

## CHAPTER 2

### LITERATURE REVIEW AND THEORETICAL FRAMEWORK

#### 2.1 INTRODUCTION

This study deals with how Black urban widows in South African transitional societies, whose husbands have died of terminal illnesses, experience and cope with bereavement. The focus of the study includes anticipatory and actual bereavement. In addition, different practices and beliefs within the African context pertaining to the topic of investigation are described and discussed. Some of these descriptions and discussions are based on my observations in the community and my participation in various facets of death and bereavement. In cases where the information was gleaned from my own observations, the source will be indicated by the acronym *r.o.s* (researcher's own observation). This is necessary because of the lack of academic literature to refer to on this topic.

This chapter consists of three parts. Bereavement forms the central construct around which the chapter is structured. Firstly, literature about bereavement is presented. Secondly, theoretical approaches relevant to studying bereavement, which include cognitive theory, attribution theory, coping strategies, attachment theory, Schachter and Singer's two-factor theory of emotions, systems theory, cultural perspectives on bereavement, and other selected theories are discussed. Lastly, the relevant constructs from the selected theories are integrated in a unified approach.

In the section that follows, bereavement, as the core construct of this study will be discussed by focusing first on its definition, followed by its conceptualisation, diagnostic issues, etiological issues and the differentiation from mood and anxiety disorders.

## 2.2 BEREAVEMENT

### 2.2.1 Definition of bereavement

Ong et al. (2004) view bereavement as the emotional state of having suffered a loss. Moody and Arcangel (2001) see it as a state of being deprived after loss. Kubler-Ross and Kessler (2005) also regard it as an experience during the period following a death when mourning occurs. On the basis of these views, bereavement can thus be described as an emotional state of deprivation after suffering the loss of a loved one that occurs during the period of time following a death.

Bereavement can be seen as an overarching psychobiological state, which encompasses grief and mourning. The affective system is also composed of defined structures, namely, the affective schemata that produce affect when activated. Bereavement can also be seen as an affective reaction and an integral part of psychobiological strategies concerned with survival (Beck, 1996; Dyregrov, 2004). It is a state that activates cognitive, affective and behavioural schemata and manifests as grief and mourning. During this state, feelings of loss often grow in intensity and are associated with feeling alone.

A bereavement process does come to an end, although the memories of the person lost remain. Once the loss loses its overpowering effect with time, closure is achieved in different ways. This occurs for example during the burial itself, viewing the corpse, when the coffin is slowly lowered into the grave, the cleansing ceremony, and the unveiling of the tombstone. These practices differ between cultures as every culture, including transitional societies, has developed unique ways for the living to pay tribute to the dead. In African culture, for example, memorial tombstones and graves serve as a powerful source of

comfort and support for the living. A grave provides a specific place for the family to visit, as opposed to cremation where there may be no visible marker (r.o.s).

Although there are human universals, each individual is also unique, family background, the manner in which cultural heritage is internalised, and genetic makeup (Malkoc, Kay & Webster, 2002). Accordingly, each individual responds differently to bereavement, its expression, and the coping mechanisms that are required. Although similarities are found across individual experiences, there is naturally a wide range of personal bereavement experiences (Kubler-Ross & Kessler, 2005).

Psychologically speaking, it is impossible to predict the course of one's bereavement. This said, the burden of emotional pain usually lifts, with people eventually regaining meaning and purpose in life even in the midst of feeling the loss. On this basis, bereavement can thus also be seen as a process of meaning construction that evolves throughout the life of the bereaved. In the section to follow, concepts that are relevant to bereavement will be looked at.

### **2.2.2 Conceptualisation of bereavement**

Grief, mourning and bereavement are related terms signifying reactions to the loss of a loved one. Mourning and grief are complementary as mourning without grief and grief without mourning; rarely occur (Ong et al., 2004). The conceptualisation of bereavement is intended to represent mourning as a normal phenomenon. However, an important limitation of the Diagnostic and Statistical Manual's DSM-IV-TR's vagueness on this point is that it does not provide a means of distinguishing between individuals who show common grief reactions from those who do not (American Psychiatric Association, 1994).

### **2.2.2.1 Functional and dysfunctional bereavement**

What is functional bereavement for one individual may be dysfunctional for another, as loss may produce profound and lasting changes in physical arousal, emotions, cognition, and may sever these normally integrated functions from one another. The ordinary human response to loss is a complex, integrated system of reactions, encompassing both body and mind (Higgins & Glacken, 2009). It is inevitable that some kind of reaction to the loss of a husband will occur in a woman's life. Loss tends to focus the widow's attention on the immediate situation, may alter her ordinary perceptions, and evoke intense feelings of fear and anger. However, changes in arousal, attention, perception and affect implicit in these reactions are normal, adaptive reactions.

In the sections that follow, the cognitive equilibrium model (CEM) (Malkinson, 2001) is used together with Bowlby's (1963) phases of bereavement to provide a framework for understanding people's general response of bereavement following a loss.

#### **2.2.2.1.1 Functional bereavement**

Functional bereavement develops through a number of phases. Although these phases, ranging from initial disbelief and the ultimate acceptance of the death, have been described in the literature, because of people's individual uniqueness, these different phases do not unfold in the same manner for all people (Carr et al., 2001). These phases are discussed in this thesis with the purpose of using them in the conclusion chapter as a reference to a functional process of bereavement in Western culture and also to see if they are relevant in transitional Black South African culture.

As the widow adjusts or accommodates to the loss, cognitive structures become modified, signalling the final phase of the bereavement process (Gow, 1999). This is the period of relocating the relationship with the deceased within one's life in a new perspective, as one adapts on emotional, behavioural, physical, spiritual and social levels. This is the phase of letting go of the ambivalence that is associated with the change in the widow's life brought about by the death of her husband. It involves the widow's cognitive processes of assimilation and accommodation. At a cognitive level, cognitive structures rearrange and establish a new equilibrium. The widow's perspective of her relationship with the deceased is renegotiated and relocated within her life. She then finds and creates different ways of remembering the deceased, and finds an appropriate 'holding-place' for the loss, which enables her to function optimally in her environment (Gow, 1999).

A functional bereavement process seems to revolve around the widow's ability to achieve equilibrium, which implies a balanced and homeostatic mental state (Fredrickson, Mancuso, Branigan & Tugade, 2000). The process of equilibration helps in the forward-backward movement between equilibrium and disequilibrium for the development of more adaptive cognitive schemata after each bereavement phase (Ayers et al., 2007). This view assumes an innate constant tendency to organise one's experiences with the environment, leading towards adaptation and a state of internal equilibrium. This motivational tendency to create a balanced relationship between the self and the external environment is of central importance to understanding bereavement from a cognitive perspective.

Milbrath et al. (1999) observe that conjugal loss might also initiate a process that can lead to dramatic growth or a quiet reorientation. Eckstein, Leventhal, Bentley and Kelley (1999) describe a process of moving from being a wife to being a widow to being a woman. This means that a widow must first accept the reality of the loss, signifying that she is no longer someone's wife. Growth will only occur

when the widow gives up her view of herself as partnerless and strives to enhance her sense of individuality.

In summary, in functional bereavement, when the widow experiences her husband's loss, she responds with cognitively adaptive efforts to help her return to or exceed her previous level of psychological functioning, which involves various cognitive processes.

#### **2.2.2.1.2 Dysfunctional bereavement**

Nolen-Hoeksema (2000) talks about rumination, i.e. the tendency to respond to distress by focusing on the causes and consequences of your problems without moving into active problem solving. She found that people who ruminate in response to difficult circumstances have more severe and prolonged periods of depression and anxiety. Furthermore, Boelen, van den Bout and van den Bout (2003) also find that behavioural and cognitive avoidance strategies were significantly related to the severity of traumatic grief and depression. Stroebe et al. (2007) argue for a reconceptualisation of ruminative coping with the death of a loved one as an avoidant rather than a confrontation strategy. They find ruminative coping to be characterised by a persistent, repetitive and passive focus on negative emotions and symptoms. This way of coping was theoretically described and empirically shown to be a maladaptive process of grieving, and thus dysfunctional, as it may occur when action is of no avail (Stroebe et al., 2007). This may take place when neither resistance nor escape is possible, and the widow becomes overwhelmed and disorganised. She may experience intense emotions, but without clear memory of the loss, or may remember everything in detail without knowing why. Symptoms of loss may become disconnected from their source and take on a life of their own (Higgins & Glacken, 2009). Rumination then seems to exacerbate negative thinking, interfering with good problem solving, where ruminators are more likely than non-

ruminators to engage in impulsive, escapist behaviours, for example, binge eating.

Field, Bonanno, Williams and Horowitz (2000) and Kissane, Bloch, McKenzie, McDowall and Nitzan (1998) describe various characteristics of dysfunctional bereavement. These include a lasting loss of interest in social interactions, or furious hostility against specific people. Poor judgement (for example in handling finances), overactive behaviour combined with sadness, and bitter self-accusation are also common. Upsetting memories and yearnings for the deceased on a daily basis over a long period of time, long-term efforts to avoid reminders of the deceased, and difficulty acknowledging the deceased also play a role in dysfunctional bereavement. In some cases widows may develop physical symptoms similar to the medical illness of the deceased, or develop psychogenic symptoms like headaches that are not related to any physical problems or illness. Carr et al. (2001) suggest that dysfunctional bereavement might not show until long after the loss, and may be characterised by prolonged suffering and interruption of normal activities, preventing life from being lived to the maximum.

The most basic cause of dysfunctional bereavement is not completing the bereavement process (Carr et al., 2001). This means that the widow becomes stuck in a state of complicated bereavement (Archer, 1999), where she stops progressing in her recovery from the death. This makes dysfunctional bereavement a disruption in the normal bereavement process, and prohibits healthy closure and healing for the affected people. According to Ong et al. (2004), the disruptions to normal attachment sequences of numbing, yearning and searching, disorganisation and despair, and reorganisation, contribute to dysfunctional bereavement (Blatt & Luyten, 2009).

The extent of support received from the widow's environment is important, as in African culture a human being should never be alone when confronted with a loss (Selepe & Edwards, 2008). The widow forms part of a network of people who can support, encourage and help her. This social support can contribute to the widow's appraisal of feeling less powerless, disturbed and discomforted, therefore resulting in fewer negative outcomes. A lack of support from family and friends can contribute towards difficulty in progressing fully through the bereavement process (Manyedi et al., 2003).

Within the South African context, dysfunctional bereavement may occur, among others things, as a result of changes in the impact of the community on the widow. This relates specifically to the emerging individualistic nature of Black urban societies and the associated unsupportive tendency of the community, as well as unrealistic expectations of the widow to show courage (Carr et al., 2001), and to heal within a certain period of time due to the demands of urban society (e.g. compassionate leave from work is of limited duration). Despite that, different widows may have different experiences of support from their families and community, which could just be a matter of degrees when compared with practices in rural areas. For example, some widows may have supportive employers who may or may not understand the practices expected from the widow and respect social and cultural expectations, when other employers may not.

In addition to the lack of support from family and friends, people's attachment styles can contribute to their progression through the bereavement process. For example, a widow with a secure attachment style, who experiences more positive and less negative emotions, more adaptive responses, greater openness and flexibility in social cognition, and more problem-focused coping with threatening situations, is likely to deal with her bereavement more effectively than a widow with an insecure attachment style who experiences emotional swings, more



negative emotions in social interaction, greater loneliness, and a tendency to have a relatively closed and inflexible social cognition (Ong et al., 2004). Despite that, widows carry this identity throughout their lives, even if they remarry or have new partners, where their identity in the eyes of the Black community does not change. The widow remains her late husband's wife.

What dysfunctional bereavement is to one person may be functional to another person, due to, amongst others, age, gender, marital status, quality of the marriage, social support, socio-economic status, culture, and so on (Schmidt & Joiner, 2004; Shen & Tran, 2009). These authors argue that the influence of depression on the processing of personal attributes is due to the disorganisation of the self-schema in depression.

As mourning is influenced both by the culture in which people grow up and by the culture in which they live as adults (Archer, 1999), a conflict between one's self-schema and culture may contribute to dysfunctional bereavement. This is because the development of the self and hence the development of self-knowledge as an active learning process, may be in conflict with the way of doing things in the social environment (Lalonde, Hynie, Pannu & Tatla, 2004).

People's bereavement depends on their cognitive interpretation of the loss, the shared scripts of their culture, attachment styles, and other related factors. The severity of the loss and duration of bereavement, including the necessity for professional help, among other things, can vary substantially, depending on the influence of various social characteristics of the widow (Bernard & Guarnaccia, 2004).

### 2.2.2.2 Determinants of bereavement

According to Parkes (1998), the nature of the bereavement is determined by three factors: (a) a persons' gender, age and relationship with the deceased; (b) the mode of death, and (c) one's personal vulnerability. These factors are discussed briefly in this section.

In some marriages, companionship consists only of sharing daily routines and outings. In other marriages, the relationship is characterised by an intense sharing of the couple's intimate lives. In all cases, the death of a spouse necessitates finding a substitute companion or tolerating a lonelier life. The loss of a spouse who had been a best friend represents additional impoverishment, including the loss of a sexual partner. According to Klass and Walter (2001), some widows totally lose interest in sex as one aspect of bereavement and become celibate for some time after their husbands' deaths. With time, however, at least some may report a renewal of sexual interest and unsatisfied yearnings.

Age also plays a role in determining the nature of the widow's bereavement. Sources of stress and coping styles probably vary with age. Most widows, depending on their ages, have to face major social adjustments in their lifestyles (Bernard & Guarnaccia, 2004). The loss of the husband may mean the loss of the main income producer, imposing on the widow not only the sole responsibility of managing the family's finances, but also the problem of compensating for the husband's absent contribution. The sudden need to manage the finances may be stressful for older widows who have no understanding of money matters, and who lack practical job skills that would enable them to find employment. In cases where there are growing children, the widow must carry the total responsibility for raising them and fulfilling the roles of both mother and father to satisfy the children's instrumental and emotional needs (Rosenblatt & Nkosi, 2007).

A young widow may remind others of the fragility of life and be seen by other women as a threatening sexual rival. She may also no longer have access to previously available social support. Widows are often referred to as “someone’s wife”, implying that their identities depend on that of their husbands. Widowhood therefore thrusts upon widows a new need for different identities (Rosenblatt & Nkosi, 2007).

The mode of death strongly influences the bereavement process (Archer, 1999). The different modes can be categorised as sudden death, violent death, and anticipatory death. The bereavement process in *sudden unexpected death* is often more intense because there is no warning that the event is going to happen. The situation is so normal, so self-evident, yet suddenly something happens which makes the world look totally different (Vess & Arndt, 2008). Common responses to sudden death are denial and disbelief. This form of denial assumes varying degrees of intensity. For example, the widow may behave as if the deceased is still alive. The impact of a sudden and *violent death* is similar as they are both sudden and not anticipated.

Death comes as no surprise in *anticipatory death*. In this case, caregivers are often emotionally and physically exhausted because they look ahead, predicting, expecting or preparing themselves for an impending loss. They go through three stages, namely, the anticipation stage before the death, the waiting stage when waiting for the death to happen, and the period after the death (Neimeyer, Stewart & Anderson, 2004). During each stage of the process, they experience conflicting emotions and states of mind, and typically use a combination of problem-focused coping and emotion-focused coping at every stage.

### **2.2.2.3 Misconceptions about bereavement**

Misconceptions about bereavement often lead to dysfunctional bereavement as they impact the cognitive reality of death. According to Bernard and Guarnaccia (2004), most people fear that if bereavement is allowed to take place, then it will go on indefinitely and have a negative impact on their motivational schema. The truth is that the only bereavement that does not end is the kind of bereavement that has not been fully dealt with, as bereavement that is experienced does dissolve. Another contributing factor, according to Carr et al. (2001), is the misunderstanding of tears as 'breaking down' when in fact weeping affords people a necessary release of intense feelings.

