ partner.					
4	I feel myself longing for my past relationship/ partner.					
5	I feel drawn to places and things associated with my past relationship/ partner.					
6	I can't help feeling angry about the loss of my past relationship/partner.					
7	I feel disbelief over what happened.					
8	I feel stunned or dazed over what happened.					
9	Ever since the loss of my past relationship/ partner, it is hard for me to trust people.					
10	Ever since the loss of my past relationship/ partner. I have lost the ability to care about other people or I feel distant from people I care about.					
11	I go out of my way to avoid reminders of my past relationship/ partner.					
12	I feel that life is empty without my past relationship/ partner.					
13	I can hear the voice of my past partner.					
14	I see my past partner as if they were still present today					
15	I feel that it is unfair that I no longer have my past relationship/ partner.					
16	I feel bitter over the loss.					
17	I feel envious of those who have not had the same loss.					
18	I feel lonely a great deal of the time ever since the loss my past relationship/ partner.					

Prigerson, H. G., Maciejewski, P. K., Reynolds, C. F., III, Bierhals, A. J., Newsom, J. T., Fasiczka, A., ... Miller, M. (1995)

Appendix C

Grief Experience Questionnaire, Stigma Subscale

Please check the boxes that best describe how you feel, where **never** is taken to mean less than once monthly, **rarely** means more than once monthly but less than once weekly, **sometimes** more than weekly but less than daily, **often** about once a day, and **always** means more than once a day.

Since the end of your prior relationship how often did you...

		1: never	2: rarely	3: sometimes	4: often	5: always
1	... feel like a social outcast?					
2	... feel like no one cared to listen to you?					
3	... feel that friends or neighbors did not offer enough concern?					
4	... feel avoided by friends?					
5	... think people were gossiping about you or the relationship?					
6	... think that others didn't want you to discuss the end of the relationship?					
7	... feel somehow stigmatized by the loss of the relationship?					
8	... feel like people were probably wondering about what kind of problems you and your past partner had?					
9	... think that people were uncomfortable offering their condolences to you?					
10	... feel like the breakup reflected negatively on you?					

Barrett, T. W., & Scott, T. B. (1989)