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A GROUNDED THEORY OF HOW FACEBOOK FACILITATES
CONTINUING BONDS WITH THE DECEASED

Section A: A Systematic Literature Review of the Relationship Between
Continuing Bonds and Grief
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Summary

Section A was a literature review which synthesised and critiqued literature around the relationship between continuing bonds and adaptation to bereavement. The review found that evidence of a relationship between continuing bonds and adaptation to bereavement was inconsistent and involved many mediating factors. Implications for clinical practice were that clinicians should review the helpfulness of a continuing bond on an individual basis, keeping these factors in mind. Further research is indicated to more clearly separate the measures of grief and continuing bonds, and an advancement of the research into how bonds are also being continued online.

Section B used grounded theory to analyse data from Facebook pages and interviews with bereaved Facebook users, to explore and propose a theory for how bonds with the deceased were continued through the use of Facebook. A theoretical model was developed suggesting that those who engaged with Facebook following a bereavement, in the context of social support, may be involved in individual and collective processes. These helped to maintain, and even transform, the connection with the deceased. The findings contribute to the literature and provide a framework which could be used by clinicians to bring discussions around Facebook use into their clinical practice.

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MAJOR RESEARCH PROJECT

Section A: Literature Review

A Systematic Literature Review of the Relationship Between Continuing Bonds and Grief.

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Abstract

The continuing bonds model posits that a person maintaining an ongoing connection with the deceased is a common component of bereavement (Klass et al., 1996). There is a debate about whether or not continuing bonds are adaptive in a grieving process, but there has been no systematic review of the literature in this area. This review therefore aimed to synthesise and critique the empirical published literature to answer the question: What do we know about the relationship between continuing bonds and adaptation to bereavement? A literature search was conducted using three databases: PsycInfo, Web of Science, and PubMed. A total of 16 studies were included. These were a mixture of qualitative and quantitative studies with cross-sectional and longitudinal methodologies. They were critiqued with the aid of quality appraisal tools. The review found that evidence of a relationship between continuing bonds and adaptation to bereavement was inconsistent and involved many mediating factors. Implications for clinical practice were that clinicians should review the helpfulness of a continuing bond on an individual basis. Recommendations for future research include clearer separation of the measures of grief and continuing bonds, and an advancement of the research into how bonds are also being continued online.

Keywords: continuing bonds, bereavement, grief, adaptive.

Introduction

'The question of how humans both hold on and let go of those who have died is a worthwhile, and a grand problem in science. To a great extent, it still lies before us unsolved' (Klass, 2006, p. 857).

Grief

There are a growing number of bereaved people in the UK. Due to population growth and an aging population, the 600,000 deaths per year is expected to rise significantly over the next 20 years (Office for National Statistics, 2019). Bereaved relatives, friends and communities mourn these deaths. Most people will suffer a bereavement within their lifetime, and, in that sense, it can be viewed as a normal human experience. However, adjustment to bereavement varies substantially between individuals and cultures (Stroebe et al., 2007). For many there may be a period of intense suffering, with an increased risk of developing mental and physical health difficulties. This results in greater use of mental and physical healthcare services and a higher risk of mortality (Stroebe et al., 2007). Although there are dedicated services in the UK for bereavement therapies, such as Cruse Bereavement Care (National Health Service, 2019) many service users seen in other parts of the healthcare services will have also experienced bereavement. Therefore, working clinically as a psychologist, it is important to keep in mind that for service users seeking help, an experience of bereavement may be contributing to their mental health difficulties to a lesser or greater extent. A better understanding of grieving processes may help clinicians to be aware of this as a relevant issue in mental health services.

Grief is defined as 'a primarily emotional (affective) reaction to the loss of a loved one through death' (Stroebe et al., 2001, p. 6) and can result in psychological and physical manifestations. Mourning is 'the social expression or acts expressive of grief that are shaped by the practices

of a given society or cultural group' (Stroebe et al., 2001, p. 6). Grief reactions following a bereavement are referred to using various terminology, to classify a 'normal' grief reaction from one that may be 'complicated', 'prolonged' or 'unresolved' (Field & Filanosky, 2010). Estimates of the prevalence of complicated grief vary widely, which may partly depend on how it is defined and measured. A representative study in the USA reported 3.7% of the general sample, and 6.7% after a 'major' bereavement met the threshold for complicated grief (Kersting, 2011). Risk factors for developing complicated grief included being over 61 years old, female, having a lower income and having lost a child or spouse.

There is no accepted diagnostic category for grief, however some have been proposed. Prolonged grief disorder was suggested for the eleventh revision of the International Classification of Diseases (Maercker et al., 2013). This was defined as persistent and pervasive yearning or longing, or a persistent preoccupation with the deceased that extended for a period beyond social and cultural norms (at least six months) and was severe enough to cause significant impairment in functioning (Maercker et al., 2013). Persistent complex bereavement disorder was proposed in an appendix of the fifth revision of the Diagnostic and Statistical Manual of Mental Disorders (APA, 2015) and referred to experiencing symptoms of separation distress (such as yearning), reactive distress and social or identity disruption for at least six months following the loss. Researchers argued that there was no substantive difference between the diagnostic entities of prolonged grief disorder and persistent complex bereavement disorder (Maciejewski et al., 2016), and the tests for both of them were almost entirely derived from the Inventory of Complicated Grief (Prigerson et al., 1995).

Shortly before the completion of this paper, the global COVID-19 pandemic reached the UK. It resulted in an unprecedented policy of 'social distancing' and national quarantine. This will

undoubtedly change to the way in which people grieve for many reasons, including the restrictions preventing visits to those who are dying, postponement of memorials or replacement with 'virtual' ones, disruption to rituals and grieving in physical isolation from others (Cummins, 2020; LeMotte, 2020; Turner & Evans, 2020). Future research and clinical practice around grief will need to be aware of this.

Continuing Bonds

One way to understand grief is the 'continuing bonds' model (Klass et al., 1996). This posits that a person maintaining an ongoing connection with the deceased is a common and normal component of bereavement (Klass, 2006; Klass et al., 1996). Research found that even 20 years post-loss, widowed participants continued to think about their spouses weekly and have conversations with them (Carnelley, 2006). This change in direction of bereavement research, was said to be in response to the dominance of Western bereavement theories during the twentieth century which had assumed that grief in which the bereaved did not sever ties with the deceased was indicative of pathology (Klass et al., 1996). Continuing bonds was not a novel concept and had likely existing throughout history (Walter, 2018). However, the introduction of the term into Western bereavement research was innovative and resulted in a shift in theories of bereavement, and a widespread acceptance of continuing bonds as part of psychological models (Klass & Steffen, 2018).

Continuing bonds expressions describe how this connection can be expressed and they come in wide variety of forms (Root, 2014). For example, people may reminisce about the deceased through talking about them with others, keeping their possessions or looking at photographs. They may talk aloud to the deceased, seek guidance and write letters to them. People may have hallucinatory experiences involving the deceased, may sense their presence, or have dreams

about them (Field et al., 2005). They may feel connected to the deceased in other ways, by internalising the qualities, beliefs or values of the person.

In recent years, online platforms have been used as a way of continuing bonds with the deceased. These platforms include memorial websites (Roberts, 2006) and social networking sites (Kasket, 2012). This has created new ways to continue bonds, for example visiting a person's profile page (Blower & Sharman, 2019) or joining an online group dedicated to the memory of the person (Kasket, 2012). However, the review will not focus on this element.

Attachment Theory

There are differing views on how continuing bonds and attachment theory intersect. In regard to Bowlby's (1980) approach to continuing bonds, there are interpretations of his work that fall in favour of both the adaptivity of retaining, and of relinquishing bonds (Field et al., 2005). Assuming that the goal to regain physical proximity to the deceased is relinquished over time, then 'excessive' use of certain continuing bonds expressions could be interpreted as a failure to do this. For example, visiting places related to the deceased at a later point after death may indicate that the person is still trying to regain the physical proximity and has failed to revise their working model of attachment to the deceased (Field et al., 2005). However, Klass (2006) commented that this does not explain people visiting graves for decades after the death.

According to attachment theory, proximity seeking should become more prominent when a person is under stress of threat. Therefore, if evoking a representation of the deceased serves an attachment function of providing felt security when under stress, use of continuing bonds as a way of coping could be effective in reducing stress (Field & Friedrichs, 2004).

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Continuing bonds expressions that accommodate acceptance of the permanence of the physical separation, such as using the deceased as a role model, were thought to relate to a later reorganisation phase and were seen to be adaptive (Field, 2006). Therefore, from an attachment perspective, continuing bonds should not be treated as unidimensional, but rather that their relation to grief resolution be seen as contingent on the type of expression (Field et al., 2005).

Meaning Reconstruction

Some researchers claim that 'a central process in grieving is the attempt to reaffirm or reconstruct a world of meaning that has been challenged by loss' (Neimeyer & Hooge, 2018, p. 73). Not all experiences of bereavement will necessarily entail a search for meaning. For example, if a bereavement involved the loss of an elderly grandparent, and this death fitted within a narrative the bereaved held of how life is, then it may not challenge any assumptions. However, in other scenarios, if for example a death was sudden, premature or took away a central figure on whom someone was dependent, search for meaning could become very important.

The processes are described as meaning reconstruction and are categorised into sense making, benefit finding, and identity change. Sense making is when someone may need to make sense of a loss in practical, personal, existential or spiritual terms (Neimeyer, 2001). Benefit finding is when someone is able to find some sort of 'silver lining' within the experience of loss. Finally, identity change is when someone is able to reorganise one's identity in the wake of the loss (Gillies & Neimeyer, 2006). Research reported that meaning reconstruction moderated the distress following a bereavement, and that higher levels of distress were associated with not having made sense of a loss (Neimeyer et al., 2006). This can result in constructing a new narrative for life, that carries forth aspects from the past relationship with the deceased into the

future (Neimeyer, 2001), which closely links with internalised continuing bonds. Meaning making also occurs within the context of culture, drawing on themes and beliefs available within a culture in order to attribute meaning to a loss. For example, the cultural rituals that occur following a loss, may aid personal reconstruction of meaning as well as reintegration into an altered social world (Neimeyer, 2001).

Religious, Spiritual and Cultural Beliefs

Klass (2006) highlighted the need to include community, cultural, and political narratives in our understanding of continuing bonds to avoid the danger of 'building theory that applies to only a small portion of one population in one historical time' (p. 843). However, the continuing bonds literature has been criticised in general for its lack of consideration of religious and spiritual beliefs (Benore & Park, 2004; Root & Exline, 2014). Karydi (2018) reported that the second most significant predictor of continuing bonds was whether the participants held religious or spiritual beliefs. These beliefs, particularly about an afterlife and the existence of a soul, are inherent in some of the continuing bonds expressions. For example, when sensing the presence of the deceased, and communicating with the deceased, there is presumably some belief that the deceased person continues to exist. Field (2006) described a person holding these beliefs but still recognising that the relationship with the deceased was qualitatively different to prior to the death. Even within rituals were the bereaved believes that the spirit of the deceased has an influence on, or can be influenced by, the bereaved, there is still a clear distinction between the living and the deceased.

There is also a role for these beliefs in shaping the meaning of the continuing bond. Whether or not it fits within a person's dominant meaning system may be related to its adaptivity (Field et al., 2005). For example, hallucinatory experiences may be interpreted as evidence of the soul

continuing to exist after death, and if these fit within pre-existing beliefs, they may be experienced as comforting rather than incompatible with beliefs and distressing (Field et al., 2005). Researchers have studied particular groups to develop specific understandings of how continuing bonds may manifest (Boulware & Bui, 2016; Hussein & Oyebode, 2009; Klass, 1996a). Spiritual beliefs have also been studied in the context of a particular type of loss, for example those bereaved by suicide (Jahn & Spencer-Thomas, 2018).

Continuing-Relinquishing Bonds Paradigm

Despite the growing consensus that continuing bonds are a normal aspect of grief, there is still ongoing debate within Western mental health research about how 'adaptive' they are, and whether they help or hinder a grieving process (Klass & Steffen, 2018). This is referred to as the continuing-breaking bonds controversy (Stroebe & Schut, 2005), the continuing-relinquishing bonds paradigm (Ho & Chan, 2018) or causality thesis (Klass, 2006). Different models of grief fall on different sides of this debate. Many older models 'carry a strong notion of relinquishing bonds' (Ho & Chan, 2018, p. 131), such as Freud's (1917) grief work hypothesis and Worden's (1982) task model. Whereas some of the newer models include the continuing of bonds with the deceased within their conceptualisation of a grieving process. The two-track model (Rubin, 1981) describes the process of loss as occurring along two 'tracks', the first being the impact on the person's biopsychosocial functioning, and the second the continuation and transformation of their relationship with the deceased. Similarly, in the dual process model of coping with bereavement (Stroebe & Schut, 1999), grief involves oscillating between loss-oriented and restoration-oriented coping. For example, making sense of the death and a new world without the deceased, but also forming a continuing bond.

However, continuing bonds theorists have stated that they are not claiming that continuing bonds necessarily result in better adjustment to bereavement (Klass, 2006). Although they are included in models of grief, Klass et al. (1996) suggested that 'we need to be open to both the positive and negative consequences of this activity' (p. 72). Klass and Steffen (2018) recommend that 'we should avoid drawing simplistic causal relationships' (p. 6) between continuing bonds and adaptation to bereavement. Klass (2006) proposed the idea of causality occurring through a web of bonds and connections, bidirectionally between many factors such as the bond with the deceased, meaning of the bereaved person's life, meaning of death, community and cultural membership.

Previous Reviews

Several researchers have discussed the relationship between continuing bonds and adjustment to bereavement within their research, but there have been no systematic reviews of the literature to date. Below are outlines of two articles which summarised and commented on some of the empirical literature (Root & Exline, 2014; Stroebe & Schut, 2005).

Stroebe and Schut (2005) concluded that the empirical literature portrayed a complex picture of the role of continuing bonds in bereavement, with contradictory findings emerging across studies. They stated that 'there is no sound empirical foundation for the claim that continuing bonds serve a generally adaptive function in coming to terms with bereavement' (Stroebe & Schut, 2005, p. 488). They suggested that there needed to be a differentiation between types of continuing bonds that were associated with providing comfort, and those that were a reflection of a severe grief reaction. They also suggested that different subgroups of bereaved people may benefit from retaining versus relinquishing their ties.

Root and Exline (2014) noted that across studies, types of continuing bonds were associated with both good and poor adjustment. For example, using the deceased's possessions and using memories as a source of comfort were linked with both lower and higher grief severity in the short and long term across different studies. They proposed that the obstacle to understanding the adaptive quality of continuing bonds, was that the definition was too broad. They specified five dimensions along which the expressions could be considered: specificity around how concrete or tangible the bond was, proximity to the deceased and how direct or indirect the expression was, focusing on the past relationship versus a relationship that is current and evolving in the present, the locus of the bond (whether external or internal) and whether the bereaved individual was cast in a passive or active role in relation to the bond.

Both of the reviews highlighted that there needed to be a differentiation between the types of continuing bonds when considering adaptation to bereavement. Root and Exline (2014) extended that further to also cover the dimensions of expressions. Both commented on the mixture of results that they found across studies in terms of the adaptivity of continuing bonds, even varying for particular types of expressions. This fitted with Field's (2006) prediction that 'there is unlikely to be a simple invariant relationship between type of continuing bonds expression and grief resolution' (p. 18).