Another misconception is the idea that continued bereavement is a testimonial to one's love for the deceased. The widow may honour her late husband more through the quality of his or her continued living rather than by constantly remembering the past (Fredrickson et al., 2000; Gerjets, Scheiter & Tack, 2000).

### **2.2.2.4 Emotions**

Each emotion has its own structure, much in the same way that each individual is structured differently with a unique purpose in life (Shaver & Tancredy, 2001). Walsh, King, Jones, Tookman and Blizard (2002) describe an emotion as a subjective feeling that affects and is affected by one's thoughts, behaviour and physiology. These thoughts, behaviour and physical processes form the basis of affective schemata. For example, bereavement serves the purpose of transition and growth (Ong et al., 2004). According to Walsh et al. (2002), people are also aware that they are likely to feel sad when they are separated from their loved ones, and to feel angry when they are unfairly treated. Affect related to pleasure and pain plays a key role in the mobilisation and maintenance of behavioural patterns. This explains why individuals can experience a full range of feeling from

positive and pleasant emotions (for example, love, happiness, joy, and affection) to negative and unpleasant emotions (for example, fear, sadness, hate, and anger) (Walsh et al., 2002). Although functional bereavement includes the experience of negative emotions, it can be hypothesised that widows who also often experience positive emotions would more often experience functional bereavement.

According to Walsh et al. (2002), emotional mechanisms serve to reinforce behaviours directed towards survival and bonding through the expectation and experience of both negative and positive emotions. Affective schemata produce different feeling states through automatic thoughts and the meanings attached to events, contributing to the arousal of an emotion concerned with survival (Colfman et al., 2006). An emotion can thus be explained as the process that starts when something is perceived, appraised and developing an attitude. Mikulincer, Hirschberger, Nachmias and Gillath (2001) view bereavement as an affective reaction and an integral part of psychobiological strategies concerned with survival. Bonanno and Field (2001) hypothesise that a dysfunctional attitude acts as a general psychobiological indicator. As such, the attitudes of bereaved individuals become their personal coping resource.

According to Colfman et al. (2006), the affective system produces different feeling states, shadings and combinations. This variation of emotions is also evident in cultural differences in affective experiences. For example, the range of emotions associated with bereavement and which are allowed social expression differs from culture to culture. In some societies, both sexes are allowed the release of tears in public and some even expect an open show of emotions at funerals and encourage the expression of bereavement during mourning.

#### **2.2.2.5 Emotional pain**

The pain of bereavement is an affective schema of a psychological pain, which seems to have no clear physical location, but entails the experience of damage to the self (Archer, 1999; Zautra, Smith, Affleck & Tennen, 2001). Holm and Severinsson (2008) support this by viewing emotional pain as a subjective psychological experience. This suggests that a negative affective schema could be experienced even in the absence of bodily damage. It does not, however, imply a total absence of physical processes. The pain of bereavement is an affective reaction, which is an integral part of psychobiological strategies concerned with survival. It is an inevitable experience during the bereavement process.

The perception of emotional pain can also be determined by individual socialisation experiences, and the relative degree of individual extroversion or introversion (Bonanno, 2001). In this case, the expression of emotional pain may be associated with how one presents herself. Open and flexible social cognition, for example, may allow a woman to express emotions in a manner that will be functional in her bereavement. Personal vulnerability also plays a major role in people's mental, emotional and spiritual health, and in determining how they cope with loss. People differ in terms of their vulnerability because of individual differences in emotion, which reflects differences in cognitive appraisal and coping at any given stage of a stressful situation (Shaver & Tancredy, 2001).

#### **2.2.2.6 Grief**

The DSM-IV-TR explicitly avoids the categorical distinction of complicated versus uncomplicated grief. However, Parkes (1965) proposed one of the earliest expositions of complicated versus uncomplicated grief. Parkes distinguished uncomplicated grief from three forms of atypical grief based upon interviews with

patients who had been hospitalised for psychiatric illnesses within six months following the death of a parent, spouse, sibling or child. He identified chronic grief as the most common form of grief in the interviewed sample, defined as an extended variant of typical grief in which symptoms are particularly pronounced. The reaction is always prolonged and the general impression is one of deep and pressing sorrow. In contrast to chronic grief, Parkes defined inhibited grief when a bereaved person evidenced little overt reaction to the loss. He highlighted inhibited grief as an atypical grief reaction that is present primarily in children. He described delayed grief as occurring when a typical or chronic grief reaction follows a period in which grief is inhibited.

People's attachments to others are amongst the most intense and influential of human experiences (Shaver & Tancredy, 2001). Zautra et al. (2002) view grief as an instinctive response to loss within attachment relationships, and agree that it involves bodily and psychological reactions. From a cognitive psychological point of view, grief involves a cognitive-affective-motivational-behavioural network. The perception of loss (i.e. a cognitive schema), and feelings such as anxiety, insecurity, abandonment and vulnerability (i.e. affective schemata) form an integral part of psychobiological strategies concerned with survival. This is related to Archer's (1999) and Parkes' (1972) view of grief as complex processes of detachment where the affective schemata serve to reinforce behaviours directed towards survival and bonding which, in the process, trigger automatic and spontaneous motivational-behavioural schemata. This spontaneous process becomes activated, and is followed by the behavioural schemata (scripts), for example, crying out the hurt of the loss. Vess and Arndt (2008) summarise grief as a biologically founded pattern of physical and psychological reactions developing along setlines.

The cognitive-affective-motivational processes related to grief usually lead to recovery and healing, and eventually adaptation (Forgas, Baumeister & Tice,

2009). This offers the opportunity for growth, because these processes disrupt and sometimes shatter one's established way of viewing or making sense of the world, and provide for a new integration. Grief has evolved to encourage the human species to maintain social bonds and make attachments that are critical for survival, as one cannot survive alone (Ong et al., 2004). Attachment is thus of central importance and it could be expected that people with different attachment styles would deal with their grief differently. A widow with a secure attachment style may evaluate this experience with more frequent positive emotions and less negative emotions due to her tendency to having greater openness and flexibility in social cognition, and may therefore adjust better than a widow with an insecure attachment style.

In the sections that follow, diagnostic issues of bereavement are explored.

### **2.2.3 Diagnostic issues of bereavement**

According to the American Psychiatric Association (1994), the DSM-IV-TR views the death of a close friend or relative as a stressor with generally normative and predictable consequences. According to this approach, bereavement is used diagnostically when the focus of clinical attention is a reaction to the death of a loved one. In this section, diagnostic issues of bereavement are discussed.

#### **2.2.3.1 Differentiation between bereavement and depression**

Regarding the relationship between bereavement and bereavement related depression (BRD), the current DSM concept of uncomplicated bereavement is not confirmed because the sleep pattern of people who develop a depressive syndrome in the context of bereavement is also not confirmed. As such, people with either bereavement or BRD have sleep patterns identical to those found in



major depressive episodes (Byrne & Raphael, 1999). However, Ayers et al. (2007) differentiate BRD from complicated grief where BRD includes apathy, insomnia, extreme sadness, low self-esteem, including suicidal thoughts. In contrast, complicated grief as opposed to uncomplicated grief includes searching and yearning for the deceased, crying, feeling stunned by the death, not believing that the loss occurred, and being preoccupied with thoughts of the deceased. While depression needs a psychopharmacological approach, bereavement needs moral support. Reynolds et al. (1999) find symptoms of complicated grief to probably be distinct from depressive symptoms and appear to be associated with enduring functional impairments deserving of specialised treatment. Based on the prevailing evidence, Zisook and Kendler (2007) conclude that there are more similarities than differences between BRD and SMD (standard major depression).

A study by Cox, Stabb and Hulgus (2006) comparing anger and depression between boys and girls found that girls are more likely than boys to suppress anger due to socialisation in their development of gender identity. Girls are thus socialised to be more comfortable with depression than anger. However, Cheng, Mallinckrodt and Wu (2005) found that in Taiwan, the expression of anger and depression was either neutral or positively associated with depression symptoms. However, the inability to experience and express this anger openly and directly could give rise to it being inwardly directed, resulting in possible depression. This can take the form of an exaggerated bereavement reaction, which occurs when feelings of fear, hopelessness and depression, become so excessive that they interfere with the daily existence of the bereaved (Zautra et al., 2001). Although depression and bereavement are different, they are inextricably linked, and may also overlap.

Depression and bereavement share similar symptoms such as loss of appetite (and thus weight loss), difficulty falling asleep (and as a result, low energy or

extreme fatigue), excessive sleep, and mood swings. At times individuals may feel the pain and weep; at other times they may feel emotionally detached from their environment emotionally (Archer, 1999; Parkes, 1972).

Withdrawal and the inability to relate to others are common reactions, although not everyone may experience all these feelings as they vary from person to person. Additional experiences that are characteristic of both bereavement and depression include physical symptoms such as dizziness, shortness of breath, headaches, heartburn, psychosomatic pains, and chronic colds (Turvey, Carney, Arndt, Wallace & Herzog, 1999).

Functional bereavement symptoms may also consist of a longing for the deceased, a lack of acceptance of the death, memories that occur suddenly at any time or any place (intrusive memories), frequently thinking of the deceased (preoccupation), tearfulness, sensing the presence of the deceased, and other related psychological experiences. It can also involve chest pains or a racing heart, digestive problems, and hair loss. Depression, on the other hand, is indicated by prolonged physical lethargy and fatigue, or emotional distress for reasons other than the death (Turvey et al., 1999).

Clinical depression is different from bereavement in that depressed persons experience life as meaningless and find nothing pleasing or positive in it. They experience deep despair with no prospect of relief and no sense of a future; they struggle function in everyday life and may have persistent thoughts of ending their own life (Kendler, Myers & Zisook, 2008). This is different from the deep sorrow that naturally results from losing someone you love. Whereas bereavement is an emotion, depression is a condition (Archer, 1999; Parkes, 1972).

The difference between mood disorders and anxiety disorders will be discussed next, as they share some common features. As emotional states, however, anxiety and depression can be differentiated within mood disorders (McWilliams, Cox & Enns, 2001).

### **2.2.3.2 Differentiation between mood and anxiety disorders**

A clinically depressed person has symptoms daily for at least two weeks, severe enough to interfere with function. Anxiety disorder, for example, panic attack, is a horrifying experience, typically starting suddenly with physical symptoms. The symptoms of depression include sadness, emptiness, reduced pleasure in daily activities, weight change, change in sleep patterns, physical slowing down, loss of energy, feelings of worthlessness, helplessness, hopelessness and guilt, indecisiveness and suicidal ideations. Those of anxiety are shakiness, sweating, palpitations, nausea, and shortness of breath. These go with an intense feeling that something awful is going to happen. It will usually last for a few minutes before fading away. Usually, if one had panic attacks, one may develop a persistent anxiety about having future attacks and may begin to avoid situations in fearing that an attack will happen. However, problems associated with disorder-based analyses need to be supplemented by examining relations among the specific symptom dimensions within these diagnostic classes (Watson, 2009).

Depressive disorders, but not anxiety disorders, constitute risk for suicide. Moreover, the differentiation between a depressive and an anxiety disorder as the principal diagnosis, as well as the assessment of anxiety-level symptoms with major depressive episode and dysthymia, seems of special relevance when assessing suicide risk (Chioqueta & Stiles, 2003).

## **2.2.4 Cultural perspectives on bereavement and related concepts**

The DSM-IV-TR emphasises culturally determined forms of mourning and grief behaviour, and that the duration of expression of normal bereavement differs considerably among different cultural groups (American Psychiatric Association, 1994). In this section, how culture impacts on the Participants' bereavement and how they deal with it will be explored.

### **2.2.4.1 Culture**

As this study uses a cognitive theoretical framework, the discussion of culture in this thesis is presented from this perspective, referring to culture as the social heritage of a community, with socially shared cognitive representations in the minds of individuals. It also involves the activity of learning so as to extend cognitive structures (Church, 2001).

Culture is a shared, learned, symbolic system of values, beliefs and attitudes that shape and influence perception and behaviour of its members. It is shared by members of a society, living and thinking in ways that form definite patterns, which are mutually constructed through a constant process of social interaction. Within culture, language and thoughts are based on symbols and symbolic meanings created by members of society and perceived as natural (Kashima, 2000), for example, scripts. These symbols assume their meanings in relationship to other symbols within a broader context of a meaning system. Members use this system of shared beliefs, values and customs to cope with their world and with one another; and those are transmitted from generation to generation through learning (Figlio, 2001). As a result of its complexity, it is a social, multidimensional construct comprising judgemental or normative, cognitive, affective, skill, and technological dimensions (Li & Karakowsky, 2001).

According to Li and Karakowsky (2001) people develop expectations that are greatly affected by all kinds of shared experiences. These expectations are formulated from previous experiences that were guided by their communities around them, giving them a frame of reference for later experiences. People learn from those experiences and then process and evaluate new experiences in light of them. As members of a community reflect on the meaning of their life experiences and adapt to the circumstances, they further come to have similar perspectives on their situation. This reflection and their response to their circumstances usually lead to a generalisation of what the world must be like and so, in the process, determine the nature of human culture (Mkhize, 2004). Culture and cognition then become inseparable, where the different schemata, including scripts, together define a belief system that forms part of culture in a particular community.

Figlio (2001) finds cultural codes to be a useful way of referring to share meanings through which people can interact and communicate. Codes are the systems of organising signs and the relation of signs to each other. Learning to live in a culture therefore means learning to use the signs, symbols, metaphors and codes available within that culture (Kashima, 2000).

According to Kashima (2000) and Ogarkova, Borgeaud and Scherer (2009), language makes culture a communication system, which establishes the boundaries of the discourse, and is the interpretative framework that defines the cultural group. A cultural group shares a common language, making language one of the significant experiences of the community and a strong identifying and unifying factor, both as an expression of common perspectives and as a factor in the development or change of common perspectives. As such, for outsiders to communicate effectively and to operate within a particular society or culture, they need to share at least the most significant aspects of the society's culture as expressed in language. In this way their worldview can include significant

aspects of the insider's worldview. This involves a process of adapting to the environment and, at the same time, adapting the environment to the self (Christopher & Bickhard, 2007; Kashima, 2000). At the core of this process is the frame of structures through which people make sense of and act appropriately towards experienced actualities.

Mkhize (2004) believes that the analysis of culture entails a search of the material vehicles of perception, affect and comprehension, which are significant symbols, clusters of significant symbols, and clusters of clusters of significant symbols. Metaphors and symbols are fundamental to the understanding of experiences as they imply a way of thinking and perceiving that pervade how people understand their world and experiences (Kashima, 2000; Zittoun, Gillespie, Cornish & Psaltis, 2007). This also explains why people use metaphors whenever they seek to understand one element of experience in terms of another, as these metaphors frame people's understanding in a distinctive way. By using a variety of metaphors, symbols and frames to understand the complex and paradoxical character of social experiences, people are able to achieve much more multidimensional, penetrating and useful analyses and understandings of others, times and places (Zittoun et al., 2007). For example, mourning and its accompanying rituals are based on the scripts that guide people's views and the understanding of their daily behaviour. These cognitive artefacts within the cultural context are the symbolic objects that embody humanly interpretable meanings, socially shared meanings, and other related issues.

Just as much as culture is not static, symbols such as language, core values, certain cognitive schemata and so forth, are resistant to change. As such, sharing a common language is a strong identifying and unifying factor, both as an expression of the shared worldview of a cultural group, and as a factor in the development or change of its members' common perspective (Kashima, 2000).

Gow (1999) views schemata as being built in interaction with people's surroundings, where objects and events are assimilated into existing schemata and thus expand people's existing frameworks of knowing. Gow adds that when this is not possible because people's existing schemata are inadequate to deal with new experiences, they will accommodate. This means that people undergo structural change in their schemata to enable them to expand their understandings and see objects and events in different ways. This view helps us to comprehend the nature of a transitional society where boundaries and frameworks of culture are not rigid. Culture provides a basis for reframing and establishing new boundaries, using different perspectives and legitimising new relationships and values, so that cultures are dynamic and continuously changing (Kashima et al., 2004).

Keller and Greenfield (2000) view cognitive problems as bounded by the cultural definition of the problem to be solved and its culturally defined methods of a solution, even though there are variations in cultural scripts where members of the same culture may behave in different ways within the same script. Thomson and Tulving (2002) further contend that culture defines not only what its members should think or learn but also what they should ignore or treat as irrelevant aspects. These authors term this acceptable ignorance or incompetence, and it is an aspect that applies to the transitional societies examined in this study. One possible reason for this could be that traditionally accepted scripts change as a result of the influence of other cultures. Hofstede (1997) and Kashima et al. (2004) suggest that a contradiction between individual scripts and society's scripts, in other words, weak scripts, are characteristic of a transitional society, where there are few clear scripts to follow.

#### **2.2.4.2 Ethnicity**

Ethnicity is found to be an “almost unmanageable” category for determining group boundaries. According to Church (2001), people from different racial groups could belong to the same ethnic group, whilst those from different ethnic groups need not belong to different racial groups. For example, different racial and ethnic groups may, with time, lose their distinctive language, culture, customs and even their biological distinctiveness over many generations.

According to my observations, ethnicity in societies in transition does not necessarily play the most important role in determining how culture should be practised. Acculturation that occurs in urban residential areas, work contexts, schools and other educational institutions, and churches also leads to a blurring of ethnic boundaries. In this study, I do not attempt to define ethnic boundaries, as the focus is on Black South African women in transitional societies. Although I was part of the Sotho section of a township during apartheid and am Sotho-speaking, the kinds of divisions between Black South Africans encouraged by the previous regime (Bahr et al., 2005) are not emphasised in this study.

Religion and cultural practices will be discussed next in an attempt to highlight the literature that may explain the dynamics between Christianity and the traditional African context.

#### **2.2.4.3 Religion and cultural practices**

Scholars of religion, according to Kritzing (1999), Mbiti (1991) and Uka (1999), agree that the term “religion” denotes a complex set of phenomena comprising, for example, publicly observable behaviours, publicly proclaimed beliefs and ethical systems, etc. As such, it is impossible to generalise about concepts in



African religions because each ethnic group on the continent formulates its own understanding (Burrow, 2000; Strandsbjerg, 2000). For example, in South Africa, religion varies widely (Cumes, 2004), with different customs among a number of South African Christian churches due to the influence of the religious missionaries. About 80% of the population of South Africa are members of the Christian religion, where most are Catholics and Protestants (Cumes, 2004).

According to Chitando (2000) and Greene (1996), religion and African culture are intertwined. They base this assertion on the fact that most rituals are appropriated into culture and as such, shape and influence the religious philosophy and practices of the community.

Mbiti (1991) advocates that Africans regard ancestors as an integral part of their religious and cultural worldview. For example, ancestors are believed to be angels of God to serve and protect the living. Setiloane (1989) confirms this, advocating that ancestors are accorded a special status in African religion, based on the fact that they lived among us and enter God's sacred space and as such, they are regarded as beings that have assumed a higher degree of divinity. Because they know our plight, they are best suited to act as intermediaries between the living and God. That assigns respect to them among Africans, but they are not worshipped (Mbiti, 1991; Setiloane, 1989). As such, Shorter (1978) argues that attempts to dichotomise African spirituality into the sacred and the secular, the physical and the spiritual, distorts and misconstrues theology and its praxis. Africanness, according to Maluleke (1994), can then be viewed as a legitimate host and home of Christ. For example, pre-funeral day-night vigils, foot stamping when singing, repetitive choruses, the peculiar African preaching style, and the belief that ancestors are the angels of God, are accepted as valid African appropriations of Christianity. These reflect how African culture responds to Christianity (Maluleke, 1994).

Each and every ethnic group and even clan has myths that make an attempt to create the origins of humanity and its destiny. For example, the Batswana of Southern Africa believe that humanity came out of a hole in the ground (Setiloane, 1989). This is also reflected in the different names when referring to God. Mbiti (1970; 1991) finds that myths across Africa point to the belief that humans, male and female, were created by God to take care of God's creation, that they were made perfect and that God's intention was for them to live forever. Africans that were converted from traditional African religions either had their birth names changed to those of European origin or new ones added. New converts were named after saints of the church and other biblical figures.

As indigenous African religion bases its philosophy on ancestral spirits, African religion and its cultural practices have ways of mediating between people and ancestors. Traditional African religion involves medicine people who are highly prized and much respected, using herbs to heal. The elders, priests, mediums, sangomas (who are predominantly women), and nyangas run religion (Kale, 1995; Mbiti, 1970, 1991; Pityana, 1999). A sangoma, for example, is a practitioner of herbal medicine, divination and counselling in traditional Black religion (Kale, 1995).

A training sangoma is trained by another sangoma for about a year, whilst still performing humbling service in the community. After training comes the graduation where a ritual sacrifice of an animal is performed, a chicken, goat or a cow. The spilling of the animal's blood is meant to seal the bond between the ancestors and the sangoma (Kale, 1995). Sangomas perform a holistic and symbolic form of healing, which is embedded in the beliefs of their culture that ancestors in the afterlife guide and protect the living. They are called to heal, and through them ancestors from the spirit world can give instructions and advice to heal illnesses, social disharmony and spiritual difficulties.

The relationship of African Christians and their ancestors is, according to Strandsbjerg (2000), an important factor. Strandsbjerg bases this importance in African traditional thinking of ancestors as an essential link in a hierarchical chain of powers, which stretches from this world to the spirit world, making the cult of the ancestors its most common and essential activity. Mbiti (1970) takes this relationship further by reporting that though the spirit world is radically different, it is believed to be a copy of the society in which ancestors lived in this life, where ancestors are believed to remain as part of the family, sharing meals and maintaining an interest in family affairs just as they did before death. The difference is that they are thought to have advanced mystical powers, which enable them to communicate easily with both the family and God and, as such, are considered to be indispensable intermediaries, and integral to the traditional African social structure. Bodiako (1995) and Dickson (2006) confirm this relationship of African Christians and their ancestors by stating that in a culture where tribe, clan and family are important, ancestors are the most important and respected members of the family. The family perceives their ancestors to reflect its identity.

Based on the relationship of African Christians and their ancestors, African Christianity can be seen to represent a projection of a new Christian identity, one that takes seriously the African holistic view of life, steeped both in the cultural values and traditional religious practices of the people. This is because in African traditional thinking and belief, death is not thought to end human relationships but instead, heralds the entrance of the dead into the spirit world (Bodiako, 1995; Dickson, 2006). Pratt (2003) brings in another factor in the relationship of African Christianity and ancestors when he argues that for the family to be cut off from relationships with its ancestors is for it to cease to be a whole. This is based on the idea that the ancestors sanction society's customs, norms and ethics, and that, without them, Africans would be left without moral guidelines or motivation, making society powerless to enforce ethics. This explains why African culture often acknowledges the presence of ancestors, particularly at meals or when

drinking brewed beer, where small portions are set aside or spilled on their behalf. Ancestors will again be referred to in sections 2.2.4.5. (Marriage rituals), 2.2.4.6 (Death), and 2.2.4.7 (Death rituals), signifying the importance of ancestors in African culture and religion in everything they practice.

Strandsbjerg (2000) acknowledges that a dichotomy of the soul has arisen, in which believers assent to orthodox Christian belief and join in the denunciations of the ancestral rites, but privately retain their loyalty to the tradition, especially in times of serious misfortune or death. They believe that with Christ as the bridge that binds the living and the dead, Christians can pray for their ancestors and plead that the sacrifice of Christ may be effective in their case also.

As identity is anchored in a particular social context or in a specific set of social relations, the identity formation process involves a dialectical relationship between the individual and society. It implies that we become who we are as a result of a particular form of socialisation in which there are always competing claims of meaning and power relationships. It is in this context that one begins to appreciate the political significance of the conflict of interpretations about the nature of social reality. This conflict also takes place within religious communities as they seek to be faithful to the imperatives of the gospel. The question now is whether authentic Christian faith can flourish in every culture (Maluleke, 1994).

This introduces the issue of cultural differences between Black and White South Africans. Maluleke (1994) argues that the African interpretation and practice of religion is different from that of the West and is based on the spiritual truth of African traditional culture. He argued that pre-colonial Black South African traditions and culture were not recorded except orally. On the basis of this argument, African culture may have defined the experience of Christianity in its own unique way, rather than merely adopting Western religious doctrine.

Religious and cultural practices of a given community might not necessarily be the product or consensus of all its members, as some families may practice some of the rituals and not others. Maluleke (1994) argues that cultural differences have been either exaggerated or environment-induced to a large extent. As a result, African Christianity must be understood to refer to how Black South African Christians receive and proclaim Christianity (Maluleke, 1994). It may then seem that multi-cultural Christianity depends very much on what one wishes to convey by it, and the use one wishes to make of it (Maluleke, 1994).

Despite the fact that Christianity is known through incarnation, Christian gospel has always been wrapped around a culture. When Christ is interpreted as a rabbi or priest in Western culture, in African culture, He is interpreted and comprehended as the healer, the ancestor and the master of initiation (Maluleke, 1994). It is in this context that the Christian faith is not foreign to Africans but speaks to the very heart of the Christian community. This does not only promote a new sense of African Christian identity, but is also the core of the new kind of spirituality in the African context, especially in transitional societies. As such, Black South African Christians' faith and identity is rooted in their religious experience (Strandsbjerg, 2000).

Africans, according to Mbiti (1970), have always attributed some sacredness to certain geographic places. From the cognitive theory perspective, this can be explained as a shared set of schemata where, for example, Christianity dilutes racial and ethnic boundaries, for religions transcend cultures as people from many groups may share them. Some people prefer to be buried where they were born and brought up, in their *gae* (Tswana word for home), which in South Africa is often a rural area. The importance and meaning of *gae* to Black South Africans is to have their resting place next to their ancestors (Mbiti, 1970), bringing us to the next section of place identity.

#### 2.2.4.4 Place identity

However, the concept of *gae* is weakening in transitional societies, as more and more people move to urban areas for employment, start a family and settle. They tend to prefer to be buried where they have settled with their nuclear families as opposed to their rural place of origin. This suggests *place* to be an aspect of one's identity. There is an attachment to place, which has become woven into the individual's personal identity. In view of this, place identity needs to be accounted for (r.o.s).

Goodings, Locke and Brown (2007) explain place identity in a psychological context as people's attempt to regulate their environments, based on their ability to create and sustain a coherent sense of self, and reveal their selves to others within the social, cultural and biological definitions and cognitions of place. Every individual has an environmental past that consists of places, spaces and their properties, which have served instrumentally in the satisfaction of one's biological, psychological, social and cultural needs, and which serve as part of the socialisation process during which self-identity is developed (Goodings et al., 2007).

According to Verkuyten and Poullasi (2002), the self-identity develops in the spaces and places in which individuals are found. Goodings et al. (2007) summarise place as a unifying concept of self and society, making place an essential factor in the production of self. As a result, place becomes an embodiment of one's identity that gives meaning to one's existence. In this conception, people play the role of agents with the ability to appropriate physical contexts to create a place of attachment and rootedness, and a space of being. It would seem that, amongst Africans, the concept of *gae* or home is organised and represented in ways that help individuals to maintain self-coherence and self-esteem (Relph, 1976). Smaidone, Harris and Sanyai (2005) describe place

identity further by explaining it as a “pot-pourri of emotions, conceptions, interpretations, ideas and related feelings about specific physical settings and types of settings” (p. 60). Through experience and activity, each self has its own unique pattern, much of which is as a result of one’s perception of self. The past in people’s minds becomes embedded in their selves as a sub-structure of their self-identity that consists of cognitions about the physical world. This cognitive sub-structure is unique to each individual as each person records and retains memories in different ways. Those memories form the basis of needs and desires (Smaidone et al., 2005).

Fried (2000) suggests the concept of sense of “insidedness” in an attempt to explain the concept of place within physical settings. “Social insidedness” refers to tacit knowledge of the physical details of place, and “the sense of connection to a local community and recognition of people’s “integration within the social fabric” (p. 302).

It is clear that belonging to processes of self-definition is a central feature of place identity (Cuba & Hummon, 1993). Smaidone et al. (2005) also view a sense of belonging as the core of place identity, where subjectivity and place cannot be separated without comprehending the located subject and identity of place (Verkuyten & Poullasi, 2006). This means that “place belongingness” is not the only aspect of place identity, but is a necessary basis for it, where place identity can then serve as personal identities, define appropriate social behaviour and activities intelligibly, express tastes and preferences and mediate efforts to change environments (Gerjets et al., 2000).

In summary, it seems that the capacity and expression of rootedness in place is the foundation of both the individual identity and social membership in one’s community. People’s perception of place will determine how they interpret and



react to it. The acquisition of a place identity is not a uniform process but rather a combination of memories, conceptions, interpretations, ideas and related feelings about specific physical settings as well as types of settings (Smaidone et al., 2005). This makes place identity an attachment for place (Rowles & Ravidal, 2000) that points to people's shared representations, unifying self and society. At the time of loss, one's interpretation of the event and self-schema together will be a reflection of society's shared representations.

#### **2.2.4.5 Marriage rituals**

The death of a husband cannot be fully understood if the meaning of marriage and the rituals that go with it are not accounted for. The meaning of marriage can partly be inferred from marriage rituals. Marriage rituals in some African cultures have the meaning of integrating the families of the bride and groom together with their ancestors (Mbiti, 1991).

The groom-to-be must inform his uncles from his mother's side of the family that he intends committing to a marriage with a particular bride-to-be. The uncles, together with the chosen elders of the family, will have a meeting to discuss the date and time of meeting the other family. A letter will then be drafted and sent to the bride's family specifying their intention to come for negotiations of lobola (the money paid by the groom to the bride's parents, thanking them for bringing up their daughter to be his wife), with the intention of having their daughter as their daughter in-law. On the decided date and time a meeting will be held where the bride's uncles and chosen elders are present. In some instances the bride-to-be will be called to meet her future in-laws. After the negotiations and payment of lobola, appointed members from each side sign for the payment and agreement, and the date is set for the marriage ritual, which will bring the two sides of ancestors together as one. The unification of the couple and the families'



ancestors has the purpose of protecting the couple and their children from evil spirits (Mbiti, 1991).

#### **2.2.4.6 Death**

The idea of immortal ancestors dominates African thought about death and the afterlife (Mojapelo-Batka, 2005; Wiredu, 1995). This is so as the world of an African consists of the living and the dead sharing one world in which they share one life and one vital force, i.e. the world of the living-dead (Kasoma, 1996). The spirit, which does not die, is the vital force, which gives life to both the living and the dead. What dies, according to Kasoma, is the body in its physical form although the spirits of the dead have bodies too but these bodies are spiritual and not physical. Kasoma advocates that the dead are not actually dead but merely transfer to another life, where the living needs the dead to carry out a normal and full life. The dead, in turn, need the living to enjoy their life to the full. This then explains sacrifices by the living to the dead.

Magesa (1997) takes it further by advocating that when a person dies, it is believed to be the whole person who continues to live in the spirit world and receive a new body identical to the earthly body with enhanced powers to move about as an ancestor. This suggests that the concepts of life and death are not mutually exclusive and there are no clear dividing lines between them (Okwu, 1979), and also that there are culturally defined schemata associated with death.

According to Okwu (1979), in the African belief system life does not end with death but continues in another realm. Idowu (1973), Mbiti (1969) and Mojapelo-Batka (2005) confirms the idea that death does not alter or end the life of an individual, but only causes a change in its condition where it is expressed in the concept of ancestors, i.e. people who have died but continue to live in the

community and communicate with their families. Idowu (1973) and Okwu (1979) then suggest that Africans welcome reincarnation, i.e. the soul of a dead person is reborn in the body of another, where the world is a living place to which the dead are only too glad to return from the darkness and coldness of the grave, forging a relationship between birth and death. An ancestor may also be reincarnated in more than one person at a time.