The Current Review

Given that the question still remained of whether and when continuing bonds may be adaptive, and the lack of any systematic review to address this question, the purpose of this review was to synthesise and critique the published empirical literature. The aim of the review was to the answer the following questions:

1. What do we know about the relationship between continuing bonds and adaptation to bereavement?

2. What factors mediate this relationship?

Method

Literature Search

The literature search was conducted between the 2nd and 4th of August 2019, within three databases: PsycINFO, Web of Science, and PubMed. The search terms used were (continuing bond* OR ongoing bond* OR ongoing connection*) AND (grief OR griev* OR bereav* OR loss OR death) AND (adjust* OR adapt*) AND (complicated grief OR prolonged grief OR unresolved grief). The search was not restricted by years. This produced 192 results. Once the duplicates were removed, the remaining 137 results were screened against inclusion criteria. The inclusion criteria specified that articles were written in English, were empirical research published in a peer-reviewed journal, were related to continuing bonds and adjustment or adaptation to grief, and the grief was related to the bereavement of a person. The exclusion criteria were if continuing bonds were not the primary focus of the research, and if the research was related to an intervention. The literature was reviewed firstly by title, then abstract, and finally by full texts. The screening process is illustrated in Figure 1 as a PRISMA diagram (Moher et al., 2009). Finally, 16 papers were included in the review (Table 1).

Figure 1

PRISMA Diagram
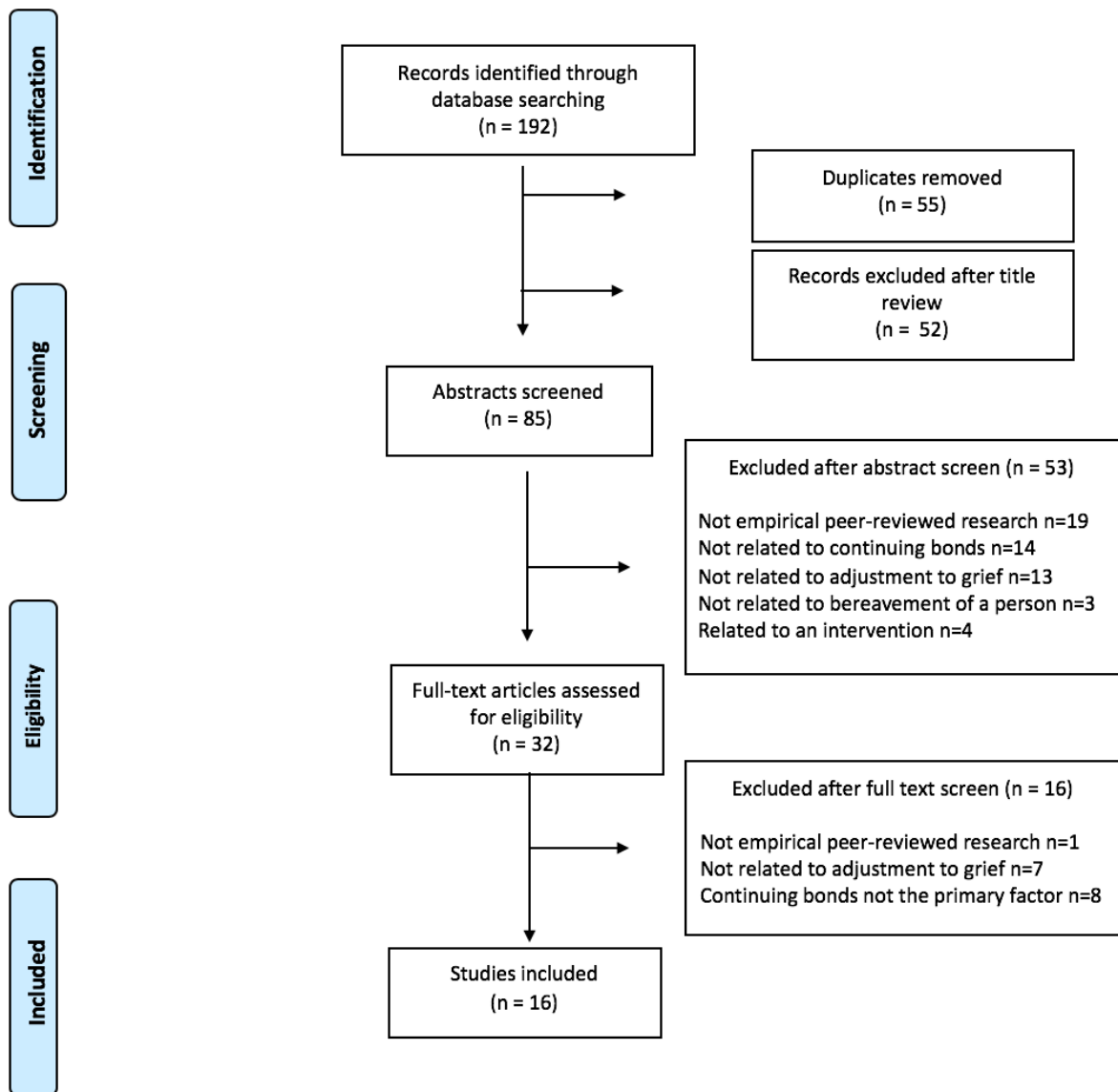
Procedure of Analysis

The 16 studies were analysed by first reading them in full and populating a table of their

characteristics, including those of the samples, the design of the study, the measures used, their

interpretation of continuing bonds, mediators, and their findings. The studies were then

grouped by their findings, into those which concluded that continuing bonds were associated

with better adjustment, and those which concluded that they were associated with worse

adjustment. There was an attempt to group by mediator, but the variety of mediators across the studies were too disparate. The studies were then described, and the results of the studies synthesised, in order to present the different reported relationships and mediating factors.

Assessing the Quality of Studies

The studies were then critiqued, using quality appraisal tools which were suitable for the different methodologies. For cross-sectional studies, the Joanna Briggs Institute critical appraisal checklist was used (Moola et al., 2017) (Appendix A), and Critical Appraisal Skills Programme (CASP, 2018a, 2018b) checklists were used for qualitative studies (Appendix B) and cohort studies (see Appendix C).

Results

In order the help answer the research question, Table 1 presents the information summarised by study. The studies have been allocated numbers, which will be used to refer to them in the text. The findings of the studies are then synthesised below.

Table 1

A Comparison of Studies Reviewed

No.	Study	Country	Sample size	Type of bereavement	Design	Findings
1	Boelen et al. (2006)	The Netherlands	56	Range	Longitudinal	Continuing bonds through recovering memories was predictive of grief, whereas the use of the deceased's possessions was not.
2	Boulware & Bui (2016)	USA	154	Range	Cross-sectional	Less use of continuing bonds significantly predicted fewer prolonged grief disorder symptoms.
3	Currier et al. (2015)	USA	195	Violent causes	Cross-sectional	Continuing bonds were linked with greater complicated grief symptomatology. Attachment could moderate the adaptiveness of the bonds.
4	Epstein et al. (2006)	UK	45	Conjugal	Cross-sectional	Dreaming and yearning for the deceased correlated with 'pathological grief'. There was no association between sensing the presence of the deceased and adjustment, because it was mediated with the participant's interpretation of the experience.
5	Field et al. (2003)	USA	39	Conjugal	Longitudinal	Higher continuing bond was associated with a more elevated grief-specific symptom pattern.
6	Field & Filanosky (2010)	USA	502	Range	Cross-sectional	Externalised continuing bond was positively associated with violent death and responsibility for the death, whereas internalised continuing bond was negatively associated with these risk factors.

7	Field et al. (2013)	USA	28	Bereaved mothers	Cross-sectional	Illusions and hallucinations of the deceased child were predictive of greater distress whereas those involving belief that the deceased child was aware of the mother or communicating with her through dreams were not associated with symptoms. Mothers who reported continuing bonds as more comforting than distressing had lower grief symptom ratings.
8	Foster et al. (2011)	USA	36 mothers 24 fathers 39 siblings	Child and siblings	Cross-sectional Qualitative Content analysis	Over half of participants experienced comforting effects from reminders of the deceased child, whereas only 10% of family members experienced discomforting effects.
9	Karydi (2018)	UK	135	Parental	Cross-sectional	The continuing bond with the deceased had a weak association with both better general functioning and relational active grief.
10	Lalande & Bonanno (2006)	USA and China	61 USA 58 China	Range	Longitudinal	Higher levels of continuing bonds in China at 4 months were related to better adjustment at 18 months. Whereas in the USA higher levels of continuing bonds were related to poorer adjustment at 18 months.
11	Neimeyer et al. (2006)	USA	506	Range	Cross-sectional	Strong continuing bonds predicted greater levels of distress, but only when the survivor was unable to make sense of the loss.
12	Ronen et al. (2009)	USA	6	Bereaved mothers	Cross-sectional Qualitative case studies	Those in the non-complicated grief group reported internalisation of positive qualities and identification with the deceased child as a role model, whereas participants in the complicated grief group did not report these experiences.
13	Rubin & Shechory-Stahl (2013)	Israel	6	Bereaved parents who lost sons in war	Longitudinal Qualitative	All parents had continuing bonds to the son, but it is how the deceased is recollected that is associated with the direction of bereavement outcome.

14	Scholtes & Browne (2015)	International 11 countries	354	Bereaved parents	Cross-sectional	Reported links between internalised bonds and a more positive grief status; externalised bonds showed the opposite relationship.
15	Sirrine et al. (2018)	USA	50 youths 46 adults	Bereaved youth Bereaved adult caregivers	Cross-sectional	Youths' continuing bonds were positively associated with their level of grief symptomology.
16	Stroebe et al. (2012)	Germany	60	Conjugal	Longitudinal	Persons with unexpected loss who retained strong bonds were the least well adapted and remained so over time. Those with expected loss and strong ties suffered initially but improved. Those with weaker ties had adapted better, regardless of expectedness of death.

Study Details

Sample sizes varied from 6 to 768 participants (M=186). Ten of the studies were conducted in the USA, two studies in the UK, and one study each in Germany, The Netherlands and Israel. The remaining two studies sampled internationally, one directly compared participants from the USA and China, and the other collected data online across 11 nationalities, with most participants from the USA and Australia.

The studies used adult participants, except one that focused on 11-17-year olds (15) and another included siblings who had a mean age of 12 years old (8). Most participants across the studies were Caucasian, except two studies in which participants were either all or majority African American (2, 3). Most participants were female, except one study where there was an equal balance (16), and two studies did not state the demographics for gender (4, 13).

In terms of the participants' relationships to the deceased, five studies recruited bereaved parents (7, 8, 12, 13, 14) and three studies recruited those who had been conjugally bereaved (4, 5, 16). In two studies the participants had been parentally bereaved as children (9, 15). The other studies included participants who had a range of types of bereavements within the samples (1, 2, 3, 6, 10, 11). Additionally, two studies recruited based on the cause of death, which were by violent causes (3) and war (13).

The studies included in this review, could be broadly categorised by design. Eleven of the studies included used a cross-sectional design (2, 3, 4, 6, 7, 8, 9, 11, 12, 14, 15) and five of the studies used a longitudinal cohort design (1, 5, 10, 13, 16). Mostly they involved quantitative data, but a minority used qualitative (8, 12 ,13).

The findings of the studies are presented below. Firstly, synthesising how the studies had interpreted continuing bonds. Then the findings in relation the review question. Namely, what do the studies conclude about continuing bonds in relation to adaptation to bereavement, and what mediates this relationship.

Interpretation of Continuing Bonds

The studies interpreted continuing bonds in a variety of ways, which was partly related to the measures of continuing bonds that were used. Eight of the studies (2, 3, 5, 6, 9, 10, 11, 14) used a variation of the continuing bonds scale (CBS) (Field et al., 2003). Other questionnaires that were used included the two-track bereavement questionnaire (TTBQ) (15) and the reciprocal attachment questionnaire (5). Some studies used between three and six items to measure continuing bonds (1, 16). Two studies (7, 12) used the continuing bonds interview (Field et al. 2013), and two used semi-structured interviews (8, 13). One study used the empty chair monologue task (5).

The interpretation of continuing bonds was relatively similar across the studies which used the CBS (Field et al., 2003). This included 'accessing memories, maintenance of possessions, sense of presence, identification with the deceased, internalization of the deceased, viewing the deceased as a standard for living [and] reminiscence of the deceased' (3, p. 205). However, some researchers using this scale used a two-factor structure, differentiating between participants who displayed more internalised or externalised continuing bonds (6). Internalised meant that the person had an ongoing connection with the deceased and used them as a secure base and role model, whereas externalised covered hallucinatory and illusory experiences (6). One study used a three-factor structure in which they added the factor of transference (14), which included questions around acting or thinking in a manner that in some way imitated the

deceased. One study categorised by whether the reminder of the deceased was purposeful or non-purposeful (8).

Studies which used other methods of measurement varied more in their interpretation of continuing bonds. For example, focusing on using possessions of the deceased to feel near to them and recovering memories of the deceased (1), and experiencing illusions and hallucinations or the deceased communicating through dreams (7). One study used three factors: sensing the presence of the deceased, communicating with the deceased and re-living the relationship, and dreaming of and yearning for the deceased (4). Others focused on how the deceased was recollected (13) or whether reminders were comforting (7, 8). In a study of parents, continuing bonds were interpreted specifically as the internalisation of positive qualities and identification with the deceased child as a role model (12).

Overall, the ways in which studies measured continuing bonds, determined how they then defined and interpreted them. The most commonly used measure was the continuing bonds scale, which is reviewed further in the critique section. However, the variety of measures must be kept in mind when interpreting and comparing the studies.

What Do We Know About the Relationship Between Continuing Bonds and Adaptation to Bereavement?

Some studies concluded that higher scores on the continuing bonds measures correlated with poorer grief adjustment, and lower continuing bonds scores with better adjustment. Four of the studies reported this as an overall correlation (2, 3, 11, 15). It was concluded that elevated use of continuing bonds was associated with more prolonged grief disorder symptoms (2), complicated grief symptom severity (3) and the continuing bond was reported in a study on

young people to account for 35% of the variance in their symptomology (15). More intense continuing bonds predicted higher scores on a complicated grief measure, particularly for separation distress but also for traumatic distress (11).

However, other studies reported associations that were dependent on the expression of the continuing bond. Where continuing bonds were expressed through recovering memories, they were reported to be a strong predictor of grief, but not when the expression was through the use of the deceased's possessions (1). When continuing bonds involved illusions and hallucinations (of the deceased child) they were reported to be predictive of greater distress (7). Those experiencing dreaming and yearning for the deceased were significantly more likely to experience 'pathological grief' (4).

Others conceptualised this by differentiating between externalised and internalised expressions of continuing bonds (6, 14). One study reported that both externalised and internalised expressions correlated with complicated grief symptoms (6). Another study concluded that only externalised expressions had a positive correlation with grief intensity, and internalised expressions were associated with a more positive grief status (14).

In some studies, they reported that a strong continuing bond was associated with better adjustment (7, 10, 12, 13) but always within the context of a specific continuing bond expression. In one study, the group which were categorised as non-complicated grief, reported internalisation of positive qualities and identification with the deceased child as a role model, whereas participants in the complicated grief group did not report these experiences (12). Bereaved mothers who reported a belief that the deceased child was aware of the mother or communicating with her through dreams, were found to have less association with grief

symptoms (7). One study found the continuing bond with the deceased had a weak association with both better general functioning and relational active grief (9).

How the continuing bond was experienced was also reported to be correlated with the degree of grief symptomology. Bereaved mothers who reported a continuing bond as more comforting than distressing had lower grief symptom ratings (7), and another study found that over half of participants experienced comforting effects from reminders of the deceased child (8). Another study found that there was no association between sensing the presence of the deceased and adjustment, because of the variety of ways in which participants would interpret these experiences (4).

These studies all used cross-sectional designs so reported correlations between continuing bonds and grief. The findings were mixed, with some reporting correlations between continuing bonds with better adjustment to grief, and others reporting correlations with worse adjustment. It is important to note that few of these were direct correlations, and more often related to a type of continuing bond, or the interpretation of the continuing bond by the participant, and how comforting or distressing they found it.

Longitudinal Studies

Longitudinal studies in which there was a repeated measurement of continuing bonds and grief over an extended period following the loss were considered the most suited to answering the question of adaptiveness of continuing bonds (Field et al., 2003). They ranged in length from 2 to 10 years.

However, the longitudinal studies included in the review (1, 5, 10, 13, 16) also differed in their conclusions. Two studies reported that higher scores on continuing bonds measures correlated with more severe grief (5, 16). Study 5 reported higher overall scores on continuing bond measures were strongly correlated with greater grief severity over five years post-loss. However, the continuing bonds measures were only taken once, at five years post-loss, so were not longitudinal. The other study reported that those who did not relinquish their bond with the deceased 4 to 7 months post-loss displayed more grief symptoms up to two years post-loss (16). However, this was only the case when the loss was unexpected. If the loss was expected, those with strong bonds had higher grief scores initially but reduced to the same level by two years as those who relinquished their bonds.

Another study found that by 16 to 21 months post-loss, some forms of continuing bonds expressions were related to maladjustment to grief while others were not. Continuing bonds which involved recovering memories were a strong predictor of grief whereas those which involved the use of the deceased's possessions were a weak predictor of grief (1). In a cross-cultural longitudinal study, it was reported that participants in the USA showed that higher levels of continuing bonds were related to poorer adjustment at 18 months post-loss, but in China participants who reported higher levels of continuing bonds at four months were related to better adjustment at 18 months (10).

In the longest study included in the review (13), all the bereaved parents had a continuing bond with their deceased son, but how the deceased was recollected was associated with the grief outcome. Bereaved parents whose grief symptomology improved over a 10-year period, described an ongoing relationship with their deceased son in which memories and emotions were organised thickly and positively (13). This was compared to participants whose grief

symptomology remained static or deteriorated over a 10-year period, who had described an ongoing relationship with their deceased son in which memories were less rich and conveyed a negative perception of the deceased (13).

This range in the conclusions of longitudinal studies does not provide clarity or consensus on the relationship between continuing bonds and grief. Similar to the variety of conclusions drawn by the other studies in the review, various mediators were involved, and there was no overall effect of continuing bonds on grief adjustment.

Mediators

Complicating the picture further were the many mediators that were included within the studies. These included: social support and religious coping strategies (2); spirituality (7); country and culture (10); feelings of helplessness and blame (5); responsibility for the death (6); attachment (3) and meaning reconstruction (11). Mediators were often related to the bereavement such as the proximity of the relationship (15), their satisfaction in the relationship (5), whether it was an expected or unexpected death (16), and the type of loss (8).

Those which were related to better adaptivity to bereavement were greater perceived social support (2), spirituality (7), meaning making, benefit finding and positive identity change (11). Finding continuing bonds comforting was related to less grief symptomology (7, 8), and mothers found continuing bonds more comforting than siblings (8). Another helpful mediator was if a surviving parent helped to facilitate a child's grieving process, which promoted a positive continuing bond to their parent (9). Mediators that were associated with poorer adjustment, were negative religious coping strategies, a highly avoidant attachment style (3), and if the continuing bond was experienced as distressing (7) or discomforting (8). Mediators

of poorer outcomes were also if the death was unexpected (16), an immediate family member (14), a violent death and the person felt responsibility for the death (6). There was a wide range of mediators, with each study focusing on a different variable, which indicated that there is no evidence of a direct relationship between continuing bonds and adjustment to grief.

Summary of Findings

This review found that there was a broad mixture of conclusions from the literature. A similar number of studies reported that continuing bonds correlated with better adjustment, as those which reported it to correlate with worse adjustment. Although most cross-sectional studies recommended that longitudinal studies would be able to shed light on the relationship, those reviewed here provided little clarity. There was no consistent evidence for a direct relationship between continuing bonds and adjustment to grief. Each study highlighted a different mediator, so the relationship between continuing bonds and grief must be considered within in the context of mediators.

Critique

The quality of the studies included in the review is critiqued below. This was aided by the use of quality appraisal tools (Appendices A, B & C). This section outlines limitations of the studies within the areas of design, data collection, participants, confounding factors and outcomes.

Design

The majority of the studies reviewed used cross-sectional designs, which meant that measures of continuing bonds and grief were taken at a single time point. Therefore, inferences could not be made about the causality of adaptation to grief, only about the correlation of the two measures. Field et al. (2003) recommended that a 'longitudinal design involving repeated

measurement of a broad range of continuing bonds expressions and measures of bereavement-related symptoms over an extended post loss interval from soon after the death' (p. 116) would be well suited to answering the question of adaptiveness of continuing bonds. This review included five longitudinal studies and, using the CASP checklist (Appendix C), four of these were assessed as good quality. One study, although it measured grief at multiple time points, only measured continuing bonds once at five years post-loss and not the earlier time points (5). This study also had high attrition after five years (5).

Data Collection

For the qualitative studies, it was highlighted within the ratings on the CASP tool (Appendix C) that the relationship between the researcher and participants had not been mentioned by two of the three studies (8, 13), despite this being an important quality indicator in qualitative research. The other qualitative study briefly included that taking part in the research was thought to be therapeutic for participants (12).

Much of the data from these studies was collected through self-report measures. It is possible then that there may be some impact on their responses being influenced by social desirability in reporting on grief symptoms and continuing bonds expressions (2). In one conjugal bereavement study, stronger continuing bonds were associated with more elevated grief. However, greater satisfaction in the past relationship with the spouse was also predictive of higher continuing bonds scores (5), so they suggested that 'those who continue to feel strongly connected to their spouses may be motivated to report grief symptoms as a testament to the value of the past relationship' (5, p. 116).

Continuing Bonds Measures. In the majority of studies included, continuing bonds were measured using the continuing bonds scale (CBS). However, there are criticisms of this measure, including that it has not been validated on a large sample (Epstein et al., 2006; Field et al., 2003). When initially developed, the measure was said to have good internal reliability (alpha = .87) (Field et al., 2003) and was used as a single factor measure. However, later research contradicted this, as it recommended that continuing bonds have different expressions and so a single factor CBS likely neglected variation in these different relationships to adaptation (Epstein et al., 2006). It has also been criticised for not including items that reflected a person maintaining a continuing bond in a more concrete and active way, such as setting up an altar at home (Lalande & Bonanno, 2006). This was particularly relevant when using participants from cultures where such active traditions/rituals were an important part of the continuing bond.

Grief Measures. In terms of measuring grief, the studies used a wide variety of different measures. The most commonly used (1, 3, 8, 11, 12) was the revised inventory of complicated grief (ICG-R) (Prigerson et al., 1995), a measure that had been extensively used in research and shown to have good reliability and validity (Han et al., 2016; Thimm, et al., 2019). The other 12 studies each used different scales and the variety made direct comparison of results difficult. They also ranged in the type of grief they were measuring, for example traumatic grief, prolonged grief or mourning behaviour.

A general lack of consensus about how to define 'complicated', 'prolonged' and 'unresolved' grief, and how to measure it, meant that sometimes assessments for complicated grief included questions such as 'I hear the voice of the deceased speak to me', which could also be classified as an externalised continuing bond (6). When reviewing the relationship between continuing

bonds and adjustment to bereavement, there have been reported conceptual overlaps in the measures used to operationalise them (Schut et al., 2006). A significant correlation was reported between Texas revised inventory of grief (Faschingbauer, 1981) and the CBS (Field et al., 1999), and even when this conceptual overlap was reduced, grief and continuing bonds were still substantially correlated.

It was suggested that these constructs were at least related, if not even an intrinsic aspect of grief. Therefore, the frequently found association between grief and continuing bonds could be due to measurement of closely related constructs. An example given was when continuing bonds were reported as 'comforting', what might have actually been measured was an aspect of adaptive grieving. The correlation between continuing bonds and grief could simply mean that these variables have not been sufficiently conceptually separated (16). This undermines the validity of the evidence which exists around relationships between adjustment to grief and continuing bonds. It was recommended that research try to separate the two constructs in measurement. Two studies (1, 12) took this into consideration and removed items from the ICG-R that could have been interpreted as a manifestation of continuing bonds, for example 'thinking about the deceased much'. This reduced the correlation between the measures.

Participants

There were some limitations regarding the samples used in the studies. One study cited a limitation that it had relied on snowball and convenience sampling to recruit participants. However, due to trying to recruit African American participants, this was justified to overcome issues with recruitment within these communities (2). Apart from this study, and one other which had a marginal majority of African American participants (3) lack of diversity in relation to ethnicity was a limitation within the research. Seven of the studies had entirely or mostly

Caucasian participants, and as study 6 stated, 'given the purported role of culture in expressions of continuing bonds, considerable caution must be taken in generalizing the present study findings to other ethnic groups and cultures' (6, p. 116). This also highlights the importance of demographics around ethnicity being reported in the research, as some studies only quoted the most frequent ethnicity among participants, and not those in the minority. Seven studies omitted demographics on the ethnicity of participants altogether.

There was an overrepresentation of females within 11 of the samples. This has been noted as a common limitation across the bereavement literature (9). Some studies suggest that there is a gender difference in the reporting of difficulties in bereavement, with males reporting fewer problems (Rubin et al., 2009) and identifying as female was a risk factor for developing complicated grief (Kersting, 2011). Therefore, this limits the generalisation of the findings of the literature, as they may be less representative of males.

Those who declined participation in the studies, were described by one study as giving the reason that 'they felt they would be too distressed if asked to talk about their bereavement in further detail' (4, p. 257). This may have meant that people who would have scored more highly on the grief measures were excluded.

Confounding Factors

Although many of the confounding factors were accounted and controlled for in the studies, some were neglected. For example, in one study they collected information which indicated that 59% of the sample had experienced other major losses prior to this death (11). Another study mentioned multiple losses, in the context of asking participants to 'consider the loss that inflicted the greatest impact on their life' (2, p. 196). However, none of the studies controlled

for multiple losses within the analyses, despite this being likely to alter the time and course of grief (Mercer & Evans, 2006). None of the studies included information on whether the participants had received an intervention for their grief. Considering that elevated levels of grief were being measured, the potential impact of a psychological intervention on this could be significant.

Outcomes

Several of the studies (1, 3, 5, 6, 7, 8) caveated the results of their research with the point that they could infer the correlation of grief and continuing bonds, but that the direction of causality could not be determined. As such, differences in grief adjustment could be as a result of the continuing bond with the deceased, or the continuing bond may be as a result of the grief reaction. For example, it could be that deriving comfort through continuing bonds was a product of being less symptomatic (7).

Discussion

Within the context of the continuing-relinquishing bonds paradigm in bereavement research (Ho & Chan, 2018), the aim of this study was to answer the question: what do we know about the relationship between continuing bonds and adaptation to bereavement and what factors may mediate this? The review found that, similar to previous reviews (Root & Exline, 2014; Stroebe & Schut, 2005), there was no consistent evidence of a direct relationship between continuing bonds and grief, but instead a wide range of findings. This suggested that the relationship was complex and an interaction of meditating factors. This supported Klass (2006) in his theory of causality though a web of bidirectional connections between many different factors. The mediators corresponded to some of the dimensions described by Root & Exline (2014), including the proximity to the deceased, and the locus of the bond (whether external or

internal). The operationalisation of continuing bonds and grief differed across studies and this contributed to the mix of findings and quality of the research. Other limitations included that within the study samples there was an overrepresentation of people who identified as Caucasian and female. The implications of the current review for research and practice are presented below.

Implications for Research

There is a general lack of consensus about how to define 'complicated', 'prolonged' and 'unresolved' grief, and how to measure it, which means that often measures for grief and continuing bonds conceptually overlapped. As this is fundamental to the validity of research results, future research could develop measures which better separated the concepts of grief and continuing bonds.

There was also an overrepresentation of females across the studies, which limited its generalisability. Future research into both grief and continuing bonds in samples whom identified as male, or other gender identities, would provide insight into any differences in relation to gender that should be taken into consideration when generalising.

The use of online platforms in relation to continuing bonds is a more recent development in the literature. This was not included in the review because research in this area is generally behind that of more traditional continuing bonds. However, as the use of social networking sites continues to expand, this is becoming an important area to explore. Although there is some emerging literature on the use of online platforms in relation to continuing bonds (Blower & Sharman, 2019; Kasket, 2012), future research would first need to provide an initial framework to understand how bereaved people are using these sites to continue bonds with the deceased.

Implications for Clinical Practice

As there is no clear evidence for continuing bonds helping or hindering grief, and there are many factors which may influence continuing bonds and adaptivity to bereavement, clinicians working with bereaved individuals should adapt their approach depending on the unique situation of the individual. It may be useful to include in the assessment of grief some of the following aspects: any continuing bond to the deceased, the client's interpretation of the continuing bond, culture, religion, their relationship to the deceased before they died, the nature of the death and whether the person has been able to find meaning following the loss. This allows for a complex picture to be drawn of the interactions between grief and continuing bonds.

Consideration should be paid to how intervening in continuing bonds may impact on the ability of the bereaved to cope with the loss. For example, if the mediator of attachment style is assessed and a client seems to have a highly avoidant attachment style where they may cope in a more autonomous manner, a grief therapy intervention which tries to cultivate a continuing bond with the deceased, may not fit with that person's general relational style (3). However, for someone who tends to seek proximity to others to cope with distress, then a continuing bond may fit well with their attachment style and provide them with comfort (Field & Friedrichs, 2004). Overall, giving clients the opportunity to discuss continuing bonds is important, but if they do not wish to voluntarily maintain a connection with the deceased, reassurance can be provided that continuing bonds are not universally helpful for coping with bereavement.

Conclusion

From the studies included in this review, there was no clear consensus regarding the adaptivity of continuing bonds in bereavement. The evidence for a direct relationship between grief and continuing bonds is limited, potentially due to the conceptually overlapping tools used to measure them. There were also many variables which mediated this relationship. The findings of this review fitted with previous findings (Field, 2006; Klass & Steffen, 2018) that there was no evidence of a simple causal relationship between continuing bonds and adaptation to grief.

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MAJOR RESEARCH PROJECT

Section B: Empirical Paper

'He's Still There':

A Grounded Theory of how Facebook Facilitates Continuing Bonds with the Deceased.

Word count: 7945 (plus 467 additional words)

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Salomons Institute

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To protect anonymity all identifying information has been removed.

Abstract

Most people will experience bereavement in their lifetime. Research suggested that some bereaved people use Facebook to continue bonds with the deceased. However, no theory had been developed to suggest how this may happen or the processes involved. Grounded theory was used to analyse data, explore and propose a theory for how bonds with the deceased were continued through the use of Facebook. The data consisted of 103 posts on in-memory-of Facebook pages, including 388 comments, and seven interviews with bereaved Facebook users. A theoretical model was developed suggesting that those who engaged with Facebook following a bereavement, in the context of social support, may be involved in individual and collective processes. These can involve engaging with the deceased person's profile, posting about or to the deceased person, witnessing and replying to one another's posts, collective reminiscence and learning new things about the deceased person. This all helped to maintain, and even transform, the connection with the deceased. The findings suggest that continuing bonds on Facebook occur through individual processes which elicit collective processes, which maintain and transform a connection with the deceased person. Limitations and implications of the research are discussed.

Keywords: continuing bonds, bereavement, grief, Facebook.

Introduction

Bereavement

Deaths in the UK are predicted to rise over the next 20 years, alongside increases in the population and proportion of adults over 85 years old (Office for National Statistics, 2019). The number of bereaved people will grow correspondingly, with each death resulting in grieving families, friends and communities. When conceptualising reactions to bereavement, there have been attempts to distinguish a 'normal' grief reaction from one that may be 'complicated', 'prolonged' or 'unresolved' (Field & Filanosky, 2010). In general, it is associated with both physical and mental health difficulties, and greater use of healthcare services (Stroebe et al., 2007). Working clinically as a psychologist, many service users seeking help will have experienced bereavement, which may be contributing to their mental health difficulties to some extent. Although, accurate estimates of the proportion of service users struggling with grief are difficult to obtain, because this is not always cited at initial assessment as a reason for seeking help, but arises later in treatment (Piper et al., 2001).