There are many different ideas about the place the departed go to, a land, which in most cases is believed to be a replica of this world. In most cases, it is believed to be an extension of what is known at present, although for some people it is a much better place without pain or hunger. This is based on the fact that most African people believe that rewards and punishments come to people in this life and not in the hereafter. This then makes the African concept of death to be perceived as the beginning of one's deeper relationship with all creation, where life is complemented and is the beginning of communication between the visible and the invisible worlds (Mbiti, 1969; Mojapelo-Batka, 2005).

What happens in the land of the departed happens irrespective of a person's earthly behaviour, provided the correct burial rites have been observed. However, according to Mbiti (1969), the deceased may be subjected to a period of torture according to the seriousness of his or her misdeeds, much like the Catholic concept of purgatory. The individual who had been very bad in his lifetime will be unable to live properly after death and become a danger to those he or she leaves behind, becoming a wandering ghost. Among Africans, to be cut off from the community of the ancestors in death is equivalent to the concept of hell (Mbiti, 1969).

Funeral rituals for transition are performed so as to elevate the deceased to successively higher spiritual planes and stages of greater integration into a

spiritual world, assisting the deceased with his or her journey to the ancestral body (Mbiti, 1969; Mojapelo-Batka, 2005). For that to happen, the deceased must be detached from the living to make as smooth a transition to the next life as possible because the journey to the world of the dead has many transitions (Strandsbjerg, 2000). There are two traumatic experiences that would affect a widow and her late husband in the same way. For the deceased, the traumatic experiences involve the wrenching of the spirit from the human body, and its separation from the visible society. For the widow, it involves the loss of her husband, which she has to learn to accept and adapt to. For both the deceased and the widow, life after death and bereavement mean a period of uncertainty, adjustment and contemplation (Mojapelo-Batka, 2005).

In travelling along the purification journey, the spirit of the deceased is believed to be alone in the dark and the wilderness. It is also believed that it can only be assisted by the support of the living kin through their mourning observances. This they do by sharing a sense of loneliness and withdrawal from the pleasantries of life together as a couple. In so doing, the widow helps the deceased's spirit to reach its destination as an expression of her companionship with him. This is partly achieved through the widow's duty to perform rituals to promote the ancestral status of the deceased in achieving his position in the ancestral realm together with the rest of the ancestral spirits so as to start protecting her from the evil spirits (Mojapelo-Batka, 2005).

It is also believed that if the widow does not follow the rituals during the deceased's purification journey properly, her husband's spirit may never reach the desired ancestral realm. According to the African belief system, the spirit will continue wandering in the valley of spiritual wilderness without end. This emphasises the importance of the sets of rituals to be performed by the widow to help the deceased's spirit to become part of the ancestral realm. This, in the

process, will reassure the widow of the well being of her late husband (Mbiti, 1969; Mojapelo-Batka, 2005).

#### **2.2.4.7 Death rituals**

Although information on death rituals is more often associated with anthropology than with psychology, the concept of death rituals was found to be relevant in this study as it plays an important part in informing widows' psychological experience of mourning. Ritualistic behaviours, according to Nurs (2006), are often associated with ceremonies for the deceased.

Death rituals have an important psychological significance for African people. They are meant to facilitate the process of healing rather than delaying it. For example, most African rituals include the use of incense called "impepho" used to expel evil spirits and to invite positive energies during particular rituals. Impepho, according to Tlhagale (2004), has a calming effect both emotionally and spiritually. In passing the rituals from generation to generation, however, the meaning may be lost. From my observation of the transitional society of which I am a member, it is unfortunate to realise that some people comply with traditional death rituals without necessarily understanding their symbolic meaning.

According to an elder from the Participants' community with whom I spoke during the study, death rituals arose from the strong sense of community between the living and the dead. This strong sense of community makes those who had passed on (ancestors) and those who are still alive mutually interdependent such that what affects the living adversely or favourably also affects the ancestors in precisely the same manner. If the burial and its rituals have been satisfactorily respected and completed, it is believed that balance and security, which death

has sought to overcome, will be restored (M. Mfelang, personal communication, November 3, 2004).

In the section that follows, death rituals in traditional and transitional societies are described. This discussion illustrates some of the fundamental changes that have taken place in transitional societies.

#### **2.2.4.7.1 Death rituals in traditional societies**

In traditional communities, the culturally prescribed rituals have a symbolic meaning and a therapeutic effect, with the purpose of remembering the deceased and for closure. As such, people in these communities tend to practise and live according to the tenets of their traditional culture. As a result, participating in bereavement ceremonies and rituals tend to help the widow in her bereavement process (Mojapelo-Batka, 2005; Tlhagale, 2004).

Members of traditional communities tend to be closely involved with the family members in caring for the dying person. As such, family members of the dying person come to perceive death as a natural part of the life cycle. This explains the common trend for people to die at home in traditional societies (Tlhagale, 2004).

An important ritual that the widow is expected to follow from the moment her husband passes away is to stay indoors, in the couple's bedroom (Mojapelo-Batka, 2005). All windows are smeared with ash, all pictures in the house are turned around and all mirrors, televisions and all reflective objects are covered. The beds are removed from the deceased's room, and the bereaved women sit on the floor, usually on a mattress (Strandsbjerg, 2000). Female relatives from

both sides of the family will sit on the mattress on the bedroom floor together with the widow until the morning of the day of the burial (Mojapelo-Batka, 2005).

During the time preceding the funeral, family, friends and neighbours show sympathy in different ways, such as visiting the widow or buying groceries for the bereaved family, where visitors are usually directed to the couple's bedroom. This is done to give the bereaved family moral support and comfort, reflecting the communal nature of African culture (Mojapelo-Batka, 2005).

The day before the burial, just before sunset, the corpse is brought home for the night, and remains in the couple's bedroom together with the surviving spouse and the female elders. This allows the deceased to say goodbye to his or her family and worldly possessions. The whole of that evening and night, the widow sits at the head of the coffin whilst the deceased's mother sits at the foot to symbolise the two significant women in his life (Okwu, 1979).

A night vigil then takes place, often lasting until the morning. The night vigil is a time for pastoral care with the singing of hymns and a sermon (Chitando, 2000). That very night, a ritual killing (called *go phasa badimo* in South Sotho), is often made for the ancestors, as it is believed that the blood from the animal that is slaughtered must be shed at this time to avoid further misfortune (Mojapelo-Batka, 2005). In the case of the death of a husband, a male animal is slaughtered to symbolise the death of the head of the family that represents an attempt to communicate with the ancestors. In the case of a wife, a female animal is slaughtered. The first blood from the neck of the slaughtered animal, which is regarded as the delicacy of the ancestors, needs to flow onto the ground, which is a significant part of any ritual in African culture. It also includes prayers, snuff for the ancestors, and African brewed beer for the ancestors to quench their thirst (Magesa, 1997). The hide of the slaughtered beast is often

used to cover the corpse or placed on top of the coffin as a blanket for the deceased.

The following morning the corpse is prepared by bathing it. If the deceased is a woman, women will prepare the corpse; if it is a man, men will prepare it. Another elder in the community under study explained the bathing of the corpse as symbolising the sacred quality of a human being that exists in the soul and spirit. As such, the body is perceived as a temple for the spirit during life, which deserves decent and respectful treatment. He further explained the soul as being the pre-existing, rational and immortal part of humans, with the spirit developing and growing as an integral part of the living being. The spirit denotes that which separates a living body from a corpse, implying consciousness and sensitivity (Magesa, 1997).

The elder further explained the purpose behind the bathing. This, according to him, is based on the belief that there is a long journey between this world and the next, and that death is a continuation of life and not an ending. The bathing and dressing of the body is done in a manner that is based on beliefs concerning the preparation of the deceased for a long journey. For example, utensils are sometimes put in the coffin or on the grave for the deceased to use throughout his or her journey. In the morning, before the sermon starts, family and friends come to the house to view the corpse for the last time and to take leave of the deceased (Strandsbjerg, 2000). Traditionally, the funeral takes place in the early morning (often before sunrise) and not late in the afternoon, as it is believed that witches move around in the afternoons looking for corpses to use for their evil purposes. Because witches are asleep in the early morning, this is a good time to bury the dead.



At the cemetery, the *diphiri*, the young men who dig the grave early in the morning of the funeral in rural areas, are the authority, together with the religious leader. Everybody, including the bereaved, complies with the priest or *diphiri*'s authority, insisting on a particular dress code for the funeral proceedings. Those who do not comply are not allowed at the funeral. The important task of filling the grave is done by the *diphiri* when everybody is still present to make sure that nobody interferes with the corpse. In some communities children and unmarried adults are not allowed to attend the funeral. During the burial itself the immediate family of the deceased is expected to stay together on one side of the grave at a designated place. They are forbidden from speaking or taking any vocal part in the funeral (Mojapelo-Batka, 2005).

From the cemetery, people are invited to the deceased's home for the funeral meal. Many people follow a cleansing ritual at the gate of the deceased's house, where everyone must wash off the dust of the graveyard before entering the house. Sometimes pieces of cut aloe are placed in the water, and this water is believed to remove bad luck. Churches that use holy water sprinkle people to cleanse them from impurity at this time (Chitando, 2000). The following morning, blankets and anything else that was in contact with the deceased are wrapped up in a bundle and put away for a year or until the extended period of mourning has ended, after which they are distributed to family members or destroyed by burning (r.o.s).

In traditional societies, widows are respected and given time to heal, and not necessarily kept away from in a negative sense. This accepted pattern of behaviour would be explained by cognitive theory as shared scripts that guide people's interpretation and comprehension of their daily experience (Magudu, 2004). Accordingly, in traditional societies communities tend to prescribe the widow's behaviour in churches, public transport, in the neighbourhood, within their own families, and at the workplace.



#### **2.2.4.7.2 Death rituals in transitional societies**

As there is virtually no published information about death rituals in Black South African transitional societies some of the descriptions in this section were gleaned from the researcher's clients in therapy over the years, and to a lesser extent, from the researcher as a member of the community under study. As such, this description is therefore specific to the researcher's and her community's experiences and cannot be generalised to other transitional societies. It is not meant to provide factual information about the rituals, but to present some context to the reader about the community under study. This confirms the researcher's motivation for this study to be taken further and encourage others to research urban transitional societies.

It would seem that Black urban societies in South Africa still maintain some of their cultural practices, although they have integrated aspects of widowhood and religion from Western societies into the structure of their transitional societies. Some families participate in traditional death rituals while functioning in a transitional community, while others follow Christian bereavement rituals; this may differ from family to family. Still others do not practise any rituals at all. The eclectic nature of adherence to rituals creates the impression that the healing power of the traditional rituals has become watered down or is nonexistent in transitional societies. This may create a bewildering and confusing mixture of traditional African practices and practices borrowed from Christianity and Western traditions. This includes changes in the way rituals are practised, which seem to be based on the families' traditions instead of on community norms. This can sometimes create problems in situations where women become members of a family through marriage, which follow different practices from her family of origin, when her late husband's rituals are supposed to act as "glue" that brings family members together, including the daughter in-law.



Traditional practices that are still respected are sometimes practised in different ways. For example, while the hide of the slaughtered animal is used to cover the coffin in traditional societies, some modern families in transitional societies use a new blanket to cover the coffin, while others put flowers on the coffin. Also, in traditional societies people often die at home whereas in transitional societies they often die in hospital.

There are some extreme practices in transitional societies that are not the norm. At times the mattress is still put on the floor, although some families will receive visitors in the lounge and respect the privacy of the deceased's bedroom, especially if the corpse is not coming home overnight. In some families night vigils are not conducted. Another new variation is for the undertaker to prepare the corpse. Some families may allow the corpse to be viewed while others may not. Also, some families may give away the deceased's possessions while others will not.

The most common traditional rituals that still seem to be maintained by families in urban transitional societies are the slaughtering of an animal, the cleansing ceremony, and the home coming of the deceased before the funeral when the corpse is brought home before sunset and placed in the main bedroom (Okwu, 1979). The cleansing ritual involves the widow drinking boiled herbs, washing with the mixture of the slaughtered animal's stomach contents and shaving all body hair. Shaving the hair is based on the belief that, because life is concentrated in the hair, shaving it symbolises death, and its growing again indicates the strengthening of life (Eyetsemitan, 2002).

The practicalities of transitional societies demand that bereavement should be brief and intense, and that one should resolve bereavement quickly and return to normal activity (Archer, 1999), something that is perceived to be unAfrican. As



such, there are rituals that are not generally practised in transitional societies for practical reasons. For example, although there are widows who still wear black clothes, many will wear blue or some other colour. It is clear then that some modifications seem to have been made. The widows' in-laws are often the ones to prescribe the manner in which the ritual is practised. For example, while some in-laws may insist that the widow wears black clothes, others may prefer blue or any other colour, and still others may decide that the widow should wear her usual clothes. This illustrates how transitional societies have adopted Western practices to a certain extent, characterising those societies as unAfrican.

Another practical reason for the widows in transitional societies not to practice some rituals may be financial as, for example, they may have to return back to work as soon as possible. Regarding that, Archer (1999) argues that the issue of a brief and prescribed period of bereavement is misleading. Archer bases this on the fact that some aspects of bereavement are life-long and reflect a positive continuing attachment to the deceased. Outdated as this source may be, its understanding of mourning seems to remain relevant to the practices of current transitional societies.

The workplace is another area where widows in transitional societies potentially face discrimination, especially when one is from a family that still practises the tradition of wearing black clothes or a black band. This practice is supposed to be part of the healing process and is often determined by the widow's in-laws. However, colleagues, who are supposed to support the widow, might behave in the same way towards her as others as in her community, for example, refusing to use the same utensils that she uses, possibly obliging her to bring her own utensils, not sitting on the widow's chair, and so on. Some widows' families may also require the widow to use a different set of utensils in her own house and do her washing separately from the family's since no one except the widow is supposed to touch the mourning clothes.



Some churches, which the widow looks to for support, alienate her when she needs them most. For example, there is often a special place, usually at the back row of the church, where widows are supposed to sit and not mix with the congregation, implying that they are different from the rest based on their widowed status. Even the members of the congregation may behave in a manner that tells the widow that she must stay away from them. For example, people may move away from the widow if she happens to sit next to them.

The unveiling of the tombstone is another example of an area of change due to Western influences. Unveiling the tombstone signifies closure, helping the widow in the final stage of bereavement to achieve closure (r.o.s). In transitional societies, people are invited for the unveiling ceremony and as such, one is not expected to come uninvited. This is unlike traditional societies where people are not invited, but rather are expected to attend the ceremony. For the unveiling of the tombstone to be done, the widow should have gone through the cleansing ceremony, signifying the end of the mourning period. However, in transitional societies, a tombstone is sometimes erected and unveiled at the burial ceremony for economic purposes even though it is traditionally believed that the spirit of the deceased has to join the ancestral body (a transition that takes some time) before the tombstone can be unveiled. The ceremony is the final service that the widow can perform for her late husband. The tombstone itself symbolises that the widow has built a house for the deceased who would by then be part of the ancestral body.

The unveiling of the tombstone ceremony is, to a certain extent, similar to the funeral ceremony. Slaughtering will take place on the night before the day of the unveiling and food would also be prepared. In some cases a night vigil is held. In traditional African culture the ceremony is only done in winter, very early in the morning before sunrise. However, in transitional societies, it is sometimes performed in summer and sometimes in the afternoon. The practice in



transitional societies is for the priest to conduct a short service, with a scripture reading done at home or at church. The procession will then move to the graveyard. The grave has to be covered with a white cloth the day before the ceremony, and will be removed when the tombstone is unveiled. At the graveside, the priest will read a second scripture and conduct a second, longer service.

The ceremony involves the removal of the white cloth that had covered the stone overnight by, more often, the deceased's grandchildren. One of the grandchildren will then read the inscription to the crowd. Thereafter the priest will bless the stone, an elder in the family will give a vote of thanks, and the people will be asked to walk round the grave to see and admire the tombstone. The crowd will then drive back to the family's home for a meal.

It has for many years been customary to have funerals over weekends in Black communities. This is done because people are better able to attend a funeral over the weekend and because relatives may need to travel long distances to attend the funeral. In transitional societies, due to the volume of people dying through illnesses, non-accidental deaths, and HIV/AIDS, it has become impractical and inconvenient to conduct funerals only on weekends with the result that more funerals are being held during the week.

In transitional societies, it is believed that the size of the crowd at one's funeral is a reflection of how involved the deceased was with people around him or her. The bigger the crowd, the more prominent it is believed the deceased was in the community. This includes the social class the deceased belonged to, and the lifestyle he lived, as reflected by friends and family at the funeral.

The dress code at funerals in transitional societies is not prescribed as it is in traditional societies, i.e. in the former, a woman can wear pants with a jacket and without covering her head as opposed to the latter where pants for women and not covering your head is not allowed. Also, the grave is dug by the local municipality and is paid for. The covering of the grave is one of the rituals that is still maintained albeit with a blanket instead of the traditional animal skin. From the cemetery, the mourners will go back to the deceased's house for a meal as a token of appreciation by the family for the support they received from the mourners, as is also the case with the unveiling of the tombstone ceremony.

The seating arrangement at funeral services in transitional societies has changed from earlier times. In traditional society, men and women sat separately, whereas in transitional society males and females sit together. That may suggest that males and females now view each other as equals and partners to a greater extent than before.

Support from friends and neighbours seem to have become, to a certain extent, impersonal, as opposed to traditional societies, where the death of a community member affected the whole community. For example, people may send sympathy cards or communicate support via the obituary column of newspapers (Malkoc et al., 2002) instead of visiting the home of the deceased daily for moral support. Also, from my observations and experiences, some members of transitional societies treat widows in an unsupportive manner, perceiving them as a curse, probably because of their fear of being infected by the widows' tragedy.

Such attitudes and accompanying behaviours towards the widow are sometimes seen in different contexts. For example, some neighbours would not allow the widow into their homes, and would also not come to visit as they might have done in a traditional society. Another response from some communities can be

seen in public transport where the widow is not be allowed to queue with other people but must stand aside and wait for a sympathetic taxi or bus driver to allow her in. Even then, there may be other passengers who do not want to sit next to her, and she may be forced to sit at the back of the taxi, or find herself sitting on her own in the bus. Some taxi drivers do not want to touch her taxi fare because of *sefifi* (misfortune). This behaviour by the community can negatively affect the widow's self-experience, and is often accompanied by feelings of rejection. In an attempt to compensate for this lack of support, forums have been established in the communities where the widows live where the widows will meet and share experiences and advice.

Generally, in African culture, the bride is socialised into the culture of her future husband's family immediately when she joins her family of marriage. She practices the new cultural norms through observing others, imitating them and receiving feedback from others. It is believed that this is the culture that should be shared by all generations, from their ancestors to the present generation. The bride is expected to assimilate into this culture. Later on she is also expected to socialise other new family brides and her children into the same culture and practices. As such, the widow's difficulty in observing her in-laws' way of practising rituals may have serious consequences as ritual practices prescribe that the "*makoti*" (daughter in-law), her husband and their children observe family norms and beliefs. This is not a matter of choice as there are serious consequences for deviation. However, in transitional societies this seems to occur to different degrees.

The rituals that a widow is used to in her family of origin may be different from those in her husband's family, and this can also complicate the widows' bereavement. A couple may, for example, have met at a tertiary educational institution as students, having similar ways of looking at life, the world and their future together. After getting married, their different upbringings could create

conflicts in their relationship. One of these differences may concern the death rituals that are practised by the two families. The widow may be expected to practise rituals that she never grew up practising, making it difficult and uncomfortable for her. This can counter the intended purpose of healing, creating intense feelings of resentment. In this regard, the widow's relationship with her in-laws plays an important role in whether she will receive support from the in-laws or not. The in-laws' participation or non-participation in the last death ritual of the unveiling of the tombstone, for example, may also have an impact on the widow's bereavement as this ceremony serves as closure to the mourning process. For example, the in-law's participation will give the widow an opportunity to arrange a ceremony that she believes befit her husband, thus giving a sense of having done the best for him.

A power struggle may develop between the late husband's family and the widow. In some cases, the in-laws may feel that they invested in the deceased, struggled to educate him so that he could be able to educate his younger siblings, and take care of his family of origin. When he passes away, the widow's in-laws may expect the widow to carry on his duty of educating her late husband's siblings when she herself has to educate her own children (r.o.s).

Also, from the researcher's observations in the community, when a husband passes away, it may be suspected that his wife is implicated in his death. This may be due to financial considerations such as insurance payouts, and the widow now owning the house as opposed to it being a shared property. Implicating a widow in the death of her husband could be one of the causes of dysfunctional bereavement as it may cause anger, which may impeded the natural process of bereavement.



Kasoma (1996) advocates that weak scripts of transitional societies exist because the communal approach of African culture is conspicuously lacking. He advises that individualism in Africa today should be discarded since it is unAfrican. If one were to subject transitional societies' death rituals to a scrutiny of how rooted they are in African values and traditions, the likely outcome would be that they are foreign bodies in the cultural fabric of Africa (Traber, 1989).

#### **2.2.4.8 Mourning**

People come to understand who they are by virtue of cultural scripts, symbols, stories, images, sayings and ways of doing things that surround them (Zittoun et al., 2007). Cultural and traditional practices signify people's life cycles, marked and symbolised in a certain way to give meaning, helping people to adapt to their environment, and giving them a sense of continuity with their past (Gerjets et al., 2000; Moody & Arcangel, 2001; Worden, 1996). These practices also help incorporate loss into an already established cognitive system (Worden, 1996).

As early as 1974, according to Daneel (1974), some Christian churches have a night vigil at the home after the bringing the corpse home. Daneel describes the ceremony in some Zimbabwean churches at that time, where the living believers escorted the spirit of the deceased relative to heaven through their prayers, after which a mediating role could be attained. The emphasis was on transforming traditional rites, while providing consolation to the bereaved family. This example shows how these churches try to eliminate an old practice without neglecting the traditionally conceived need that it had served (Chitando, 2000).

The first phase of mourning is usually when relatives and friends surround the widow immediately after the death of her husband. The purpose of the activities preceding the funeral is to comfort, encourage and heal those who are hurting. It

is a period of support with varying forms of tradition, culture, social and religious practices, including the group's interpretation of its supportive function (Magudu, 2004). About a month or two after the funeral the grieving family slaughters a beast and then goes to the graveyard. They speak to the ancestors to allow the deceased to return home to rest. It is believed that at the graves the spirits are hovering on the earth and are restless until they are brought home – an extremely dangerous situation for the family because the family may have misfortunes. The family members take some of the earth covering the grave and put it in a bottle. They proceed home with the assurance that the deceased relative is accompanying them to look after the family as an ancestor (Magudu, 2004).

In the amaHlubi tribe of South Africa, for example, the death of a person is symbolised by a tradition called “*ukuzila*”, which is defined as showing respect to the deceased by avoidance of certain behaviours and places (Magudu, 2004; Ngubane, 2000). During this period, for example, the widow respects the custom of *ukuzila* by wearing black as a symbol of mourning with varying forms (Magudu, 2004; Mojapelo-Batka, 2005). Historically among the Nguni tribes of South Africa, mourning widows do not attend social gatherings until after the cleansing (Magudu, 2004). Mojapelo-Batka (2005) refers to this period as the seclusion period, where the widow shelters her bereavement, and becomes the object of special care and concern to help her deal with a disrupted life of pain, suffering and loneliness. This script is part of a process to help the widow experience and incorporate sadness into her life. It reflects the recognition of the widows' pain and sorrow, and as such, society acknowledges the new life of the widow as she goes through the phases of bereavement.

During *ukuzila* the women's feelings are ignored as they are expected to follow the instructions that are laid down for them by men (Magudu, 2004). This is so as, according to Daber (2003) and Sossou (2002), cultural rites of mourning and

cleansing are gendered, discriminatory and life threatening for women in most African societies. The widow is escorted whenever she leaves home and, should the widow fail to comply; she is subjected to a fine imposed by the tribal court council (Daber, 2003). Also, as ukuzila is finalised by cleansing, during the ceremony a widow is expected to bath in cold water mixed with “*muthi*” (away from home or in a river) every evening for the whole mourning period. This may be detrimental to the widow’s health if practiced during a cold winter. This cleansing is done because widows are regarded as impure and unlucky and they are believed to carry darkness from the death of her husband, which can only be eradicated through a series of purification ceremonies (Daber, 2003; Mojapelo-Batka, 2005).

The major purification ceremony is performed after a year at the widow’s family of origin (Magudu, 2004). All these rituals symbolise the widow’s breaking off from the past. When it is believed that this purification phase is completed, the widow may begin readjusting to life without the deceased. At the same time, the rituals complete the purification of the deceased’s spirit to enable it to be integrated with the body of the ancestors. The purification period is measured according to the family responsibilities that the deceased undertook whilst alive. If the deceased were the head of the family, he would take longer to be purified than a child. This suggests that the spirit of an adult takes longer to integrate with the body of ancestral spirits than that of a child (Mojapelo-Batka, 2005).

Some people, however, associate ukuzila with colonisation and others associate it with industrialisation when men were working away from their homes. In the latter case black clothes would distinguish widows from other women so that they could be respected and men would stay away from them (Magudu, 2004). Some people, however, argue that ukuzila was introduced after the Second World War to identify women whose husbands had died so that they could be compensated by the government.

Vestiges of traditional mourning practices that venerate the ancestors still prevail at African Christian funerals and traditional societies to a certain extent, especially the ritual killing rites. Because the funeral is pre-eminently a community affair in which the church is but one of the many role players, the church does not always determine the form of the funeral. Some indigenous rites have indeed been transformed and given Christian meanings (see 2.2.4.3), as it seems to be the case in transitional societies, which both Christians and those with a traditional orientation can relate. Sometimes there are signs of confrontation and the changing and discontinuance of old customs to such an extent that they are no longer recognisable in that context (Daneel, 1974).

#### **2.2.4.9 Widowhood practices in other African countries**

Examining widowhood practices in other African countries further demonstrates some of the differences between transitional and traditional societies in South Africa and some of the death and bereavement practices in other parts of Africa. As African culture is not monolithic, there are those societies that treat widows and widowers the same (Mintz, 1998), and those that do not (Sossou, 2002) and as such, this study does not pretend to describe the totality of women's experiences of bereavement in African societies, but focuses on one aspect, namely, a transitional community in South Africa. The experiences of widows from other African countries are viewed socially, economically and psychologically within the cultural and historical context of their communities.

Widowhood practices in West Africa, according to Sossou (2002), are characterised by a period of hardship and deprivation with varying degrees of physical seclusion and a state of ritual contamination that calls for purification. Unlike birth, death is seen as a great and unredeemed tragedy, regardless of age, as it is never seen as natural. What complicates the issue of death is the fact that it is attributed to or associated with witchcraft. When it is a young

person's death, explanation is sought in witchcraft, creating an atmosphere charged with superstitions and denials (Sossou, 2002). As a result, among the matrilineal Akan of southern Ghana, for example, the widow is forced to remain constantly with the body of her dead husband until burial. This is because it is believed that if the spirit of the deceased returns and has sexual intercourse with the widow, she will be forever barren (Magudu, 2004).

During the mourning period, the widow is expected to wear a particular dress, and contribute food and gold. In the polygamous northern part of Ghana, where the deceased has left widows and children, the widows stay inside alone, and are stripped naked with leaves placed on their private parts. They are not allowed out of the house unless they carry a calabash, which symbolises the deceased. In the case of polygamous relationships an elderly woman would take all the deceased's widows to drink a special brew. After the burial, each widow is asked to choose the man she would like to marry as, if she has sex with another man outside of wedlock, she will embarrass her in-laws. However, if it is discovered that she did have sex with a man, she will be given to that man as his wife, even if he was not her choice (Owen, 1996).

In the Ivory Coast in West Africa there is a certain indifference to gender regarding widowhood practices (Mintz, 1998), where observances for widows and widowers are identical. A one-year mourning period, which was practised in earlier times, has now changed to three months during which the surviving spouse wears special clothing and fasts during the day, weeping each day at sunrise and sunset. This ritual is practised in confinement in the conjugal compound. In there, a widow has to abstain from contact or conversation with anyone except a previously widowed person. The widower also maintains sexual abstinence even if he has other wives. Both the widower and the widow submit to evening visits from relatives who will insult them, and the bereaved person is

expected to weep loudly to appease the relatives. Any property belonging to the deceased is taken back to his or her family of origin (Mintz, 1998).

After the three-month mourning period, there are rites that have to be completed. Thereafter, the surviving spouse can resume normal sexual relations, but only after having a sexual encounter with a stranger (Mintz, 1998). However, the widow's remarriage into the deceased's family is not allowed, as, according to their belief, one does not marry twice into the same family.

Among the Igbo of south-eastern Nigeria, widowhood rites and rituals are in part characterised by greed and superstitious sanctions structured to oppress the widow. Among this tribe, according to Sossou (2002), patrilineal sisters of the deceased, both married and unmarried, have power over everybody, which is displayed during the death of their brother. They are highly respected by others, and their role is significant, especially during funerals. Korieh (1996) views the widowhood rites as either administered with vengeance and out of spite for the widow by the deceased's patrilineal sisters, or widowhood rites are genuinely based on the belief that it is the only way to maintain the necessary ritual balance for the good of the deceased and the living. The role of the sisters-in-law is to establish whether the widow did not kill their brother and take his wealth for her family. Before the burial, for example, the widow is locked up with the corpse for three hours and, after the burial, sleeps in the cemetery for two days to confirm or disconfirm that she killed their brother (Sossou, 2002).

The early part of the mourning period is usually the most rigorous. According to Sossou (2002), during the first twenty-eight days, the widow is not allowed to do anything until certain rituals are performed and she can then resume her normal activities. During the seclusion period, and before the burial, she is expected to refrain from washing herself and sit on the ground. Her food is prepared

separately and is fed to her by another widow from either a broken or old plate because they are thrown away after the seclusion period (Sossou, 2002). The second part of the seclusion begins after the first twenty-eight days and runs for a year. During this period, the widow should refrain from sex and any pregnancy during this period represents a serious breach of taboo, which calls for its own purification. However, widowhood rites end by some form of cleansing rituals, for example, shaving the widow's hair and washing her with herbs, which is believed to wash away the deceased spirit and the general bad luck associated with the loss of a husband.

In Southern Africa widowhood practices vary to a certain extent based on ethnicity. Amongst the Batswana tribe of Southern Africa, for example, the widow is subjected to isolation due to stigmatisation of widowhood, and as such discriminated against (Manyedi et al., 2003). This is based on the belief of the community, where the isolation of a widow is meant to protect her and the community, as widowhood is associated with misfortunes.

With about 80% of the South African population following the Christian religion (Cumes, 2004), widowhood practices tend to be influenced by a number of South African Christian churches and religious missionaries. Amongst members of the Zion Apostolic Church in Venda, South Africa, bereavement is a shared experience, with the understanding of the grief of a widow as a multi-layered phenomenon (Selepe & Edwards, 2008). Although the Venda community of the Zion Apostolic Church allows the widow a period of healing in a collective manner, social isolation is still part of the mourning process.