Attachment Theory

Through the lens of attachment theory, the death of an attachment figure results in the activation of an internal working model of the deceased and causes separation distress (Bowlby, 1980). Whilst grieving, the person works to revise the internal working model, in order to integrate the reality of the loss (Shear & Shair, 2005). For someone with a secure attachment, they are likely to have more resources to manage this process. However, those with insecure attachment styles are thought to experience more difficulties with grief (Cohen & Katz, 2015). Following a loss, people may continue to connect to a representation of the deceased, which may provide an attachment function of helping them to cope when distressed (Field & Friedrichs, 2004).

This sense of connection may continue even once the individual accepts the permanence of the physical separation (Stroebe et al., 2005).

Continuing Bonds

Klass et al. (1996) first introduced the term 'continuing bonds' into the bereavement literature, referring to a bereaved person maintaining an ongoing connection with the deceased as a common and normal part of grieving. Although the concept had existed throughout history across most cultures (Walter, 2018), it was said to be in response to a notion that had dominated Western theories on bereavement during the 20th century, that not severing ties with the deceased indicated pathology in grief (Klass, 2006; Klass et al., 1996). Since the introduction of the term, it has been accepted by most psychological models of grief (Klass & Steffen, 2018, p. 4).

Researchers have described a diverse range of ways in which continuing bonds can be expressed. These include reminiscing about the deceased, telling stories about them, visiting their grave, looking at photographs or keeping their possessions (Root & Exline, 2014). It may be honouring the deceased through memorials or altruistic acts. People may have dreams or nightmares about the deceased, illusory or hallucinatory experiences, or may sense the presence of the deceased (Field et al., 2005). It can include embracing the beliefs and values of the person and doing things that the deceased enjoyed (Root & Exline, 2014). It could also involve communicating with the deceased, such as talking to the deceased, maybe aloud at the graveside, or writing a letter (Root & Exline, 2014).

Continuing Bonds Online

Over the past two decades, continuing bonds have been revolutionised by the internet, supporting and also changing the processes of mourning in Western societies (Huberman, 2017). Various online platforms were used to commemorate and communicate with the deceased. Earlier research into online grief focused on memorial sites, also referred to as virtual cemeteries, cybermemorials or web memorials, which had been around since the late 1990s (Roberts & Vidal, 2000). Research found that people were visiting these sites more frequently than physical cemeteries (Roberts, 2004). Carroll and Landry (2010), through a survey conducted of undergraduate students, found 85% accessed a memorial group compared to 42% who read a printed obituary. The sites were said to provide both a commemorative function and a new means for the bereaved to communicate with the dead (Green, 2008; Huberman, 2017; Roberts, 2004; Roberts, 2006).

In the twenty first century, social networking sites provided another platform for continuing bonds. By 2019, there were almost 3.5 billion social networking users worldwide (Chaffey, 2019), and in the UK, 66% of over 16s had used a social networking site in the past three months (Office for National Statistics, 2017). In contrast to the memorial websites, social networking sites were not specific to grief and were used for many functions in daily life. Therefore, the space in which someone had previously socialised with the person, was later used to mourn them. If the deceased person had a profile, that mourning could also involve the person's 'representation of self' that they had created during their life (Kasket, 2012, p. 63). In addition, the technological development of smart phones means that the representations of the deceased are accessible at any time (Walter, 2015).

Facebook. Since 2006, when it opened to the general public, Facebook became of interest to researchers because its potential functionality in relation to death and bereavement. Facebook has 1.6 billion users who visit the site daily, rising to 2.5 billion monthly users (Facebook, 2020). When users pass away, the current standard practice is that by relatives or friends informing Facebook of the death, their account can be 'memorialized' (Facebook, 2018). Once memorialised, existing 'friends' of the profile can view it, post on the wall and comment on others' posts.

The bereaved used Facebook to express grief related emotions and post memories of the deceased (Balk & Varga, 2018; Getty et al., 2011; Keskinen et al., 2019), create community and maintain a continuing bond with the deceased (Rossetto et al., 2015). Sixty percent of students surveyed had visited the Facebook page of someone who had died, although only 10% had posted themselves (Carroll & Landry, 2010), also referred to as the vocal minority and silent majority (Pennington, 2013). In a more recent study, surveys found that 70% of participants engaged in Facebook 'grief expressions', such as a status update (Blower & Sharman, 2019). Participants 'unanimously agreed that you do not defriend someone just because they died' (Pennington, 2013, p. 624). Those who struggled with seeing the page, may not visit it or may 'hide' it from their newsfeed, but it was not considered acceptable to remove the person's page from their friends list. Another option is the creation of 'in-memory-of' groups, where mourners have a communal online space to communicate with each other, share information about the death and subsequent events, and share memories of the deceased (Kasket, 2012). The groups are generally public, in contrast to the deceased's profile which is restricted to pre-existing Facebook 'friends' (Brubaker et al., 2013).

Maintaining a Continuing Bond Through Facebook. Qualitative studies reported themes of the bereaved continuing a bond with the deceased though Facebook. This 'preservation' of a connection occurred through learning more about the deceased, ongoing communication with them, and viewing posts that the deceased person had written before their death (Rossetto et al., 2015). Kasket (2012) noted that the bereaved directed their messages at the deceased. They sent the deceased updates about everyday activities and this 'everydayness' was found to be reassuring by participants. They seemed to be invested in maintaining a bond, checking the profile and posting messages regularly. Kasket (2012) concluded that 'the persisting digital self and the mourner's bond with it is experienced as somehow 'real', and there is a terrible fear of that bond being broken' (p. 63). This persisting digital self was named a 'post-mortem identity' in another study which centred around the continuation of the deceased's profile. This was a representation of their identity during their life, which continued to exist after their death, was added to by others posting onto the profile (Brubaker et al., 2013).

Irwin (2015) used the term 'paranormal copresence' to describe different continuing bonds. Conversations with the deceased were had about everyday activities and experiences that the person wished the deceased had been able to join or witness. Some of the posts described what they missed or loved about the deceased person. These posts were primarily directed at the deceased, but some were 'reminiscent of speaking out loud to no one in particular' (Irwin, 2015, p. 138). Several other researchers also documented this phenomenon that the bereaved would speak directly to the deceased through posting on their profile page (Balk & Varga, 2018; Brubaker et al., 2013; Brubaker & Hayes, 2011; DeGroot, 2012; Hieftje, 2012; Kasket, 2012). DeGroot (2012) coined the term 'transcorporeal communication' to describe messages directed at the deceased as if they could read them and proposed a model of this type of communication (DeGroot, 2018).

Kasket (2012) looked at posts on 'in-memory-of' Facebook groups and found that 77% of the posts used 'direct second-person address' which was much higher than the 30% previously reported by Roberts (2004) on virtual memorial sites. It was suggested that this may indicate a stronger sense of continuing bond on social networking sites compared with virtual memorial sites. Factors influencing the use of this type of direct communication, included the social norms of the platform, generational norms (it was used more by younger individuals), and how closely the bereaved had known the deceased, as well as the beliefs about whether the deceased person was able to receive the communication (Kasket, 2012). There were many examples of people believing that their messages were getting to the deceased, and that it was an effective way of reaching them (Kasket, 2012).

Facebook Communities. Another theme that was dominant within the literature, was the communal nature of grieving on Facebook. Hieftje (2012) stated that for the majority of the participants, Facebook 'created a sense of community and belonging during their grief' (p. 41). Friends and family posting messages onto the deceased person's profile publicly communicated their grief (Getty et al., 2011). Those who set up in-memory-of pages spoke about the support and information sharing that they were used for, and also how much they had learnt about the deceased person through the sharing of memories and photos on the pages (Kasket, 2012).

Facebook facilitated connections with other mourners and was a space for 'sending, seeking and gaining' social support (Rossetto et al., 2015, p. 985). It allowed for the witnessing of grief, where people would use Facebook as a public journal and others would read it. This was distinct from memorialisation because rather than remembering the deceased, it was a place for

mourners to share their experiences of grieving. However, it could be painful to read others' posts (Rossetto et al., 2015) and this community was not always found to be supportive, with instances of competition and conflict (Kasket, 2012). Privacy was a consideration and sometimes a challenge, where decisions had to be made about self-disclosure and what to share (Rossetto et al., 2015).

Research Aims

The vast majority of people will experience bereavement in their lifetime, and the internet, social networking sites, and specifically Facebook has added a new sphere in which a process of grief can occur. The current literature indicates that continuing bonds with the deceased do occur through the use of Facebook, but there has been no model specific to Facebook suggesting how it happens. For professionals working with bereaved individuals, 'awareness of this fast-evolving phenomenon, and a framework for understanding it, are critical to providing effective bereavement support in the digital age' (Kasket, 2012, p. 69).

The current project will therefore explore, and ultimately propose a theory, answering the research question: how are bonds with the deceased continued through the use of Facebook?

Method

Design

A qualitative grounded theory methodology was used (Glaser & Strauss, 1967). This allowed for the analysis of a variety of data and the formation of a theory based on the data. The research was approached from a critical realist epistemological perspective. Within this, some constructs are assumed to exist irrespective of the researcher and can be observed and documented, but the world is still seen as 'a product of human participation and negotiation' (Willig, 2012, p.

80). The overall design of the study was guided by Urquhart's (2013) description of grounded theory, which was judged to fit within this epistemology. The data was coded using the Glaserian framework (Urquhart, 2013) and focused on social processes (Willig, 2012).

The study collected data from two different sources, Facebook 'in-memory-of' pages, and interviews with bereaved Facebook users. Each phase provided a different viewpoint of the phenomenon. The Facebook pages helped to answer the research questions about the online behaviour of the bereaved, content of the posts and to whom they were addressed. Then the interviews provided data on the beliefs around, function and impact of Facebook use in relation to continuing bonds with the deceased.

Participants

In phase one, 103 posts from seven 'in-memory-of' Facebook pages were analysed. This included 388 comments on the posts. Demographic information was collected about the deceased person to whom the page was dedicated and is reported here in general categories to ensure that the pages sampled are not identifiable (Table 2). Three of the deceased were female and four were male. All of the sample were British, the majority were White British, and a minority were Black British and British South Asian. The time since the death ranged between 2 to 10 years. The age at death ranged from teenage to 80s.

In phase two, seven participants were interviewed (Table 3). Six were female and one was male. The age of participants ranged from 21 to 56 years old (M=34.4). Five of the participants were White British, one participant was White British and Irish, and one was Filipino, and they all resided in the UK. All of the participants used Facebook on their smart phone daily, between one and five times per day. The time since the death ranged between 2 to 9 years. The age at

death ranged across the lifespan, and the cause of death was a range of physical health conditions, homicide and suicide.

Table 2

Phase One Demographics

Facebook page	Gender	Time since death (years)	Age at death (years)	Country	Ethnicity	Cause of death
			Demographics of deceased person			
1	Female	7	40s	UK	White British	Not stated
2	Female	6	40s	UK	White British	Not stated
3	Female	10	Teens	UK	Black British	Homicide
4	Male	6	20s	UK	British South Asian	Not stated
5	Male	5	80s	UK	White British	Dementia
6	Male	2	20s	UK	White British	Suicide
7	Male	3	20s	UK	White British	Road traffic accident

Table 3

Phase Two Demographics

	Participant demographics				Deceased demographics				
Interview	Gender	Age	Ethnicity	Relationship to deceased	Gender	Time since death	Age at death	Ethnicity	Cause of death
P1	Male	21	Filipino	Grandmother	Female	5 years	79	Filipino	Kidney failure
P2	Female	35	White British	Son	Male	5 years	<1	White British	Not collected
P3	Female	30	White British	Stepfather	Male	4 years	50	White British	Stroke
P4	Female	30	White British and Irish	Father	Male	2 years	67	White Irish	COPD
P5	Female	56	White British	Husband	Male	4 years	50	White British	Stroke
P6	Female	33	White British	Friend	Female	2 years	32	White British	Cancer
				Friend	Female	Not collected	24	Not collected	Suicide
P7	Female	36	White British	Father	Male	9 years	52	White British	Heart attack

Data Collection Procedure

Facebook was selected for the research over other social networking sites, because of its suitability for use around bereavement. Individual Facebook profiles continue after death and the personal content can be 'memorialized'. Text is used rather than some sites which use mostly images. Publicly accessible 'pages' are used by communities of bereaved individuals, rather than a hashtag system which can be used for many purposes other than personal bereavement. Facebook is also where most of the prior research into continuing bonds on social networking sites had been conducted.

Theoretical sampling (Glaser & Strauss, 1967) was used to guide the data collection. This meant that decisions about what data to collect next were based on the ideas which emerged from the concurrent analysis, in order to develop a theory. Recruitment stopped once "theoretical sufficiency" (Dey, 1999) was reached, which was a depth of understanding that was sufficient to develop categories and relationships between them, rather than a point where nothing new emerged.

Phase One

Data was collected through 'data mining' on Facebook (BPS, 2017; Russell, 2013). Publicly available Facebook pages were found by searching within Facebook, using the search terms 'in memory of', 'in loving memory of' and 'rest in peace'. Pages were purposively sampled, in line with the inclusion and exclusion criteria (Table 4), ensuring a range of gender, ethnicity, age at time of death and cause of death. Seven pages were sampled before sufficiency was reached. Available demographics about the deceased person were collected but presented in broad categories to protect the identity of the person (Table 2). These include age at death, gender, country, ethnicity, cause of death. For the first page, the first 50 posts were analysed.

However due to the many comments left on each post, this resulted in a larger amount of data than was anticipated. For the other pages, up to the first 10 posts were analysed, dependent on reaching sufficiency because sometimes they were being used for the same purpose, for example posting on the deceased's birthday each year. All identifying information was removed from the data.

Phase Two

Participants for interviews were recruited primarily through Facebook advertisements, and a minority through snowball recruitment (see Table 4 for inclusion and exclusion criteria). Those who expressed interest in taking part were emailed information sheets (Appendix D) and consent forms (Appendix E). An interview schedule was used, which had been developed following analysis of the phase one data (Appendix F). The questions were reviewed by an expert by experience, and amendments were made according to their feedback. The schedule was used as a guide, allowing participants to express their experiences or thoughts in relation to the topic (Urquhart, 2013). Questions were also developed based on what had arisen in previous interviews. Interviews were conducted over the phone, were audio recorded and lasted between 20 to 60 minutes. One interview was conducted over email, as was the participant's preference. Examples of theoretical sampling included participant 6 who had a more negative experience of using Facebook after a bereavement, and participant 7 where the 'connection with deceased person' theme was explored in more depth.

Table 4

Eligibility Criteria

Phase	Inclusion criteria	Exclusion criteria
1 Facebook pages	Accessible to the public. Page was set up following a specific personal bereavement.	Pages for grief or bereavement in general. Pages dedicated to a public figure. Bereavement is of a pet.

	Posts are written primarily in English.	Deceased primarily lived outside of the UK.
2 Interviews	Have used Facebook following a bereavement. Minimum 16 years of age. Able to read and write English sufficiently well to take part in interviews. Able to give own informed consent to take part in the research study. Reside within the UK.	Acutely distressed in any communication prior to interview.

Data Analysis

A grounded theory approach was used for the analysis (Glaser & Strauss, 1967). This allowed for analysis of both the Facebook and interview data. In line with grounded theory best practice, data analysis was concurrent with the data collection (Urquhart, 2013), and ideas formed from the analysis then guided the theoretical sampling.