## **2.3 THEORETICAL APPROACHES FOR STUDYING BEREAVEMENT**

Cognitive theory, as the chosen theoretical framework for this study, is discussed in the next section of this chapter. Its key concepts will be examined to lay the foundation for understanding how information from the environment is processed. Other theoretical approaches for studying bereavement are outlined in the sections of the chapter that follow the discussion of cognitive theory.

### **2.3.1 Cognitive theory**

Cognitive theory was chosen as a theoretical framework for this study since it is useful to clarify how widows attend to information, perceive, encode and retrieve, analyse and interpret information pertaining to the anticipated and actual loss of their husbands through death. Cognitive theory is also useful in understanding whether the experience of caring for a terminally ill husband and his subsequent death is either functional or dysfunctional. In the sections that follow key concepts in cognitive theory are discussed; attribution theory will form part of the discussion of cognitive theory as a basis for later explanation of Participants' behaviour.

#### **2.3.1.1 The nature of schemata**

Cognition involves the processes through which information from the senses is transformed, reduced, stored, elaborated upon, retrieved from memory and used (Willingham, 2007). Central to these mental processes are cognitive structures called schemata.

As early as 1932 and 1958 Bartlett, through conducting studies on the recall of Native American folktales, suggested that people have schemata (unconscious



mental structures), which represent one's generic knowledge about the world. Bartlett's schema-concept (Gerjets et al., 2000; VanLehn, 1996) assumes that individuals' knowledge about their world is represented in their memory as a total sum of organised units called schemata. He also suggested that memory takes the form of schema which provide a mental framework for understanding and remembering information. In other words, it is through schemata that old knowledge influences new information. Schemata are thus the building blocks of cognition (Gerjets et al., 2000), and the fundamental elements upon which information processing depends, as they are employed in the process of interpreting sensory data, in retrieving information from memory, in organising behaviour, in determining goals and sub-goals, in allocating resources, and, generally, in guiding the flow of information processing in the system (Gerjets et al., 2000). As a result, dysfunctional schemata and maladaptive strategies will make individuals susceptible to life experiences that impinge on their cognitive vulnerability, based on schemata that are extreme, rigid and imperative.

Carroll (2006) and Gerjets et al. (2000) have further developed the schema-concept. Schemata are also considered to be important components of cultural differences in cognition (Suizzo, 2004), which was confirmed by Bartlett when he advocated that just as schemata are acquired through learning, some primitive schemata derive through cultural experiences. Gerjets et al. (2000) describe schemata as a series of interrelated cognitive contents that develop as a result of the interaction between individuals and their environment. Pratch and Jacobowitz (1996) regard schemata as inner structures and integrated ways of representing the environment, thereby organising our world. Schemata are thus units of organised information that interconnect concepts, attitudes, cognitive content and skills that govern information processing and associated behaviour.

Pratch and Jacobowitz (1996) describe schemata as varying considerably in the amount of information they contain. They are organised according to a hierarchy

that assigns progressively broader and more complex meanings at successive levels (Pratch & Jacobowitz, 1996; Walsh et al., 2002). Schemata thus have different levels of complexity and abstraction. One could have an abstract schema of objects (for example, a chair schema) and a concrete schema of one “specific chair”, schemata of people (for example, a teacher schema), schemata of a state of affairs (for example, a peace schema), schemata of abstract concepts (such as a capitalism schema), and schemata of relationships between objects. These schemata are the result of cognitive processing of information input (Gerjets & Scheiter, 2003). Any important element that does not fit in the schema can cause confusion. For example, if one’s chair schema is a chair with four legs and a back, any chair without those elements can cause confusion even though it can be used as a chair.

According to Beck (1996), cognitive schemata are concerned with abstraction, interpretation and recall; affective schemata involve feelings; motivational schemata deal with wishes and desires; instrumental schemata prepare for action; and control schemata are involved with self-monitoring and inhibiting, or directing action. These schemata represent an integrated cognitive-affective-behavioural network, which Beck (1996) says produces a synchronous response to external demands and provides a mechanism for implementing internal dictates and goals. In this network, affective states may influence cognitive performance, and cognitive appraisals may in turn influence emotional experiences. Similarly, cognitions and emotions may influence behaviour, and the latter in turn may influence the former. In terms of this network the death of a spouse may, for example, be regarded as a perceived threat to the widow (cognitive schema), accompanied by feelings of anxiety and sadness (affective schema), creating a response to act in accordance with the customs and norms of the community (motivational schema).

### 2.3.1.2 Changes of schemata through the processes of organisation and adaptation

As the child interacts with the world and acquires more experiences, these schemata are modified to make sense of the new experience. New information interacts with pre-existing schemata through processes called assimilation and accommodation (Fredrickson et al., 2000). Piaget's developmental model for children is based on adaptations children need to make to their schemata so as to fit into and function within their environment. When new information is modified to fit the pre-existing schema, the process is defined as assimilation. Assimilation is taking new experience and fitting it into an already existing schema. In this process, information from the environment is selected, explored, worked through or ignored, consistent with one's unique way of interpreting events. This takes place before information is translated into habitual behaviour, adding the information to one's existing body of knowledge (Fredrickson et al., 2000). This suggests that assimilation is the individual's attempt to incorporate new information from the environment into his or her existing cognitive structure, attributing meaning to it, attaching a feeling to it, or preparing one to behave in a particular manner. Mourning can thus be viewed as involving assimilation since loss is incorporated into an already established repertoire.

Fredrickson et al. (2000) and Gerjets et al. (2000) refer to *accommodation* as the adjustment of one's view of the world, and of existing cognitive schemata, as a result of an assimilated experience. During accommodation new information is allowed into and thereby changes existing schemata, resulting in new cognitive structures that enable one to cope better with new experiences and the environment (Gerjets et al., 2000). This means that accommodation can be equated with changing existing schemata, whereas assimilation can be equated with fitting new information with existing schemata.

For individuals to survive in an environment, they must adapt to physical and mental stimuli, where both assimilation and accommodation are part of the adaptation process (Gerjets et al., 2000) and occur simultaneously as interdependent and complementary processes. This means that something has to be partly assimilated before accommodation can take place. According to Piaget, adaptation and organisation guide intellectual growth and biological development (Bhattacharya & Han, 2001; Gerjets et al., 2000). Piaget also believed that human beings possess mental structures that assimilate external events, and convert them to fit their mental structures. These mental structures accommodate themselves to new unusual and constantly changing aspects of the external environment (Bhattacharya & Han, 2001).

The schema is the simplest level, which is a mental representation of some physical or mental action that can be performed on an object, event or phenomenon (Bhattacharya & Han, 2001). Although schemata are relatively stable, they can change through a process referred to as organisation. Organisation refers to the nature of adaptive mental structures (assimilation and accommodation), where the mind is organised in complex and integrated ways. Organisation is the gradual developmental process of building cognitive structures through direct interaction with the environment in an attempt to achieve a better fit between cognitive representation of an individual and the environment (Gerjets et al., 2000). In this process, newly changed cognitive structures rearrange to reach a new interconnected and intellectually coherent whole state of equilibrium, so as to make sense of one's experience. An example of this would be the reorganisation phase of the bereavement process.

### **2.3.1.3 The self-schema**

Mahoney (1995) refers to the self-schema as the construing of the self that differs among different age groups. This suggests that the self-schema involves

the individual's development over the course of life events, and includes the activities and meanings that derive from them. Gerjets et al. (2000) define the self-schema as a composite image of what we think we are; what we think we can achieve, what we think others think of us, and what we would like to be. It also implies the self-schema to be one's self-image that is comprised of multiple schemata, in other words, various cognitive structures about the self.

The cognitive structures suggest that during the development of the self-schema a person distinguishes the self from other environmental elements, since the self is construed via the bipolar construct of "self versus others". A person's representation of his or her awareness of the self, and thus the self-schema, is developed in the course of interaction with the environment, and specifically with significant others. This interaction forms the basis of the self-experience, where a part of the individual's experience becomes differentiated and symbolised in an awareness of one's own being and functioning (Lalonde et al., 2004). The implication is that one's development of self, and hence of self-knowledge, is an active learning process.

There are different self-schemata. The *ideal self* is the self-schema that people desire to achieve and the kind of person one would like to be, and reflect, for example, one's hopes and aspirations. The extent to which the ideal self is achieved will determine the quality of one's self-schema. The *ought self* deals with the facets of the self-schema that should exist, for example, duties, obligations and responsibilities. The *possible self* is how one thinks one could possibly become. The *social self* is how one perceives oneself in terms of social expectations (Lalonde et al., 2004).

The death of a spouse has an impact on the widow's self-schema. It affects her social self where she changes from being a married woman to a widow without a

husband, her ought self where she now has to be both a ‘father and a mother’ to her children, and her possible self where she may be unsure of whether she can possibly become what she needs to be (Alexander, 1997).

#### **2.3.1.4 Scripts**

Schemata are acquired through learning, and are used to internalise experiences, make analogies, and indulge in the intricacies of higher-level thinking, including representing concepts, situations, events, and actions (Pratch & Jacobowitz, 1996). According to Wagner (1998), people come to produce and share similar sets of representations, called social representations, through discursive processes of internalisation and externalisation. This means that stimuli from the environment are interpreted and given meaning that play a role in the representations that people form. This, according to Wagner (1998), only occurs when there is interaction between personal experiences and the collective, and shared experiences of socially and culturally similar others. This suggests social representations to be inherently social in nature because they are shared by a number of people (Farr, 1998). These social representations are interpreted as shared cognitive schemata. They can be related together to form systems, even though they are not mutually exclusive packets of information but can overlap (Pratch & Jacobowitz, 1996), and are called scripts, i.e. a schema of an event. For example, a schema for a picnic may be part of a larger system of schemata including meals, outings and parties.

Kashima et al. (2004) view scripts as commonly experienced social events which, according to Fujii and Garling (2003), can only be interpreted by bringing in a great deal of additional information. They are essential ways of summarising common cultural assumptions to help understand text and discourse, predict future events and how one should behave appropriately in given social situations. They also contain the sequence of actions one goes through when carrying out

stereotypical events, serve to provide meanings to guide behaviour and make inferences about events when there are gaps in the available knowledge about acts that occurred in an event (Kashima et al., 2004; Rubin, 1995).

Attribution theory is the next theory to be discussed in the section.

### **2.3.1.5 Attribution theory**

According to Gagne, Yekovice and Yekovice (1993) and Thomas, Meyer and Johnson (2009), attribution theory is based on a cognitive approach and proposes that every individual attempts to explain behaviour, such as success or failure of self and others, by making certain attributions. Attribution theory assumes that people try to determine why they do what they do, i.e. attribute causes to behaviour (Zuckerman, 2006), based on a three-stage process. One must first perceive or observe a behaviour, one must then believe that the behaviour was intentionally performed, and then determine if one believes the other person was forced to perform the behaviour (in which case the cause is attributed to the situation, for example death of a spouse), or not (in which case the cause is attributed to the other person).

The theory is relevant in this study because it could explain that Participants' perceptions, event perceptions and attitude change can impact on their self-esteem and their levels of anxiety (Heider, 1958; Tesser, Crepez, Collins, Cornell & Beach, 2000). Heider also believes that individuals act on the basis of their beliefs. Also, the Participants' past experiences could have affected and contributed to how they dealt with their bereavement. However, not all behaviour can be accounted for by attribution theory, but the theory can be used as one way of identifying and explaining how behaviour (negative or positive) may be related to other events that have occurred in the past.

According to Thomas et al. (2009), people constantly make attributions and judgements about their own and others' behaviour. In doing so, situational influences tend to be underestimated, and dispositional influences are overestimated when understanding other people's behaviour. This tendency leads to fundamental attribution errors. Attributional judgements are influenced by many factors, including cultural differences (Thomas et al., 2009). They also include ability, effort, task difficulty and luck (Mayer, 2003), i.e. internal and external attributions. Effort relates to an internal and unstable factor over which one can exercise a great deal of control. Ability relates to an internal and relatively stable factor over which one does not exercise much direct control. Level of task difficulty relates to an external and stable factor that is largely beyond one's control. Luck relates to an external and unstable factor over which one exercises very little control (Mayer, 2003).

External attributions (situational attribution) relate to causality, which is assigned to an outside factor, agent or force, for example, if a Participant in this study perceives herself as having no choice. Internal attributions relate to when causality is assigned to an inside factor, agent or force where one can choose to behave in a particular way or not, i.e. when behaviour is not influenced. For example, while a widow transitioning to Western culture is more likely to emphasise people's freedom of choice and not situations, a rural African widow's locus of control is more likely to be external. Her behaviour would more likely be interpreted in terms of situational attributions, and she then conforms to the traditional process of bereavement, which entails externalising behaviours. The two widows maintain different sets of perceptions and beliefs because they are provided with information from different points of view, with different available information that is processed differently (Rosenblatt & Nkosi, 2007).

Differences in attribution mean that some widows may think that strategies for coping with the loss of their husbands reside within them, while others might



think of dealing with their loss as residing outside themselves. In other words, while some widows might perceive their behaviours as being driven by inner causes, others might attribute their behaviour to situational factors.

The formation of impressions of others depends on the activation of appropriate categorical knowledge, the ability to attend to relevant aspects of behaviour, and the efficiency with which attributes are encoded. Attribution theory also sheds light on depression that is associated with bereavement, as people who experience depression tend to have a particular attribution style where failures and negative events are attributed to internal, stable and global causes (Zuckerman, 2006). This style could contribute to a dysfunctional bereavement experience.

## **2.3.2 Coping strategies**

### **2.3.2.1 Coping styles**

Neimeyer et al. (2004) state that coping strategies can be divided into two broad categories according to their primary functional focus. The first is problem-focused coping that is used to manage the sources of stress, and is directed at making the stress-inducing circumstance less stressful. This coping strategy helps one to reduce the demands of the situation or expand the resources to deal with it. It is also related to, among other things, stronger feelings of self-efficacy (self-esteem and personal confidence) and mastery (Greenglass, 1995). In summary, problem-focused coping strategies are attempts to modify the source of a problem (Neimeyer et al., 2004).

The second category is emotion-focused coping, which is used to manage emotions (Neimeyer et al., 2004). They view emotion-focused coping strategies

as directed primarily at controlling the emotional response to the stressful situation by regulating distressing emotions associated with stress-inducing circumstances. These strategies are efforts to reduce emotional distress.

Grossi (1999) and Strongman, Mclean and Neha (2007) observe an overlap between the two strategies where men tend to practise more problem-focused coping than women, and finding women to use more emotion-focused coping than men. This is further explained by Neimeyer et al. (2004) structurally within the context of the different demands that men and women often have. For example, men are more likely to have control over solutions, which has a fit with problem-focused coping, when women are more likely to have fewer control opportunities, making emotion-focused coping more suitable. However, Kabbash, El-Gueneidy, Sharaf, Hassan and Al-Nawawy (2000), Mah et al. (2008) and Torkelson and Muhonen (2004) find no gender differences in coping, arguing that people of both sexes who occupy similar social roles tend to have similar coping strategies.

Aspinwall (1997) views proactive coping strategies as strategies that people employ to prevent future stressors. Ouwehand, Ridder and Bensing (2008) confirm Aspinwall's view that people who have the tendency to be planners and are concerned about their future undertake more efforts to prevent potential stressful changes in health, social relationships and personal finance to prevent future threats to their goals. Ouwehand et al. (2008) associate proactive coping with individual differences. Schwarzer and Luszczynska (2008) also find proactive coping to involve future challenges that are seen as self-promoting and as such, saw it as bridging the gap between the constructs of coping and the constructs of action and volition. Sohl and Moyer (2009) view proactive coping as predictive of positive affect and subjective, due to optimism, where its unique association with well being-being is explained by the competent use of resources and realistic goal setting. This is confirmed by Fiksenbaum, Greenglass and

Eaton (2006) who advocate that social support (resource) is associated with fewer daily hassles and also indirectly related to daily hassles by increasing proactive coping.

Coping with feelings of loss while providing care for the dying member can be a challenge. In coping with the anticipated death of a husband, the caring wife would experience pain, and may need assistance in dealing with this pain. For some widows, family and friends may be of assistance; some may seek professional help, while some may receive assistance from community organisations such as church and support groups.

The goals of coping are to alter the relationship between self and the environment, or to reduce emotional pain and distress. Neimeyer et al. (2004) view psychological stress as a relationship between individuals and their environment, which is interpreted by individuals menacing their own resources and endangering their well-being. Coping refers to one's attempt in dealing adaptively with stress (Neimeyer et al., 2004). Should coping not be adaptive, the menacing situation will endure and the person will remain under stress.

Coping resources can be broadly divided into personal, environmental (Taylor & Stanton, 2007), and physical (Mak & Mueller, 2000). Personal coping resources involve traits and characteristics, attitudes and beliefs. Social coping resources involve intimate relationships including family, and extended networks including friends. Physical coping resources involve health and personal energy, and practical resources.

Social support, as a coping resource, can be cognitive, affective, motivational and behavioural, with the objective of helping to reduce the probability that an event will be viewed as stressful. It buffers the impact of stress by providing

actual assistance in problem solving or in feelings of attachment to others for emotional support. This is confirmed by Brougham, Zail, Mendoza and Miller (2009), who classify a social support seeking strategy as containing both problem and emotion foci.

Another factor that plays a role in coping is the beliefs and values that one has. These beliefs and values are important because they may lead one to appraise events as less stressful. For example, in some African cultures the ancestors can be a source of support in, for example, appearing through reassuring dreams. This also applies to societies in transition where ancestral beliefs are still frequently held, as expressed in communicating with the dead through rituals such as “*go phasa badimo*” meaning “to remember and please the ancestors” (Mojapelo-Batka, 2005).

In my experience support structures in my transitional society has become impersonal to a certain extent. An example of this is signing up with a funeral undertaker and contributing monthly payments for a package that one can afford. Some of these packages cover all aspects of the funeral, including the mortuary, preparing the corpse, the coffin, the animal to be slaughtered, and catering. The undertaker’s services replace the responsibilities that would traditionally be taken up by family, friends and one’s community.

#### **2.3.2.2 Sternberg’s problem-solving cycle**

Sternberg’s problem-solving cycle explains how different couples deal differently with the anticipation of death based on their abilities to solve the problems facing them, both as individuals and as couples. According to Sternberg (1999), problem solving is a cycle that involves seven steps. These steps are problem identification, the definition of the problem, constructing a strategy for problem

solving, organising information about a problem, allocating resources, monitoring problem solving, and evaluating problem solving. It is important that people have the ability to allow new information into their schema in following the different steps of the cycle and attempting to solve the problem. Tolerance of ambiguity on how best to proceed in solving the problem is also required.

In the problem identification step, failure to recognise the goal and its path may lead to an unworkable solution. Even if the problem can be identified, it is important to define and represent it well enough to comprehend the process of solving it. If not, the ability and the planning of the strategy to solve it will be limited. The strategy includes breaking down the problem into manageable elements (analysis), and putting together the different elements into something useful (synthesis). Another strategy involves an attempt to generate diverse possible alternative solutions, namely, divergent thinking; and narrowing down possibilities to converge on a single best answer or most likely solution, namely, convergent thinking.

The available information then needs to be organised and reorganised strategically to implement the strategy. This includes identifying resources needed, deciding which resources to allocate and when to do so. During this process, the person or couple must continue to monitor the problem solving process to assess if the goal is nearing achievement. The evaluation of the solution during the process or after the completion of the process is also important as new problems may be identified or redefined, and new strategies implemented, which may in turn need new resources.

### **2.3.2.3 Factors that mediate the impact of loss and an individual's coping**

In addition to the effectiveness of one's coping strategies, other factors affect the intensity and duration of one's bereavement process (Martin & Doka, 1998). Due to the far-reaching effects of bereavement on the psychosocial, physical and emotional levels, Naidoo's (2005) study was designed to identify the influence of how one presents herself, and sense of coherence on coping with bereavement, i.e. how the two correlate with coping and non-coping characteristics of human behaviour and, specifically, the bereavement experience. This author suggests that the two factors are the result of the different ways in which people prefer to use their cognitive processes. Naidoo includes sense of coherence, which comprises of comprehensibility, manageability and meaningfulness. Naidoo further advocates that the extent to which these three components are present in one's life determines an individual's global perception of life. The suggestion is that as each individual's bereavement is determined by his or her unique combination of psychological, physical and social qualities, factors like one's experiences, the nature of the relationship with the deceased, and mode of death play a role. The findings of Naidoo's study showed that coping individuals displayed a significant preference for feeling, judging and a high level of coherence. Non-coping individuals showed preferences for intuition, perceiving and a low level of coherence. However, no significant differences were found for introversion, extroversion, sensing and thinking.

The nature of the relationship with the deceased includes kinship, the role the deceased occupied, the strength of attachment, security of the attachment, the length of the relationship, degree of dependency, the intensity of ambivalence in the relationship, and the unique nature and meaning of the loss (Martin & Doka, 1998). These authors add that mode of death involves the circumstances surrounding the loss, when in the life cycle the loss occurred, previous warnings, preparation for bereavement (anticipatory bereavement), the widow's perception

of preventability, the perception of the deceased's fulfilment in life, and the unfinished businesses that were present in the relationship with the deceased.

Martin and Doka (1998) distinguish between affective and cognitive modalities as two different forms of bereavement on the continuum. The affective modality is generally associated with women and the cognitive modality is generally associated with men. The affective modality of bereavement consists primarily of profoundly painful feelings, which are spontaneously expressed through crying. One would tend to respond favourably to traditional, affect-intensive interventions, such as group support. The cognitive modality converts most of the bereavement energy into the cognitive domain, where goal-oriented activities are often the behavioural expression.

### **2.3.3 Attachment theory**

Some individuals emerge from the stress of bereavement relatively unharmed, while others suffer severe psychosocial problems. The reason for the inclusion of attachment theory in this study is to identify the characteristics of the bereaved or the bereavement situation that are associated with a functional or dysfunctional bereavement outcome.

Attachment theory has its basis in psychodynamic theory. The psychodynamic attachment theory focuses on interpreting unconscious fantasies and motivations (Meissner, 2000). It is also guided by the assumption that the same motivational system that gives rise to the close emotional bond between an attachment figure and the child is also responsible for the bond that develops between adults in emotionally intimate relationships. That is, one's attachment style is a partial reflection of early childhood attachment experiences (Rutter, 2008). In this study, an attempt is made to re-interpret attachment in terms of concepts from cognitive

theory, as the underlying framework for this study. Juffer, Stams and Ijzendoorn (2002) study, based on the case of adopted children and their biologically unrelated parents, finds that infant attachment and temperament in early childhood predict adjustment in middle childhood. John Bowlby's theory of attachment also indicates how attachments from childhood continue into adulthood, which is interpreted here in terms of cognitive theory.

John Bowlby developed an interest in evolutionary adaptation (Bowlby, 1997), focusing on the adaptation of organisms to the environment. He pays attention to physical surroundings and circumstances, and social relatedness and social processes, with the survival of the organism through the process of natural selection as his ultimate objective. This includes the protection and defense of the organism against danger or threat.

Bowlby (1997) focused on the influence of "the environment of adaptation" (p. 47) on the activation and termination of instinctual behaviour patterns. He gained ideas from behavioural patterns in animal behaviour, including specific patterns of courtship, mating, feeding, locomotion and care of the young. These behaviours helped him identify similar forms of the bond present between mothers and children across cultures (Kochanska, Forman & Coy, 1999), and within the context of caretaker-child relationship.

According to Bowlby's theory, the human infant starts out with five reflex-like and stereotyped instinctual attachment behaviours that include sucking, crying, smiling, clinging and following (Kochanska et al., 1999). These behavioural systems are not initially learned and are not influenced by environmental feedback. These five modalities are interactional: eye contact and smiling occurs between mother and child, the infant's sucking has, as its corollary the mother's feeding, the infant's clinging is reciprocated by the mother's holding, there is



mutual touching of mother and child, and there are vocalisations of mother and child to each other (Beebe et al., 2007). At a later stage, due to the maturation of the child, these instinctual responses become meaningful and goal-directed, forming part of a behavioural pattern. However, this behavioural pattern is not inherited; it has only the innate potential to develop (Kochanska et al., 1999). This is so as both internal and external conditions are necessary for the activation and termination of the child's behavioural system.

Bowlby (1997) defines attachment as follows: "To say that of a child that he is attached to, or has an attachment to someone, means that he is strongly disposed to seek proximity to and contact with a specific figure and to do so in certain situations, notably when he is frightened, tired or ill" (p. 371). According to Bowlby (1997), infants form strong attachments to one figure, usually the mother or primary caregiver, suggesting that infants are monotropic. Although infants tend to remain closely attached to one figure, the attachment becomes more elaborate as they grow older, where attachment is formed with other people, such as friends and a life partner. This suggests a change in attachments along a continuum of development, and attachment is considered a healthy feature of human interrelatedness. Even though attachment behaviour may not always be evident, it does not necessarily indicate a lack of attachment (Kay Hall & Geher, 2003).

In reference to a study done by Moore in 1971, Bowlby indicates the persistence of the early attachment styles throughout life, although it is possible that some events in the course of development (for example, death of a mother) may alter the attachment pattern (Bowlby, 1997). Early attachment styles seem to lay a foundation for further relationships (Lopez & Brenan, 2000).

Myers (2002) conducts a study where it was found that about seven in ten infants, and nearly that many adults, exhibit secure attachment. Secure attachment infants become distressed when their mothers or caregivers leave and, when the figure returns, they run to her, hold her, then relax and return to explore and play (Cole, 2005). Secure attachment adults tend to get close to others with ease, are not afraid of being abandoned or being dependent. Within the context of continuing intimate relationships, they enjoy sexuality and, as a result, tend to have satisfying and enduring relationships (Myers, 2002).

About two in ten infants and adults exhibit avoidant attachment (Myers, 2002). Avoidant attachment infants, although internally aroused, reveal little distress during separation from the attachment figure or clinging behaviour upon reunion. Avoidant attachment adults tend to be less invested in relationships and are more likely to leave them, suggesting individuals who avoid closeness.

About one in ten infants and adults exhibit insecure attachment that is characterised by anxiety and ambivalence (Myers, 2002). Insecure attachment infants are more likely to cling anxiously to their mothers or caregivers in strange situations, due to the situation. If left by themselves, they are more likely to cry but when the figure returns, they are more likely to be indifferent or hostile. With age, these consistent, faulty or incorrect appraisals of situations may create dysfunctional thoughts that cannot be reasoned out as they become readily attached to a range of stimuli (Baer & Martinez, 2006; Rachman, 1998).

In adulthood, insecurely attached individuals are more often anxious and ambivalent with less trust, and they are therefore more possessive and jealous. They are likely to repeatedly break up with the same person, probably due to consistent, incorrect and subjective perceptions and interpretations of the relationship that they perceive as emotionally stressful. This is due to the

underestimation of their ability to cope in an emotional challenging relationship (Baer & Martinez, 2006). Their incorrect appraisal of a conflict also explains their tendency to be emotional and angry when engaged in a conflict (Myers, 2002).

The different attachment styles can clearly be attributed to parental responsiveness where sensitive, responsive mothers who instil a sense of trust in their infants' environment are more likely to have securely attached infants. If their mothers were involved and nurturing with them as infants, they tend to have warm and supportive intimate relationships as adults (Rosenblatt, Hinde, Beer & Busnell, 1979). Bowlby (1980) hypothesises that a securely attached person is more likely cope appropriately with the loss of a loved one, due to the internal working model he or she possesses. A secure attachment style can thus be considered as a buffer in the experience of bereavement.

Attachment theory links with other theories in this study by attributing meaning in terms of the parent-child interaction, and later the bond between partners in an intimate relationship. How the widow interprets the loss of her loved one (a cognitive process), while the kind of relationship they had (attachment) will determine the intensity of her bereavement experience, depending on her attribution of the meaning of the loss experienced.

#### **2.3.4 Schachter and Singer's two-factor theory of emotions**

Emotions are a subjective experience as there can be different causes for feelings and everyone reacts slightly differently to situations. Schachter and Singer's two-factor theory explains how emotions are experienced upon the perception of a stimulus. The fact that people tend to be more sensitive to information that matches their current mood (Zuckerman, 2006) suggests a relationship between cognition and affect. As a result of this relationship,

cognition may serve to minimise or aggravate the experience of certain affective reactions.

Schachter and Singer (1962) believe in a cognitive and physiological view of emotions in which people search their beliefs in an attempt to understand the emotional aspect of their bodily reactions. They believed that emotions are controlled through a very close interrelationship with and interaction between physiological arousal and cognitive appraisal. Keltner and Haidt (1999) provide further support for the link between cognition and affect.

According to the Schachter and Singer's two-factor theory of emotions, when we try to understand the kind of people we are, we first watch what we do and feel, and then deduce our nature from this. Physiological arousal and its cognitive label will depend on the way one processes information, in other words, the process of receiving, encoding, transforming and organising information. This comprises both content, namely, developed thoughts of reality such as beliefs, attitudes, opinions, and so on, and processes such as attribution, perception, and memory (Zuckerman, 2006). The first step is to experience physiological arousal of the autonomic nervous system. It is then followed by cognitive appraisal of the physiological arousal where we then try to find a label to explain our feelings, usually by looking at what we are doing and what else is happening at the time of the arousal. The physiological arousal associated with an emotional experience thus becomes cognitively labelled. This theory suggests that people do not just feel, but experience feeling and then decide what that feeling means through a sequence that starts with an event, being arousal, followed by reasoning, and then experiencing an emotion (Schachter & Singer, 1962).

The two-factor theory suggests that emotion comes from a combination of a state of arousal and a cognition that makes the best sense of the situation the person

is in. The theory argues that when people become aroused they look for cues as to why they feel the way they do. The state of physiological arousal results from environmental conditions, and people look to their environment to gain an explanation of their feeling. This explanation is based on current cognitions, past experiences, the present environment and its social significance. An emotion may be aroused through a conscious appraisal of the environment (Schachter & Singer, 1962).

The two-factor theory proposes that if a person experiences a state of arousal for which he or she has no immediate explanation, he or she will describe his or her emotions in terms of the cognitions available to him or her at the time. It also proposes that if a person experiences a state of arousal for which he or she has an appropriate explanation, then he or she will be unlikely to describe his or her emotions in terms of the alternative cognitions available. This theory thus presumes that in order to experience an emotion one needs both a physiological arousal and cognition, where the cognition explains the physiological arousal in terms of the current events or thoughts. Again, if a person is put in a situation, which in the past could have made him or her feel an emotion, he or she will react emotionally or experience emotions only if he or she is in a state of physiological arousal (Schachter & Singer, 1962).

The explanations for people's increased arousal is often obvious, and they do not need to do much cognitive searching for understanding their increased arousal; however, at other times there may not be obvious explanations for the increased arousal. In the latter case, cognitive theory predicts that people then cognitively search their environment for an explanation and label their feelings based on what is going on around them. When cognition clashes with another unpleasant state of arousal it results from the inconsistency of these dissonant conditions. Human beings are motivated to reduce this unpleasant state of arousal as much as possible, even if it means changing formerly held cognitions. Incongruent

cognitions will then have a motivational function, where motivation, according to Keltner and Haidt (1999), is an internal state that activates behaviour and gives it direction.

In this thesis the nature of emotions during bereavement, such as grief and sadness, are explored using Schacter and Singer's two-factor theory. Attention is given to how functional and dysfunctional bereavement can be understood from this perspective. People look at their environment for explanations of arousal; and this environment includes culturally based thought patterns and symbolism. The role of culture in labelling certain emotions is also explored. The latter discussion includes the transition in shared social schemata, which form part of the cognitive processes of Black urban widows.