The Facebook page data was copied and pasted into a document and anonymised, and the audio recordings of interviews were transcribed verbatim. Analysis involved firstly open coding, where the data was coded line-by-line, named open coding (Appendix L), then selective coding where the open codes were organised and core variables are defined (Appendix M). Through a process of constant comparison, the data was abstracted into theoretical codes. Finally, this was developed into a model through the use of diagrams (Appendix O) and theoretical memos (Appendix J). This process was an inductive and bottom-up approach to produce a theory from the data (Urquhart, 2013).

Although the data was collected in linear phases, the analysis moved back and forth between them in order to develop a theory. For example, when the 'collective reminiscence' category arose in the phase two data, the phase one data was returned to for examples of this occurring within the in-memory-of pages.

Ethical Considerations

The study received ethical approval from the university ethics panel (Appendix G). A summary of the findings was sent to the ethics panel and the participants of the study (Appendix P). Confidentiality of the collected data was protected by encrypting and storing the interview audio data, anonymised verbatim transcripts and Facebook page data on a password-protected computer.

Phase One

There were some specific considerations when using online data, and therefore the British Psychological Society (BPS) research board's ethical guidelines for internet-mediated research (2017) were followed. The BPS (2017) highlighted the complex issue of privacy online. Even with information which is 'in the public domain' and accessible by anyone with a Facebook account, it may still be that the author may not be expecting to be observed. Confidentiality was also made more complex by the ease in which online content can be found using search engines. This was addressed by focusing on themes and trends, and not presenting raw data that would be highly personal or identifiable (BPS, 2017; Kasket, 2012).

Phase Two

To avoid the researcher's personal information being available to participants during recruitment, a new Facebook profile was created for research purposes only. A possible risk for participants during interviews was that the questions could provoke distress regarding their bereavement. There was a protocol (Appendix H) to be used in response to a participant becoming distressed during an interview, however, a need for this did not arise during the interviews. An unanticipated issue that arose during recruitment was that someone left a

comment on the Facebook advertisement, saying that they were distressed and expressed suicidal thoughts following a very recent bereavement. In discussion with the research supervisor, a protocol was developed to guide responding in these scenarios, and this was ethically approved by the university (Appendix I).

Quality Assurance and Reflexivity

The quality of the research was assured through several processes (Yardley, 2000). I took part in a bracketing interview with a peer prior to data collection, to become aware of some of the biases and preconceptions I held about the research. I have personal experience of bereavement, and have worked with bereaved clients, all of which drew me towards research in this area. As a White British, female, trainee clinical psychologist I hold certain assumptions, for example viewing death and bereavement through a Western lens, which will have coloured my understanding of others' experiences. After noticing potential instances of this during the first interview, I tried to reduce the impact of my bias by using more open questions. Six of the seven participants in phase two were also White British females, and it is possible that during recruitment they may have made them felt more comfortable to respond due to our similarity (my headshot photograph was on the advertisement).

A disconfirming case (Yardley, 2008) was sought through theoretical sampling and formed the basis of the 'disengaged' theme. During analysis, I used coding memos to document the process of coding and development of categories and theory (Appendix J). Writing about concepts as they developed, helped to justify them and constantly compare the concepts with their origins in the data. Regular discussion and consultation with the research supervisor allowed for reviews of the coding, categories and developing theory.

Results

Four categories emerged, illustrating how bonds with the deceased were continued through Facebook. These were: Facebook use; social support; processes of remembering and connection with the deceased. Figure 1 illustrates the interactions between these.

This theory relates to those who engage with Facebook in relation to their bereavement and are involved in sharing of thoughts, feelings and memories through Facebook. The theory suggests that the bereaved and their community on Facebook, remember the deceased person through various individual and collective processes. The bereaved are remembered and supported by a Facebook community. This in-turn supported remembering of the deceased person, which included engaging with the deceased's Facebook profile and posting about and to the deceased person. These individual attempts at connection, were bolstered by others witnessing and responding to each other's posts and collectively reminiscing about the deceased person and learning new things about the deceased from each other's memories. These processes of remembering help to maintain and transform a connection with the deceased person, which can involve a feeling that the deceased person is 'still there' on Facebook.

Figure 2

Continuing Bonds on Facebook Through Individual and Collective Remembering
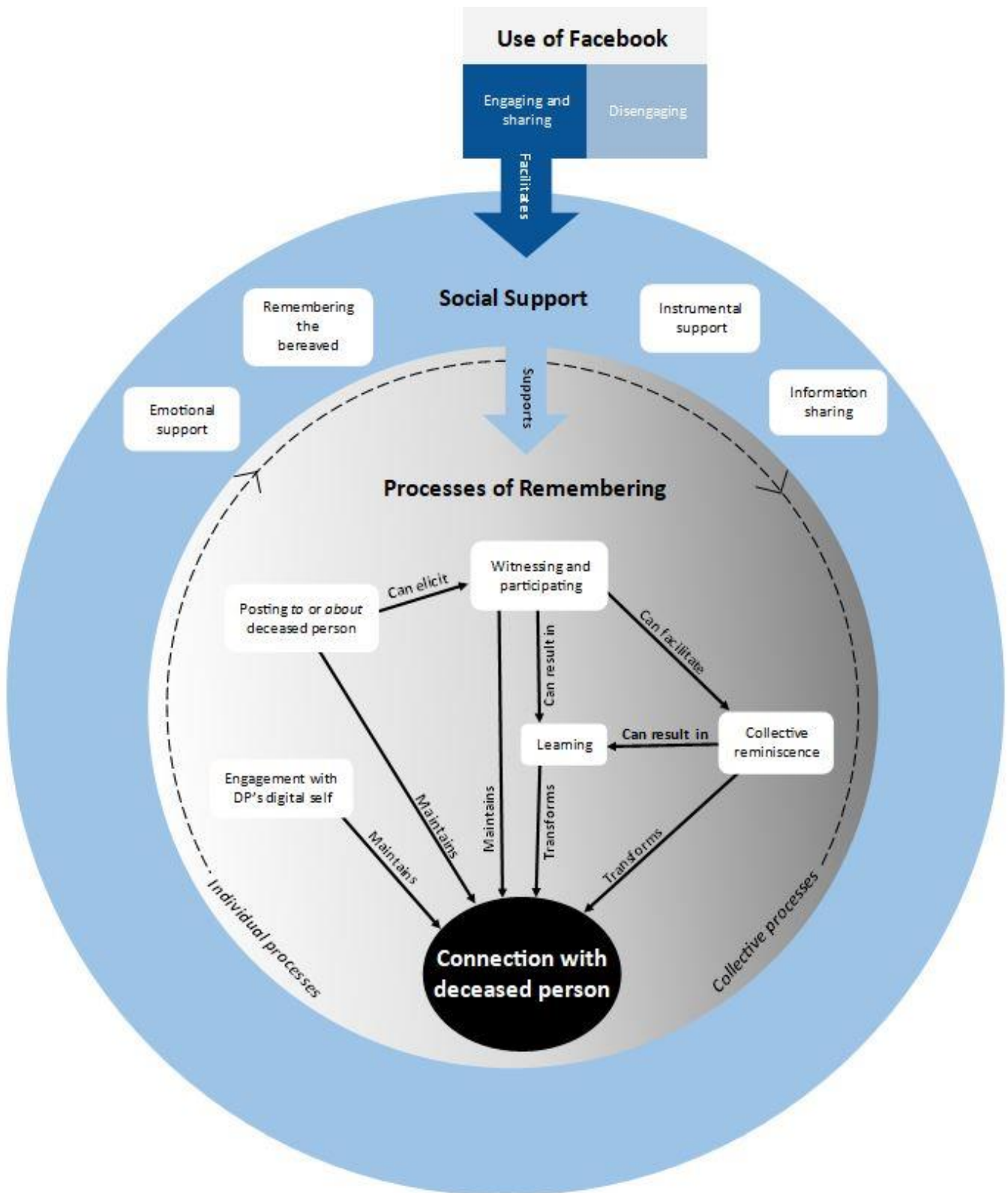
Category 1: Facebook Use

The first category was around how participants used Facebook. Each participant made decisions around engagement with Facebook and described or inferred occasions when they would engage with, or disengage from, Facebook. For example, at times they sought information through Facebook, shared and responded to others, and at other times they avoided Facebook or certain aspects of it.

Subcategory 1: Engaging and Sharing

Participants spoke about making decisions about using Facebook, including how much to share, what to share, when to respond and what to follow. Participant 2 said 'I struggle with posting pictures of [deceased person] so just have a select a few I choose that have been edited/softened/black and white'. For participant 1, after his grandmother died, 'I was hardly posting anything, and then when I first saw my cousin post something about it, I was like ah maybe I should post something as well' (P1).

One participant thought this was an advantage of Facebook compared to face to face conversations, as it was less intrusive and when you were grieving you could make choices about responding.

> Well you can choose, can't you, whether you respond or not I suppose, and how you respond and when you respond, you can think oh well I will put something but I'll leave it an hour or two to post myself (P5).

Subcategory 2: Disengaging

Participant 6 was sought through a process of theoretical sampling, due to her negative experiences. She spoke about finding it too difficult to engage with Facebook around her

friend's death, she felt harassed by friends of the deceased person, and she avoided information about the person's death, and later reminders of her. She said that her friend had Facebook profile but that 'I ended up deleting her on Facebook because I didn't want to know she passed'.

She also spoke about avoiding the posts of Facebook grief groups on her newsfeed, because it would remind her of her loss. She said, 'if I'm scrolling through say social media and I joined a grief group, I click unfollow, I have to unfollow it so it's not in my mind all the time'. Another participant spoke about finding a grief group helpful initially, but later relating to it less, and although she continued to follow the group, she no longer responded to the posts. She said, 'I still follow but I don't read the posts now, I never really responded because it just was getting a little bit personal, and not particularly positive at times' (P5).

Category 2: Social Support

Social support was seen to occur on the in-memory-of pages and was described by the participants interviewed. For this research, those whom the person was in contact with through Facebook, around the bereavement, are referred to as the 'community'. This includes family, friends, and a wider community of people who did not know the deceased person, such as support groups. As Facebook is used internationally, this support and information sharing occurred across geographical boundaries. The support was mostly being sought and received by the bereaved, but there were instances where the bereaved provided support to bereaved others.

Subcategory 1: Remembering the Bereaved

In phase one of the data collection, condolences and messages were sent by members of the community to the directly bereaved on the in-memory-of pages. Phrases such as 'thinking of

you*'* indicated that the community were remembering the bereaved person and their grief. In phase two, participants spoke about it being important that they and their grief were not forgotten by the community on Facebook. Participant 3 described it as 'that sense of unity that actually they haven't forgotten us, they haven't forgotten that we're still grieving every single day'.

Subcategory 2: Emotional Support

On the in-memory-of pages, emotional support was seen through the expression of emotions in messages, such as shock and sadness, which were shared by the bereaved and the community. The community would send their love to the bereaved, through words and sometimes emojis. In phase two, bereaved Facebook users also spoke about receiving emotional support from their Facebook community, through others expressing understanding and caring. For participant 4, that was with her existing Facebook friends who reached out after she posted about her late father. She said, 'it's been really nice to have other people in my friends list, that I didn't even know had been through a similar thing, reach out, and that's really really lovely'.

Another participant found emotional support from wider grief communities on Facebook.

> Initially after [deceased person's] death I searched for pages/bloggers, but there was not many British out there and I felt lonely, however as time has gone by more are now available which has been a great support to me (P2).

Subcategory 3: Instrumental Support

Some social support came in the form of instrumental, tangible support, both on and offline. For a participant in phase two, the loss of her husband had left her with a house to maintain

alone and posting on Facebook resulted in help with that from friends of her late husband. She said, 'I can just post a comment, oh fed up with that, or this has happened, that's a bad start to the day, and someone will go don't worry I'll sort it for you' (P5).

Another common use of Facebook following a bereavement was to fundraise for charities related to the person's death. Support with fundraising would be sought, and often links to online fundraising pages would be posted, along with updates on the progress of such projects.

Subcategory 4: Information Sharing

Bereaved people were seen to share information with others on the in-memory-of pages about the death and funeral arrangements. In phase two, using Facebook in this way initially after a death was common, and one participant did this through the deceased person's Facebook account.

> As soon as, erm, it got to the point where he passed away and things, it did, it opened up because he knew so many people, all over Europe really because of his job, that it was important that we shared it with a lot of people so it was the best way. Yeah, so that really helped. People I didn't know as well, so we actually used his Facebook page and his account. We actually used a lot of that information to get hold of people and spread the word a bit (P5).

Another participant sought information by following national organisations and charities on Facebook that were related to the death of her son.

> This also brought me awareness of baby loss wave of light – lighting a candle […] every year with #wave of light. I like that they use facts and research to try and gain awareness in prevention of premature birth (P1).

In phase one, the community were also seen to give advice to the bereaved about how to cope with their loss, for example by living each day to the fullest, ignoring reporters, and cherishing their memories of the deceased person.

Category 3: Processes of Remembering

The deceased person was remembered through various processes. Some of these were individual processes, such as posting on the deceased's profile wishing them a happy birthday. Sometimes the remembering was through collective processes, which involved more than one person posting about the deceased person and witnessing and responding to each other's posts. The dotted line on Figure 1 represents the flow of how these individual processes can elicit collective processes.

Subcategory 1: Engagement with Deceased's Digital Self

Participants continued to engage with the deceased person's profile following their death, sometimes for many years. Participant 5 described looking back over things that had been posted by the person before their death and how that aided remembering. She said, 'I think, because I said you can see video, you can see normal interactions, you can look back over posts and think I remember when he said that stupid thing and yeah it just keeps it all fresh'.

Participant 3 spoke about preserving the page as it had been when the person was alive.

> We actually also get a lot of peace and comfort from having the page there to look at. […] We just left his page exactly as it was. We didn't turn off any comments or we haven't, so myself my mum and my sister, we never logged in or used his page, we've left it just really as it is.

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Subcategory 2: Posting to or about Deceased Person

One of the processes of remembering of the deceased person by the bereaved and their Facebook community, was posting and commenting to or about the deceased person. One example was the expression of missing or love for the deceased person. Participant 7 described this as 'the way of [saying] I miss you dad, I love you dad, erm, and instead of just sort of saying it or thinking it, you share it on Facebook'.

Posts can also include descriptions of their character, sharing photos of them and posting about memories of the deceased person.

> There were a lot of people that had shared memories and shared experiences of cycling events and running events and lots of sporty things they had done with [deceased person's name]. People shared photos of their memories of that on his Facebook page (P3).

Posts can also be written directed to the deceased person, for example posting on the deceased person's wall, tagging them in posts, wishing the deceased person happy birthday or marking other anniversaries or holidays.

> I recently shared a picture of our little boy riding a bike, and because he was such a big fan of cycling I have tagged him in it and I've written that I wish you were here to see him and erm see him on his bike. So I have tagged him in it and I've kind of spoken to him as if he were going to read it, as if he could read it (P3).

Subcategory 3: Witnessing and Participating

From the phase one data, the posts that were analysed often had comments below, which exhibited that others had witnessed and participated in the remembering of the deceased. For example, the bereaved person would post some photographs of the deceased person, and others would comment on them, sharing their thoughts, feelings and memories in relation to the photographs. In phase two, participants also spoke about the comments they would get on posts.

> If I were to post a comment about him and put his name in, it would then appear on everybody that were his friends wouldn't it, which is how then they get updated and respond. […] When you put something on with his name tagged in you get 50, 60, 70 comments back (P5).

For participant seven, it was in the context of sharing photos of her late father at Christmas. She said that 'sometimes people do respond and they'll say oh you know, they'll send hugs or love and those kind of things or just have some empathy'.

Participants also spoke about witnessing others post about the deceased person. Participant three said 'I love seeing people's photos of him, I love seeing people, erm, sharing memories or putting something up. I mean sometimes people will share photos from 20, 30 years ago'.

Some participants were consciously aware that they would post to remind the community to remember the deceased person. Particularly that others would see their posts about the deceased person, and this would trigger their memories of them. Participant 7 said, 'because it's on Facebook, people might, I mean that it comes up doesn't it, so and so's posted this, friends might see, and they'll think of him perhaps'. For participant two, it was a direct way to make

sure others did not forget about the deceased, saying 'I like when people comment or like my post as I feel it helps me to remind people not forget about him'.

Subcategory 4: Collective Reminiscence

Participant 5 described a 'little moment of reminiscence' happening collectively on Facebook between the bereaved and the community. It occurred through a mutual sharing of memories of the deceased person, through posting about the deceased person and others witnessing and commenting on those posts.

> Then everybody else puts their memories and thoughts in as well and you just get a little moment of reminiscence, as if you were all collected together at a social event or something and sort of go oh yes do you remember when we did this or when we did that, and different people will do that from time to time. You know someone will have something and go oh I remember when this one with [deceased person] and lots of other people will jump in and go oh yeah.

She gave an example of when this had happened. On the deceased's birthday and the anniversary of his death, they had a tradition that her family and their Facebook community would eat cake, in memory of the deceased who loved cake. The family would 'start the ball rolling' by posting a photo of the cakes they were eating, and they got 'a constant supply all day' of others doing the same. They said that the result of this for them was that 'you know that you're not the only ones remembering him because everybody will' (P5).

Participant 3 referred to a 'shared sense of memory', that was more present immediately after the death, but occurred less frequently as others naturally moved on with their lives. She

described it as 'a way of just having that shared feeling again with other people so his friends, with extended family, with people that we might see'.

Subcategory 5: Learning

Participants described learning new things about the deceased person. People would share memories of the deceased, and others would witness these posts about or to the deceased person, collectively reminisce about them, and garner new knowledge from them. Participant 5 learnt more about her late husband from people he had worked with.

> I got to hear about a side of him that I didn't really know. Because he wasn't one for making a big deal of himself but he'd clearly he made a huge impression to a lot of people, because he was very supportive and encouraging.

After his grandmother died, participant 1 found out more about her life, and said that this process was directly linked to a feeling of his grandmother 'continuing to live with us'.

> When people post about what she's done for us, and especially my mum, because she knows what she's been through. So she was a teacher and she was one of the best teachers in the country or something […] Yeah, she has like the certificate there and I was like oh […] Yeah what she's done that I have never know of and yeah. Yeah. It was nice, and that's why it feels like she's continuing to live with us (P1).

Category 4: Connection with Deceased Person

The outcome of the above processes of remembering, was that a connection with the deceased person was maintained and even transformed. In phase one, there were many mentions that the deceased person was still loved, still in the thoughts of the bereaved and would never be forgotten. Words such as 'eternity', 'forever', and 'always' were frequently used in the posts

and comments to express this ongoing connection. In phase two, there was a belief described by three of the participants around the deceased person figuratively continuing to live through Facebook. Remarks from the participants were that the deceased was 'still with us' (P1), 'he's still there' (P7) and 'it keeps him alive' (P5). They all clarified that they did not mean this literally but that figuratively the deceased were thought to be living on through Facebook. Participant 7 explained this in context of her father's Facebook profile remaining on her list of Facebook friends.

> He's still part of it. You know, it's not that he's not there, he's still there and as I said, you know my friends list, he's down as Dad so he comes up in that bit with family or whatever. He's still there. So, and as I said, with it being a shared space, he's still part of that (P7).

Participant 7 also spoke about writing posts in a way that was directed to her father, as a way of 'contacting him'.

> You know you want to tell Dad this thing's happened and you can't. Erm, so you can put, you can send it to him (laughs) in that way. […] it feels like a way of contacting him, of reaching out, and I suppose in a way. […] all these years later it's still like that connection.

For participant 3, she had a similar experience and also noticed others writing directly to her stepfather.

> So I have tagged him in it and I've kind of spoken to him as if he were going to read it, as if he could read it. So yes I would say that we do that and when you use the @ tag or the mention tag it's in current tense as in how you would read it and speak it. […] When I've seen other people's messages as well, they're all as if [deceased person's

name] will be reading them, even though we know that he isn't. You know, we're not, we understand, but it is a nice feature of Facebook because then people might comment, or the family might like the post. It's just another way to keep his memory alive.

Discussion

Processes of Remembering

This research provides a model for understanding how bonds with the deceased are continued through Facebook. The 'processes of remembering' part of the model, outlines how individual attempts at remembering the deceased through Facebook, can become collective due to the design of the site. Posts are inevitably witnessed by others, who participated in posting and responding. Memories of the deceased are shared and discussed, facilitating collective reminiscence. The individual learnt more about the deceased (Kasket, 2012), and their connection to the deceased was not only maintained, as was reported in previous research (Rossetto et al., 2015), but also transformed through the input of others into these collective remembering processes. The centrality of collective processes in this model, supports researchers who have recommended that understanding communal continuing bonds and their intersubjectivity is an area in need of development, as literature has focused more on individual bonds (Klass, 2006; Klass & Steffen, 2018; Walter, 1996). Hartman (2012) aptly described the process as 'cyberspace is transforming loss into a collective event endowing the lost object with a new kind of immortality' (p. 455).

For the individual processes of remembering, the themes reported in the present study fit within the existing literature. Posting to the deceased person, could be described using DeGroot's (2012) term 'transcorporeal communication', which had also been related to keeping the

deceased 'alive'. Engagement with the deceased's digital self was also a well-documented phenomenon and had been referred to using various terms across the literature (Brubaker et al., 2013; Kasket, 2012; Rossetto et al., 2015).

Connection with Deceased Person

In the model, connection with the deceased person is seen as the outcome of the processes of remembering. This fitted with continuing bonds theory that predated social networking sites, where 'the purpose of grief is therefore the construction of a durable biography that enables the living to integrate the memory of the dead into their ongoing lives; the process by which this is achieved is principally conversations with others' (Walter, 1996, p. 7). These conversations are seen in the witnessing, participating, and collective reminiscence themes.

The model does not include aspects around whether the connection was helpful or unhelpful to the bereaved person, or how it may have impacted or been influenced by their grieving. This was because experiences varied considerably between the participants. Some of those who engaged with Facebook found it comforting, and others who found it distressing disengaged either from the particular page or Facebook altogether. However, as this was not the focus of the research, conclusions were not made about this observed pattern. Further research could explore this in more depth.

Social Support

At the social support level of the model, the experiences of participants being remembered and supported by others through Facebook, reflected the findings of previous research (Hieftje, 2012; Rossetto et al., 2015). The social support of the Facebook communities, fitted within the different types of social support theorised more broadly where supportive behaviours were

categorised into instrumental, informational, emotional and appraisal (House, 1981). However, appraisal support was not likely to be highlighted in phase two as participants did not usually report the language or words used by others to support them. The support was also bidirectional (Li, Chen & Popiel, 2015), though most of the participants spoke of receiving it, there were mentions of offering support to others, such as through grief groups.

Limitations

This study had several limitations. To separate out Facebook use from other social media could lack ecological validity as in daily life people may use multiple different platforms and switch and communicate across them seamlessly on their smart phone. Most of the participants mentioned other sites which they also used, such as Instagram and Reddit, and messaging applications such as WhatsApp. One way this could be researched would through case studies of participants' usage of different platforms, sites and applications.

Another limitation was that participants' religion was not collected as part of the demographics. There has been a tension in the research between Facebook being seen as a generally secular space, and the importance of pre-existing religious, cultural or spiritual beliefs. The continuing bonds literature has been criticised in general for its lack of consideration of religious and spiritual beliefs (Benore & Park, 2004; Root & Exline, 2014).

Participants for phase two were recruited through responding to a Facebook advertisement and therefore self-selected. These were people for whom the research had a particular resonance and were unlikely to represent a wide spectrum of Facebook users who experience bereavement. The model attempted to account for this to some extent by the 'Facebook use'

category which included a theme for those who disengaged from or avoid using Facebook around a bereavement. Further research would be needed to expand on this aspect.

Implications for Research

This research builds on the continuing bonds theory and 14 years of bereavement research into Facebook and suggests a model for understanding how bonds with the deceased are continued through Facebook. It provides an explanation of individual and collective processes that may be helping to maintain and transform an ongoing connection with the deceased. The dominance of collective processes in the proposed model, supports the call for more attention on the intersubjective and co-constructed elements of continuing bonds online.

One of the participants in this study took part by responding to an interview schedule over email. This was deemed important to include as an option, as other bereavement research had found that those who felt that they would be too distressed to talk would decline participation (Epstein, Kalus & Berger, 2006). Email was the participant's preference and allowed them to respond to the questions in their own time and regulate their emotional reaction. Therefore, it may be useful for future research to incorporate such methods of data collection, in order to capture data from those who may not wish to participate in a traditional research interview.

Implications for Practice

The current research had also planned to interview bereavement therapists but had been unsuccessful in recruiting any with experience of speaking with their clients about Facebook use. This could have been for a variety of reasons: that those in therapy were not those using Facebook around a bereavement; that clients had not talked about their Facebook use in therapy; or that clinicians had not enquired into, or were unaware of, Facebook use around

bereavement. If the barrier was lack of awareness or confidence to address the subject on the part of the clinicians, then this research could be a step towards improving that by providing a framework to understand it.

If clients were choosing to engage with Facebook, it may be helpful to assess their experience of this, and how it might maintain and transform a connection with the deceased. Clients may wish to bring the content of these Facebook posts into therapy, which would open up possibilities to use them in both assessment and treatment. If clients have actively disengaged from using Facebook around a bereavement, their experiences and reasons for this may also be fruitful to explore within therapy. For example, it could be that this was related to the prior relationship with the person, or attachment issues.

There has been suggestion that online interactions are seen as 'second rate' by therapists (Hartman, 2012, p. 455), however this research demonstrates how integral and significant online interactions can be for the bereaved. As a result of the COVID-19 pandemic, there has been a migration of therapy onto online video calling platforms (BPS, 2020). This could be viewed by some to be too disconnected, but this research would suggest that it be viewed as an opportunity to appreciate and enhance our understanding of online interactions that we now have with the living, the deceased, and the therapist.

This grounded theory has the potential of wider implications beyond Facebook. The concept of processes of remembering, although generated in relation to Facebook use, may be relevant in explaining how connection with the deceased occurs offline through verbal collective remembering. For example, if the posting and witnessing, were changed to talking about the deceased, listening and participating in the conversation about the deceased, they could

similarly result in collective reminiscence and learning about the deceased. Further research would be needed to explore the extent of the online to offline translation of the findings.

Conclusion

This study aimed to propose a theoretical model outlining how bonds with the deceased were continued through the use of Facebook. Following grounded theory analysis of Facebook pages and interviews with bereaved Facebook users, themes emerged in relation to Facebook use, social support and processes of remembering. The model suggested the processes by which these maintained and transformed an ongoing connection with the deceased. Parts of the model were individual ways of connecting with the deceased, such as posting a message on their profile. However, the design of Facebook meant that others witnessed and participated in remembering the deceased, which also resulted in collective reminiscence and learning more about the deceased. The findings contribute to the literature on continuing bonds on Facebook and provide a framework which could be used by clinicians working in bereavement to bring discussions around Facebook use into their clinical practice.

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Section C: Appendices

Appendix A: Joanna Briggs Institute Quality Checklist for Cross-sectional Studies

Quality criteria	Study number								
	2	3	4	6	7	9	11	14	15
1. Were the criteria for inclusion in the sample clearly defined?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
2. Were the study subjects and the setting described in detail?	Yes	Yes	No – gender not included	No – error in gender reporting (not consistent)	Yes	Yes	Yes	Yes	Yes
3. Was the exposure measured in a valid and reliable way?	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
4. Were objective, standard criteria used for measurement of the condition?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
5. Were confounding factors identified?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
6. Were strategies to deal with confounding factors stated?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
7. Were outcomes measured in a valid and reliable way? *Grief (Gr)* *Continuing bonds (CB)*	Gr – Yes CB – Yes	Gr – Yes CB – Yes	Gr – Yes CB – No (BEI does not include	Gr – Yes CB – Yes	Gr – Yes CB – Yes	Gr – Yes CB – Yes	Gr – Yes CB – Yes	Gr – Yes CB – Yes	Gr – Yes CB – Yes

all facets of CBs)								
8. Was appropriate statistical analysis used?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes

Appendix B: CASP Checklist for Qualitative Studies

(Critical Appraisal Skills Programme, 2018)

Quality criteria	Study number		
	8	12	13
1. Was there a clear statement in the aims of the research?	Yes	Yes	Yes
2. Is a qualitative methodology appropriate?	Yes	Yes	Yes
3. Was the research design appropriate to address the aims of the research?	Yes	Yes	Yes
4. Was the recruitment strategy appropriate to the aims of the research?	Yes	Yes	Yes
5. Was the data collected in a way that addressed the research issue?	Yes	Yes	Yes
6. Has the relationship between researcher and participants been adequately considered?	No	No (only that it was reported to be therapeutic for the participants)	No
7. Have ethical issues been taken into consideration?	No	Yes	Yes
8. Was the data analysis sufficiently rigorous?	Yes	Yes	Yes
9. Is there a clear statement of findings?	Yes	Yes	Yes
10. Is the research valuable?	Yes	Yes	Yes

Appendix C: CASP Checklist for Cohort Studies

(Critical Appraisal Skills Programme, 2018)

Quality criteria	Study number			
	1	5	10	16
1. Did the study address a clearly focused issue?	Yes	Yes	Yes	Yes
2. Was the cohort recruited in an acceptable way?	Yes	Yes	Yes	Yes
3. Was the exposure accurately measured to minimise bias?	Yes	Yes	Yes	N/A
4. Was the outcome accurately measured to minimise bias?	Yes	No (CBS only at 5 years)	Yes	Yes
5(a) Have the authors identified all important confounding factors?	Yes	Yes	Yes	Yes
5(b) Have they taken account of the confounding factors in the design and/or analysis?	Yes	Yes	Yes	Yes
6(a) Was the follow up of subjects complete enough?	Yes	Yes (but high attrition)	Yes	Yes
6(b) Was the follow up of subjects long enough?	Yes	Yes	Yes	Yes
7. What are the results of this study?	See Table 1			
8. How precise are the results? (confidence intervals)	Good	Good	Good	Good
9. Do you believe the results?	Yes	Yes	Yes	Yes
10.Can the results be applied to the local population?	Yes	Yes (Caucasians only)	Yes	Yes
11.Do the results of this study fit with other available evidence?	Yes	Yes	Yes	Yes

Appendix D: Participant Information Sheet

Canterbury
Christ Church
University

Modern Mourning: How does Facebook Facilitate Continuing Bonds with the Deceased?

PARTICIPANT INFORMATION SHEET FOR FACEBOOK USERS

A research study is being conducted at Canterbury Christ Church University (CCCU) by Charlotte Sampson. It will be overseen by Dr Alex Hassett. You are being invited to take part in this research project. Before you decide to do so, it is important you understand why the research is being done and what it will involve, so please take time to read the following information, discuss it with others if you wish and ask us if there is anything that is not clear or if you would like more information.

Background

Over the lifespan of Facebook, naturally users have passed away and this has resulted in Facebook (and other online sites) being used after a bereavement, be that posting on a person's memorialised profile, setting up or being part of an in-memory-of group, or friends and family coming together to remember a loved one. We are interested in how Facebook is being used in this way, and what that might mean for the bereavement process in general in the digital age.

What will you be required to do?

Participants in this study will be asked to attend a one-to-one discussion either over the phone, Skype or instant messenger with the researcher Charlotte Sampson to discuss their experience of using Facebook (or other sites) following a bereavement.

To participate in this research you must:

- Be 16 years old or above.
- Have a Facebook profile.
- Have experienced a bereavement and used Facebook around it.
- Be English speaking.

Procedures

You will be asked to take part in an interview that usually lasts for up to 1 hour. If the interview is over the phone or it will be tape-recorded and typed up afterwards. We are interested in how you have been using Facebook around your bereavement, what impact this might have had on your grief, and any other thoughts you have on the subject. Some standard questions will be asked, but they will be a guide and the aim is to hear about your experience, and you can decide to share as much or as little as you want.

Feedback

A summary of the study can be provided to participants (the results will be anonymised). Please leave your email address if you wish to receive a copy.

Confidentiality

All data and personal information will be stored securely within CCCU premises in accordance with the Data Protection Act 1998 and the University's own data protection requirements. Data can only be accessed by Charlotte Sampson. After completion of the study, all data will be made anonymous (i.e. all personal information associated with the data will be removed).

Dissemination of results

Results of the research will be published. You will not be identified in any report or publication. The results will be submitted to the Journals Bereavement Care, Death Studies and Omega for publication.

Deciding whether to participate

If you have any questions or concerns about the nature, procedures or requirements for participation do not hesitate to contact me. It is up to you to decide whether or not to take part. Should you decide to participate, you will be free to withdraw at any time without having to give a reason.

Any questions?

Please contact Charlotte Sampson on cs916@ccad.canterbury.ac.uk or at Salomons Centre for Applied Psychology, Canterbury Christ Church University, 1 Meadow Road, Tunbridge Wells, TN1 2YG.

Appendix E: Consent Form

Canterbury
Christ Church
University

CONSENT FORM

Title of Project: Modern mourning: How does Facebook facilitate continuing bonds with the deceased?

Name of Researcher: Charlotte Sampson
Contact details:

Address:

| Salomons Centre for Applied Psychology |
| Canterbury Christ Church University |
| |
| 1 Meadow Road |
| Tunbridge Wells |
| |
| TN1 2YG |

Tel:

| 01227 927166 |

Email:

| cs916@ccad.canterbury.ac.uk |

Please initial box

1. I confirm that I have read and understood the information sheet for the above study and have had the opportunity to ask questions.

2. I understand that my participation is voluntary and that I am free to withdraw at any time, without giving any reason, but the data can only withdrawn within 1 month of the interview.

3. I understand that any personal information that I provide to the researchers will be kept strictly confidential.

4. I understand that the interviews will be discussed in detail with supervisor.

5. I understand that anonymised direct quotes will be used in the thesis and publication.

6. I agree to take part in the above study.

_____   _____
Name of Participant   Date   Signature

_____   _____
Name of Person taking consent   Date   Signature
(if different from researcher)

_____   _____

Researcher   Date   Signature
Copies:1 for participant, 1 for researcher

Appendix F: Interview Schedule

<u>Interview Schedule for Facebook Users</u>

<u>Introduction</u>
Answer any questions arising from information sheet.
Ask for participant's date of birth – must be 16 years or above to take part.
Remind participants of limits of confidentiality.
Clarify that any quotes or themes used from the interview will not be identifiable when published.
Check consent and collect consent form.
Reimburse travel expenses.

<u>Interview</u> (Questions may be amended prior to use on the basis of data collected in first phase.)

General use of Facebook
1. Is Facebook something you use frequently? How often would you say you go on it?

Use of Facebook in relation to bereavement
2. Since the loss of [bereaved person], how have you used Facebook (or any other sites)?
    (Prompts: Do you visit the person's profile? Have you joined any groups? For what reason do you go on those pages? What do you use these pages for? When do you tend to go on the pages? How often do you go on these pages? What do you like and not like about these pages?)

3. Has your use of Facebook changed since they passed away?
    (Prompts: Have you used it more or less at certain points? Have you used it in different ways at different times? In what ways was it different? What about when others comment on and 'like' it? Was that helpful? What did you find useful about it? Anything you didn't find helpful about it?)

4. How do you think this has impacted your grieving and your feelings about [deceased person]?
    (Prompts: Can you tell me a little bit more about that? How do you think that happened? What are your thoughts about that? How do you understand that?)

Final thoughts
5. Is there anything else that is important for you to tell me about today?
    (Prompts: Is there anything relevant that we haven't touched on? Is there anything you would like to add?)

<u>Demographic information</u>
(Remind participant that none of this would be published individually).
Collect any remaining demographic information that was not disclosed during interview. Including: interviewee's age, gender and ethnicity; deceased person's age at death, gender, country, ethnicity, cause of death.

Appendix G: Ethical Approval

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Appendix H: Protocol for Responding to Participant Distress

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Appendix I: Protocol for Responding to Distress on Facebook

Protocol for responding to Facebook comments or messages which indicate high levels of distress.

<u>Purpose of the protocol</u>
Due to the use of a public Facebook page to advertise and recruit participants, a protocol will guide how to identify and respond to messages of comments from those who are expressing high levels of distress due to a bereavement or seeking help after a bereavement.

<u>Identify the message/comment as indicating potential high levels of distress</u>
- Very recent bereavement (for example, my father died last night).
- Mention of suicidal thoughts – for example not wanting to 'be here' anymore, not wanting to be alive, wanting to 'be with' the deceased person, that loved ones 'would be better off without me'.
- Mention of a suicidal plan.
- Mention that crisis mental health services or police have been involved.
- Mention that they are not coping with the bereavement.

<u>Standard response</u>
I am very sorry to hear that. If you are seeking support, I would advise you to contact your GP, or alternatively Cruse https://www.cruse.org.uk/get-help/helpline or
Samaritans https://www.samaritans.org/how-we-can.../contact-samaritan/ (phone 116 123). I would appreciate if you let me know what you decide to do.

<u>Following resolution</u>
If it is a public comment, use the 'hide' function, so that other Facebook users cannot see the comment, only the person who posted it. This is a precaution as it may attract further comments or similar use of the page. However, the comments will not be 'deleted' as this may be perceived as rejection and insensitive.

Appendix J: Example Memos

This has been removed from the electronic copy.

Appendix K: Facebook Advertisement

We are doing **research**, asking people how they have used **Facebook** after a **bereavement**.

It involves a **brief interview** via phone or Facebook Messenger. All who take part will be entered into a **prize draw to win £50**.

To find out more, please **contact:**
Charlotte Sampson – Trainee Clinical Psychologist
Email c.sampson916@canterbury.ac.uk
Facebook page fb.me/modernmourning1

Appendix L: Open Coding from Final Interview

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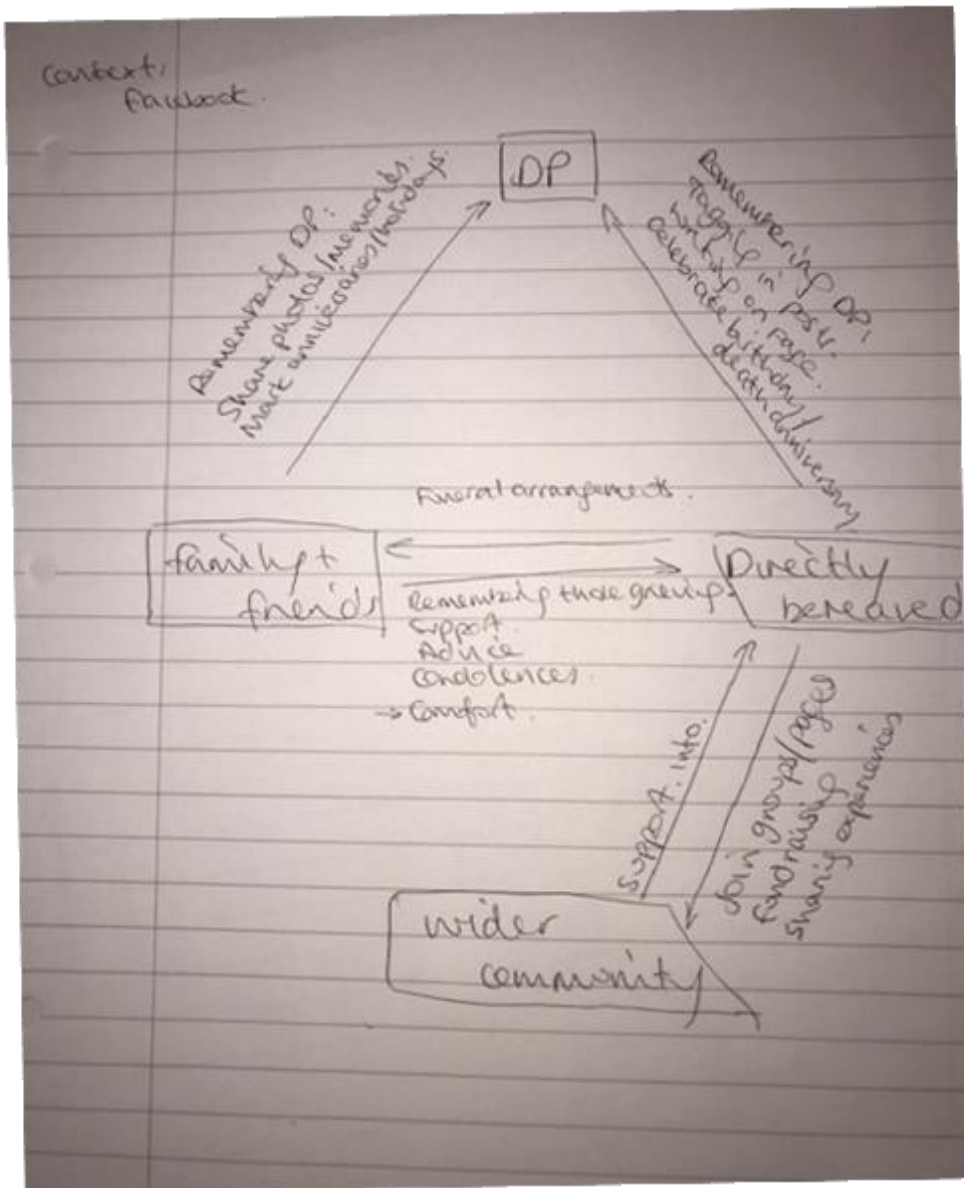**Appendix M: Selective Coding Extracts from Final Interview**

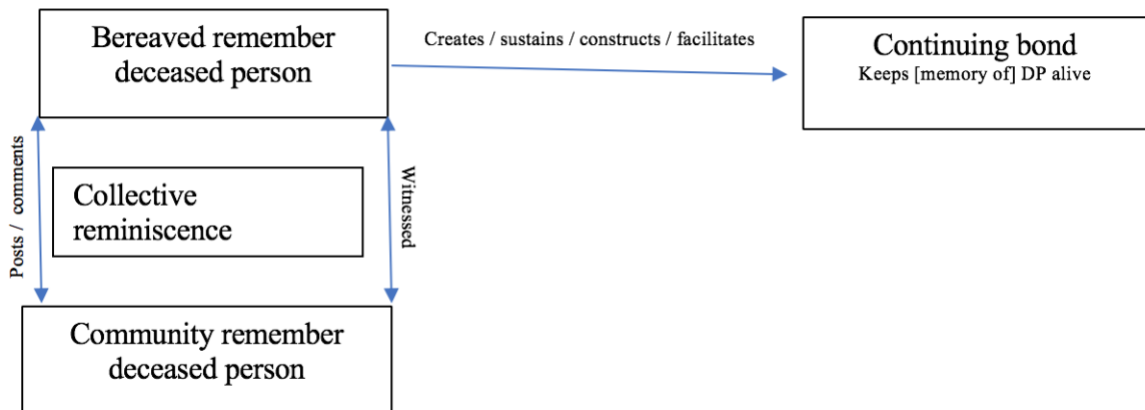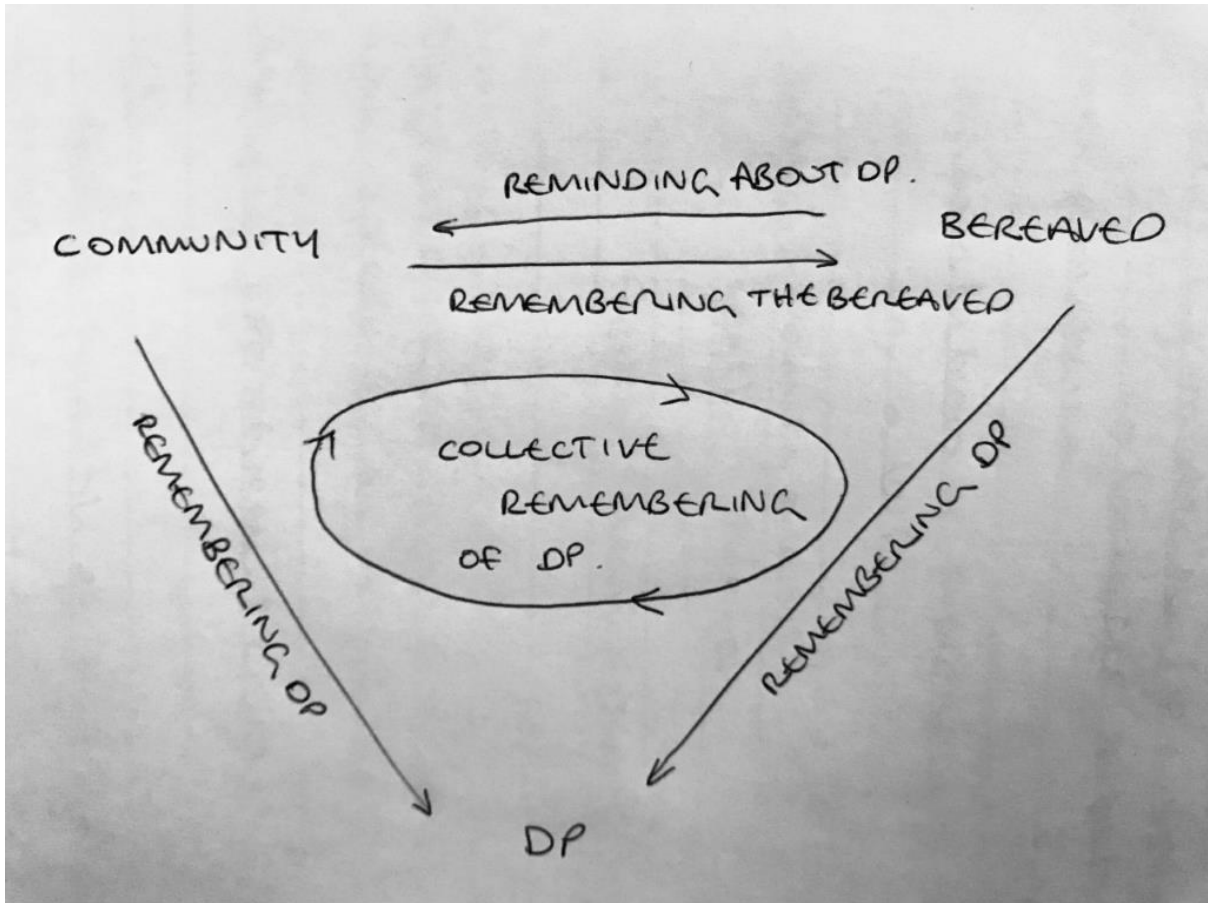This has been removed from the electronic copy.

Appendix N: Table of Categories and Selective Codes

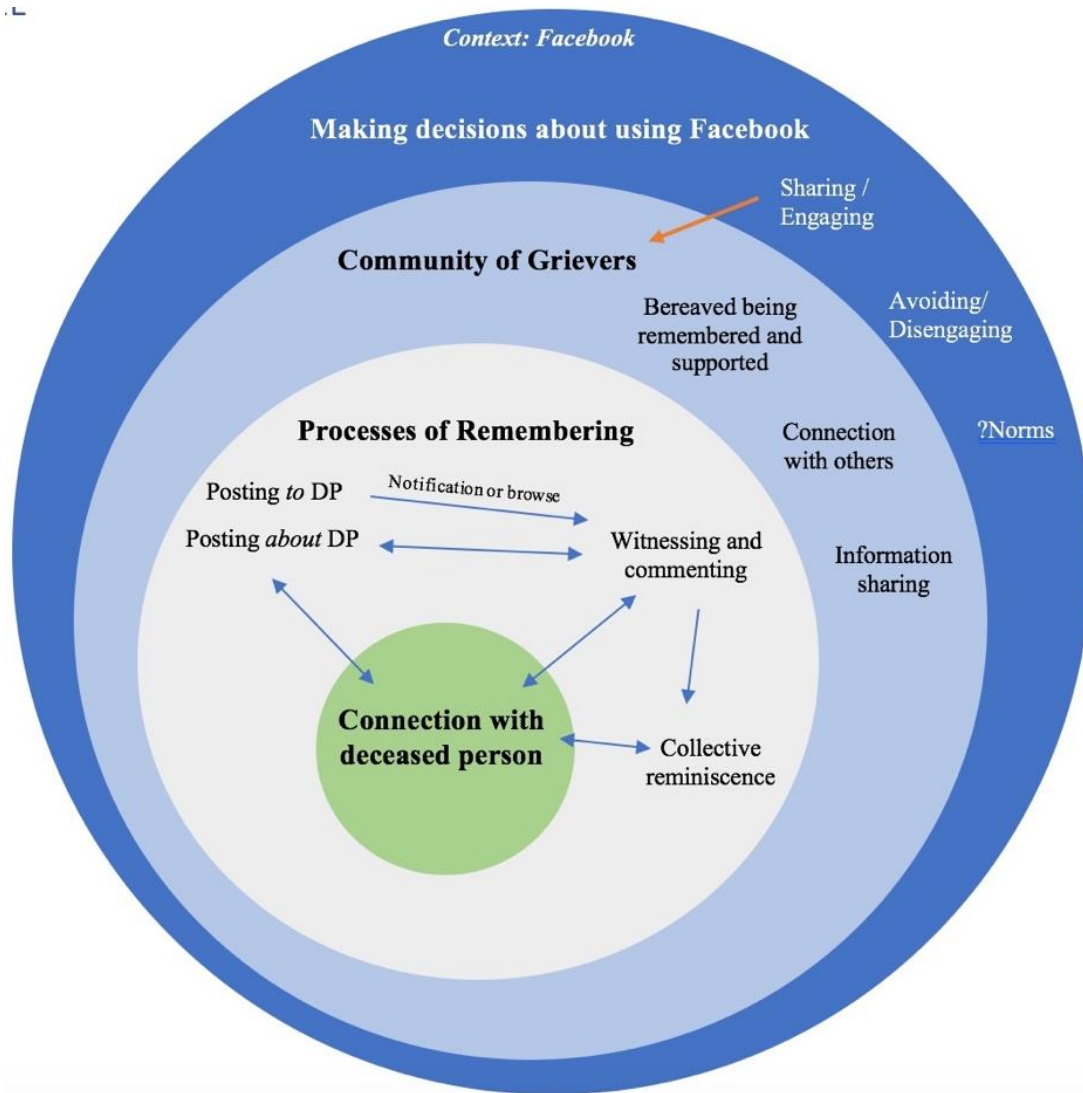| Category	Subcategory	Phase one selective codes	Phase two selective codes
Facebook use	Engaging and sharing		T2 Deciding how much to share. T5 Choosing whether, how and when to respond to Fb. T4 Deciding what to share. T1 Deciding when to post. T2 Being selective about what to follow. T7 Process of memorialising DP's profile T4 Generational differences in use of Facebook. T4 Responsibility to be authentic / honest / transparent when posting.
	Disengaging		T5 Can't relate to grief group / disengaged T6 Avoiding info about DP dying. T7 Avoidance of Facebook. T6 Preferring anonymity T6 Avoiding reminders of DP. T6 Feeling harassed by friends of DP.
Social support	Remembering the bereaved	Condolences to family.	T2 Supporting and being supported by others who are grieving. T5 Being remembered by community. T5 Eliciting support through Facebook posts. T3 The grieving family being remembered. T4,7 Feeling supported by others.
	Emotional support	Expressing shared emotions (shock, missing, disbelief, sadness).	T3 Connecting with others in Fb grief group. T4 Following others who have been bereaved. T1 Connecting family online and offline. T3 Community of grievers. T4 Helping others by posting T5 Supported by/engaged in grief groups.
	Instrumental support	Charity fundraising and donations. Offers of support for those bereaved.	T2,3,5 Fundraising

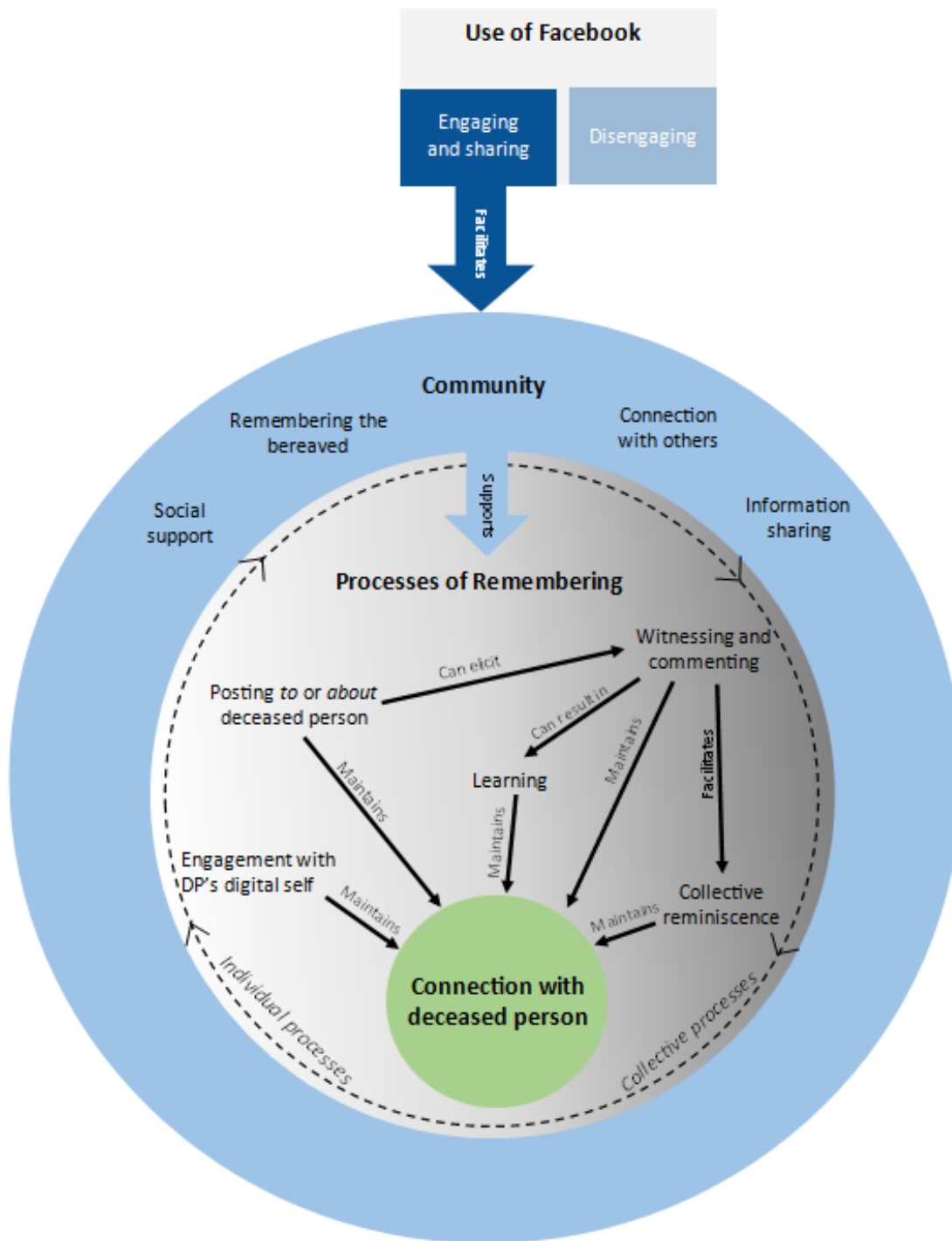|				
	Information sharing		Directly bereaved sharing information with others e.g. funeral arrangements. Advice giving.	T5 Information sharing.
Processes of remembering	Posting	About DP	Reminiscing and sharing memories of DP. Describing DP's character (positive attributes). Remarking on the passage of time since death. Impact of the DP on those bereaved. Expressing missing for DP. Constructing the legacy of the DP. Marking anniversaries and holidays. Describing DP's continued existence e.g. angel or spirit. DP and love for them lasting for eternity/forever. Doing things in honour of DP. Doing things that DP enjoyed. Sharing photos. Expressing love for DP.	T1 Remembering DP. T2 Marking anniversaries / holidays T3 Posting on DP's birthday and anniversaries T3,7 DP's page as a memorial. T5 Others remembering DP. T3, 7 Reminding others of DP. T7 Sharing photos. T3 Sharing memories of DP
		To DP	Writing messages directly to DP.	T7 Posting to DP. T3 Writing phrased directly to DP. T3 Tagging DP in posts.
	Witnessing and participating		Others commenting on the messages written by the bereaved to DP.	T5: Tagging DP in a comment means his friends get updated and respond. T5: Looking at posts to remember DP.
	Collective reminiscence			T5 Collective reminiscence.
	Learning			T1,4,5 Learning about DP's life.
Connection with DP			Reassurance from others of ongoing connection with DP.	T1 DP is 'still with us'. T3 Keeping DP's memory alive. T4 Continuing the relationship with DP. T5 Keeping DP 'alive'. T7 'He's still there.' T7 Connection with DP

Appendix O: Progression of Model

WIDER COMMUNITY

BEREAVED

Sharing information

Remembering the grief of

COMMUNITY

Processes of remembering the DP

Participate in

Participate in

Bereaved reminding community about DP

Post/comment about/to DP

Results in

Witnessing and replying to posts

Can facilitate

Collective reminiscence

Ongoing connection with DP

Memory of DP is kept alive

Creates / sustains/ constructs

Continuing bond with deceased person

Context: Facebook

Making decisions about using Facebook

Sharing / Engaging

Community of Grievers

Bereaved being remembered and supported

Avoiding/ Disengaging

?Norms

Processes of Remembering

Connection with others

Posting *to* DP

Notification or browse

Posting *about* DP

Witnessing and commenting

Information sharing

Connection with deceased person

Collective reminiscence

Appendix P: End of Study Summary Report for Participants and Ethics Committee

'He's still there':
A grounded theory of how Facebook facilitates continuing bonds with the deceased.

Background

Research suggested that some bereaved people use Facebook to continue bonds with the deceased. However, no theory had been developed to suggest how this may happen or the processes involved.

Method

Grounded theory was used to analyse data, explore and propose a theory for how bonds with the deceased were continued through the use of Facebook. The data consisted of 103 posts on in-memory-of Facebook pages, including 388 comments, and seven interviews with Facebook users who had been bereaved.
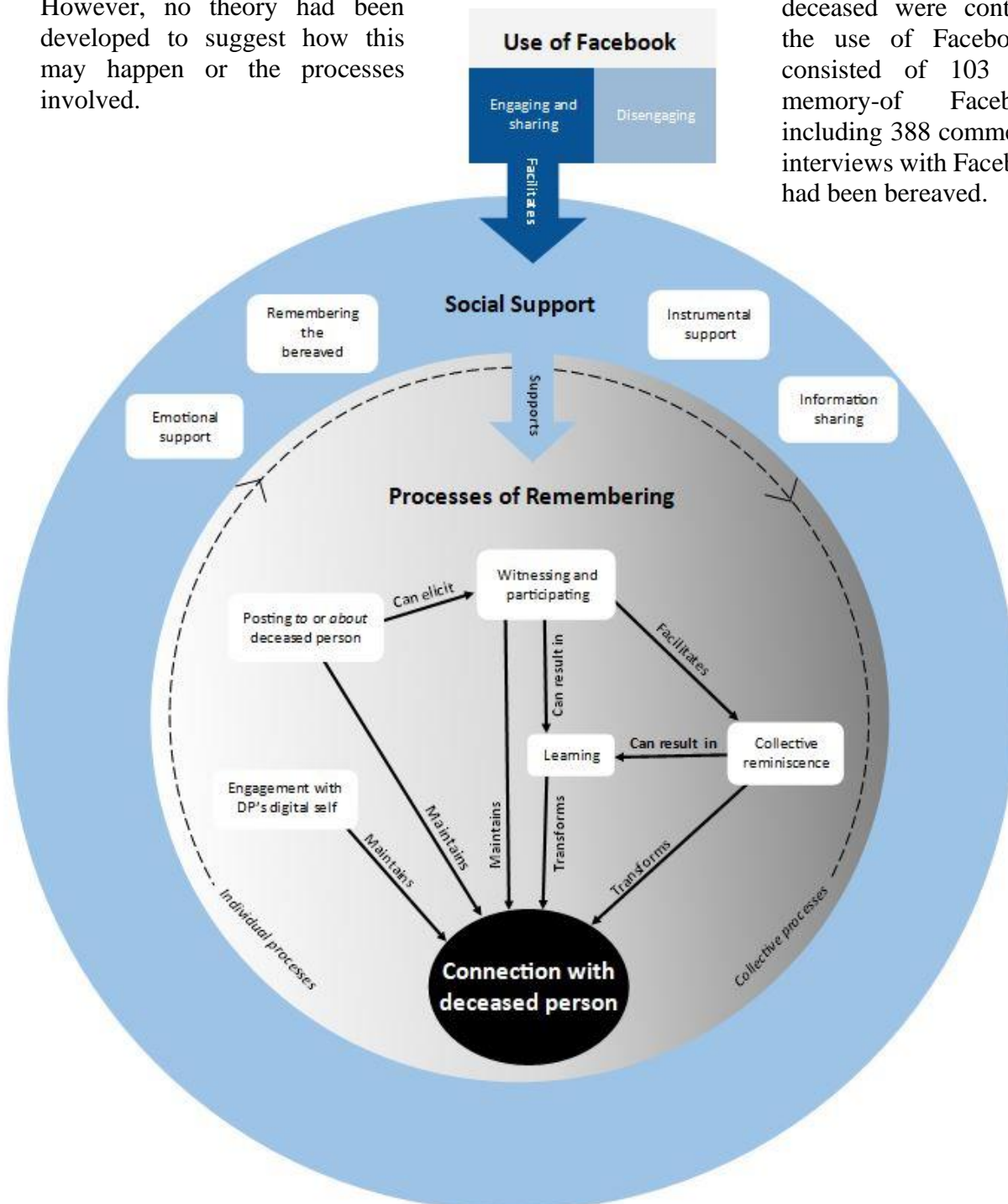
Findings

A theoretical model was developed suggesting that those who engaged with Facebook following a bereavement, in the context of social support, may be involved in individual and collective processes, which maintain the connection with the deceased person. These can involve engaging with the deceased person's profile, posting about or to the deceased person, witnessing and replying to one another's posts, collective reminiscence and learning new things about the deceased person, which all helped to maintain, and even transform, the connection with the deceased.

Implications for Research

This research suggests a model for understanding how bonds with the deceased are continued through Facebook. The dominance of collective processes in the proposed model, supports the call for more attention on the intersubjective and co-constructed elements of continuing bonds online. Data collection using email may be useful for future research to incorporate, in order to capture data from those who may find a traditional research interview too distressing.

Implications for Practice

The current research had also planned to interview bereavement therapists but had been unsuccessful in recruiting any with experience of speaking with their clients about Facebook use. This could have been for a variety of reasons, however, if it is a lack of awareness or confidence to address the subject on the part of the clinicians, then this research hopes to be a step towards improving that by providing a framework to understand it. This research also demonstrates how integral and significant online interactions with the deceased and community can be relation to a bereavement.

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