As Schachter and Singer's two-factor theory of emotions can be considered dated, it is complemented with more recent literature, including a study by Jarymowics and Bar-Tal (2006), which focuses on fear and hope. The study was found to be relevant to the transitional society within which the Participants of this study functioned. Jarymowics and Bar-Tal advocate that fear and hope can become a collective emotional orientation, and can organise societal views to direct behaviour.

Emotions serve as mediators and data for processes of feeling, judgement, evaluation and decision making that may lead to a particular behaviour (Rafaeli & Hareli, 2007). As a result, emotions play an important role in decoding the meaning of stimulation through perception and learning to which individuals respond with the same emotional reactions as when they encounter similar events (Bargh & Chartrand, 1999). This may occur either consciously or unconsciously (LeDoux, 2002). Emotions evolved as an adaptive function in dealing with basic external challenges (Carroll, 2006), and as modes of relating

to the changing demands of the environment (Garling, 1998). However, they can lead to maladaptation by eliciting dysfunctional reactions in certain situations, which are characterised by irrationality and destructiveness.

Where there is fear, there is mindlessness and misery; where there is hope, there is rationality and progress (Jarymowics & Bar-Tal, 2006). According to Vaes, Paladino and Leyens (2006), primary and secondary emotions, including positive and negative emotions, function differently due to their different origin.

Primary emotions are emotions that provide information about current situations and get us ready or motivate action in some way, responding to a pleasant or unpleasant stimulus. For example, one is late for a meeting and as a result, experiences frustration. These emotions happen as a result of an external cue that affects us emotionally, doing what they are supposed to do (Damasio, 2003). Secondary emotions afford the ability to reason about current events in the light of experiences and expectations. They are emotions we have in response to a primary emotion not being recognised or expressed. They can be analysed by listening to our dialogue (Damasio, 2003). Secondary emotions are secondary because they are not necessarily related to an adaptive response in a given situation. They are complicated, non-adaptive patterns of emotions about emotions. They come to us through a filter of thought processes that go by automatic thoughts, judgements, assumptions or irrational beliefs. They are learned responses that often come from role models, usually in our family of origin, and afford the ability to reason about current events in the light of experiences and expectations. Crucial to understanding our emotional reactions and how we behave, either in a healthy and self-actualising way, or conversely in an unhealthy detrimental way, is being aware of our primary emotions and that they all have value. Not allowing the expression of primary emotions, we at best fail to thrive and live a meagre detached existence, and at worst, when the

primary emotions become secondary, we cause damage to others and ourselves (Spradlin, 2003).

The functioning of primary emotions is spontaneous, fast, uncontrolled and unintentional (LeDoux, 1996). Often, emotional reactions are unconscious as they occur through automatic information processing without perception and conscious experience (Killgore & Yurgelun-Todd, 2004). Fear is a primary emotion that is spontaneous and automatically activated, is consciously and unconsciously processed, and is based on past and present experiences to determine one's behaviour without mediation of cognitive appraisal (Damasio, 2003). It is only under certain conditions that stimulations generate conscious emotion (Damasio, 2004). When this process takes place, it may override secondary, more complex, positive affective components of emotion, such as hope. Hope is a secondary emotion, which needs anticipation as it is cognitively processed for new ideas, and requires creativity and flexibility. People may be spontaneously immobilised by painful situations, leading to anticipated hostility. People's response to this provocation may determine their ability to cope in stressful and demanding situations such as bereavement. In addition, maladaptive functioning may sometimes be maintained and reinforced by social factors like culture.

Conscious processes of positive secondary emotions are to a certain extent also spontaneous (Bargh, 1997). Even though they are connected with the appraisal of one's environment, they are strongly influenced by primary emotions (Garling, 1998). In these processes, emotions automatically guide attention to particular cues and information, influence the organisation of memory schemes, give differential weight to specific stored knowledge, activate relevant associative networks in memory, influence the order of cognitive processing priorities, provide interpretive frameworks to perceived situations and, on those basis, and pull towards certain objects, individuals and situations while abstaining from



others (Mayer, Salovey & Caruso, 2000). However, only some human emotional processes are part of the sequence of recognition and understanding (Petrides & Furnham, 2002). As such, evaluation based on an appraisal process is related to deliberate thinking and intellectual operations; and the use of cognitive evaluative processes is relatively independent of basic primary affective mechanisms (Piaget, 1970). Such evaluations are linked with secondary emotions.

The different functioning of primary and secondary emotions is more evident in situations of perceived threat, such as death. In such instances, primary emotions may dominate over secondary ones; negative emotions may override positive ones. Hope is often preceded, dominated, controlled and inhibited by spontaneous, activated fear (LeDoux, 1996). This is because the connections from the affective system to the cognitive system are more numerous than those in the opposite direction, from the cognitive to the affective system (LeDoux, 1995; 1996). As a result, fear floods consciousness and leads to automatic behaviour, preparing one to cope with the threatening situation. Damasio (1999) further distinguishes between primary and secondary emotions when he views primary emotions to be innate, and secondary emotions to be feelings which allow people to form systematic connections between categories of objects and situations on the one hand, and primary emotions on the other.

### **2.3.5 Systems theory**

In this section, family systems theory is integrated with general systems theory in an attempt to gain a better understanding of how the parts of a system are integrated into a whole within the context of the Participants in this study. These theories together help clarify how the system and subsystems interact with one another. They also help clarify how patterns are created through this process of interaction within the family context (Wendt & Zake, 2006).

According to Wendt and Zake (2006), a system is a bounded set of interrelated elements exhibiting coherent behaviour as a trait. According to Bausch (2001), general systems theory could also be called a 'science of complexity' since it "stresses studying natural phenomena of all sorts as heterogeneous wholes composed of multiple different but interrelated parts rather than studying each part in isolation" (p. 10). Wendt and Zake (2006) define a system as any two or more parts that are related to each other, such that change in any one part changes all parts.

A family system has components that involve interrelated elements and structures, patterns of interaction, and open or closed boundaries. Each system has subsystems, which consist of subgroups of members. Each subsystem has its own rules, boundaries, and unique characteristics, and membership of a subsystem can change over time (Wendt & Zake, 2006). These components have subsystems, and function according to the Composition Law, using messages and rules (Wendt & Zake, 2006).

According to Whitchurch and Constantine (1993), Composition Law states that the whole is greater than the sum of its parts. When applied to the family, this means that the family as a whole is greater than simply adding individual member characteristics together. The whole becomes greater than the sum of its parts because the whole includes elements that cannot be broken down and applied to individual members. It is possible then for the system to have characteristics, which no individual element possesses except when they are put together in an interactional context. The family images and themes are reflected in this holistic quality, as the members' unique behaviours cannot be explained outside the context of the entire system. Families can then be considered to be systems as they are made up of interrelated members who exhibit coherent behaviours in their regular interactions and are interdependent on one another (Whitchurch & Constantine, 1993).

As families comprise interrelated elements and structures, in the context of the present study this means that family members (i.e. the widow, children and the dying husband/father, in-laws and extended family), have relationships which function in an interdependent manner, creating the sum total of interrelationships amongst members (Wendt & Zake, 2006). Understanding these aspects of the family system may contribute to a comprehensive understanding of the family system's behaviour as a whole (Kern & Peluso, 1999).

A family system uses messages and rules to shape its members. These messages and rules are relationship agreements, which prescribe and limit members' behaviour over time. They are repetitive, implicit, and perpetuate themselves through reproducing (Wendt & Zake, 2006). They form predictable patterns of interaction that emerge in a family system. These patterns of interaction help maintain the family's equilibrium, and determine how members should function.

In achieving patterns of interaction, the system needs to have boundaries, which can either be open or closed (Wendt & Zake, 2006). This is achieved by the system's ability to define its own boundaries by either including or excluding members. When boundaries are established, it is done so that the relational whole is retained, where change in one part causes change in all (Wendt & Zake, 2006). In order to maintain the dynamic structure of the system and its boundaries, a network of feedback loops, for example, communication amongst family members, needs to be established (Kern & Peluso, 1999).

Just as there are functional and adaptive family systems, there are also dysfunctional family systems. These include chaotically enmeshed and chaotically disengaged family systems. An adaptive level of family cohesion is one in which family members work together. Chaotically disengaged families feel

disconnected from one another, allowing unrestricted external influences to impinge on the family. Boundaries are predominantly blurred, and the family's interaction is unpredictable and marked by limited and/or erratic leadership and discipline. Negotiations are endless with dramatic role shifts and rule changes. Chaotically enmeshed families present themselves as extremely close with high loyalty demands and little tolerance for privacy, separateness or external influences. A family with permeable and vague boundaries is considered an open boundary system, allowing elements and situations outside the family to influence it. A closed boundary system isolates its members from the environment, and seems isolated and self-contained (Wendt & Zake, 2006).

Cognitive, attachment and family systems theories will be unified to link the theories discussed above. This is done in an attempt to consider their combined influence on the Participants in this study.

### **2.3.6 A unified integration of bereavement concepts and theories**

In this section a unified integration of bereavement concepts and theories will be presented. In achieving this, the different phases of both functional and dysfunctional bereavement will be looked at, and cognitive, attachment and family systems theories and bereavement will be compared.

#### **2.3.6.1 Integrated phases of bereavement (functional and dysfunctional)**

Whereas functional bereavement allows the widows to identify, acknowledge and integrate the loss of their spouses, dysfunctional bereavement prolongs suffering, interrupts normal activities, and as such prevents life from being lived to the maximum. A widow whose bereavement is functional experiences a naturally progressions through the process of bereavement, while a widow who

experiences dysfunctional bereavement becomes fixated, sliding into an unhealthy and prolonged withdrawal, remaining stuck at one point (Moody & Arcangel, 2001).

In functional bereavement, denial serves as a coping mechanism to protect the psyche of the widow from an initially intense crisis and as such, enables her to absorb and filter the blow. Just as denial is functional at the early stages of bereavement, it can also be dysfunctional if prolonged. This is because denial distorts reality, and involves forgetting, escaping, and disbelieving reality (Moody & Arcangel, 2001).

The initial phase of bereavement is to experience a shock reaction. This shock reaction represents a general reaction of the body's defense system brought about by the activation of cognitive disequilibrium in reaction to awareness of the loss. Shutting off some of the pain with temporary numbness which is associated with shock helps in managing the overwhelming experience of the severe emotional crisis (Carr et al., 2001). However, exaggeration of these feelings, denial of their existence, extending their duration – getting stuck in this phase – may be dysfunctional.

Anger may occur as part of the first phase. When the anger experienced serves as an outlet, accepting it as natural makes it functional, especially in widows with secure attachment styles. Anger can, however, also be viewed as a masked bereavement reaction, contributing to a dysfunctional bereavement in those with insecure attachment styles, as inability to express feelings may inhibit the bereavement process. Anger can also be as a result of the widow's inability to recognise her experiences as being related to her loss. A securely attached widow would, however, interpret this phase as the beginning of the bereavement

process with the awareness of the loss as a changing reality, making her shock and numbness functional (Carr et al., 2001).

The second phase of bereavement, yearning and searching, is also a function of the cognitive disequilibrium that results from the loss. It involves an attempt to deal with the cognitive impact of the loss (Archer, 1999; Parkes, 1972). It is characterised by disbelief, confusion, and denial. Widows with secure attachment styles tend to deny the loss as a defense while they get used to the loss; here, denial becomes functional. Widows with an insecure attachment style may tend to use denial as the only coping mechanism, which, in the process, makes them resistant to accepting the loss. This will prevent adaptive cognitive change, leading to repeated frustration and disappointment, making the bereavement dysfunctional. Whether bereavement is functional or not is thus partly determined by the widow's inner conflict between resisting (denying) information about the loss, and accepting the change incurred by the loss (Archer, 1999; Parkes, 1972).

The third phase of bereavement, disorganisation and despair, is characterised by depression and difficulty planning future activities (Carr et al., 2001). The widow who feels isolated, bitter, angry, or guilty due to, for example, her exaggeration of the negative and positive aspects of her relationship with the deceased (Carr et al., 2001), may have a dysfunctional bereavement. Since having these feelings is difficult to acknowledge to oneself, they can lead to temporary low self-esteem, as a result of the doubts the widow may have about her ability to cope. The low self-esteem is associated with a disruption of the role schema that the widow was used to.

In the study done by Kubler-Ross and Kessler (2005), the authors attempt to find the meaning of grief through the five stages of loss. The authors find that the

reorganisation of a new life period to be the fourth phase during which the relationship with the deceased is placed in perspective. The widow will start to carry on with life. According to Carr et al. (2001), one may be ready to start a more active social life to close the gap created by the loss, especially widows with secure attachment who have greater openness and flexibility in social cognition. However, a need to express one's self emotionally remains. One risks facing the accompanying emotional pain. There will, however, be a shift from resisting change, to letting go of the hold of the past, to facing the reality of the present and the resulting emotional pain of the loss. This is the period of allowing new information in the schema to start effecting change. The coming and going of the feelings associated with bereavement is combined with a decrease in intensity as time goes on (Carr et al., 2001). However, the widow may feel a prolonged sense of guilt, where she feels that she is abandoning her husband. This may become dysfunctional, depending on her attributions around this feeling.

### **2.3.6.2 Comparison between cognitive theory, attachment theory and family systems theory**

#### **2.3.6.2.1 Cognitive and attachment theories**

Cognitive theory and attachment theory depend on each other to interpret the diversity of emotional reactions and overt behaviours during the bereavement process. Cognitive theory is concerned with conscious meanings and external events (Beck, 1996). In the context of difficulties in life, it consists of all the approaches that alleviate psychological difficulties through the medium of restructuring one's schemata by, for example, helping to allow new information in (Beck, 1996), and by accessing people's emotions through their cognitions, with the purpose of altering excessive and inappropriate emotional reactions.

Attachment theory describes a phenomenon proposed by Bowlby (1969) as a process where people create affectional bonds with other people, usually a loved one. This theory may be useful in uncovering the meanings people attach to their environment, to others, and to internal experiences, particularly when it concerns the loss of a loved one. It helps to conceptualise widows' bereavement as the disruption of an attachment bond through loss. This disruption offers a plausible explanation for several characteristics of functional bereavement, which are often difficult to understand. These include searching for the lost attachment figure, and anger towards the deceased because of feeling permanently abandoned. These can thus be understood as natural reactions to separation.

Whereas cognitive theory helps to identify and examine spontaneous cognitive responses and the underlying belief system at the conscious level, the psychoanalytic attachment theory focuses on interpreting unconscious fantasies, motivations and resistance to insight (Beck, 1996). As it is proposed in this thesis that attachment theory can be interpreted from a cognitive perspective, attachment will be regarded as a schema that is developed by a child and carried over into adulthood about the nature of the relationship between the self and significant others. The two theories complement each other in explaining the widow's bereavement process, and thus provide a theoretical framework appropriate for this study.

#### **2.3.6.2.2 Comparison between attachment and family systems theory**

Family systems theory and attachment theory have important similarities and complementarities, converging in two areas. Family systems theory attempts to describe the unique characteristics of a family system, which are defined by the unique interaction between individual members. The mother-child dyad, as the subsystem of a family system, is characterised by the interaction between the



mother and child within the family system, which eventually defines the nature of the attachment.

At a broad conceptual level, both theories deal with relationships and what draws people together, what drives them apart, and how those people deal with conflict. At a more specific level, it deals with the correspondence between attachment classifications of secure and insecure relationships on the one hand, and the family systems categories of adaptive, chaotically enmeshed and chaotically disengaged relationships on the other hand. There are also differences between the two theories. Whereas attachment theory focuses on the dynamics involving protection, care, and security, family systems theory is concerned with family dynamics involving structures, roles, communication patterns, and power relations.

Furthermore, attachment theory focuses on the dyad, with much of the action occurring between a mother and a child, whilst family systems theory has a broader focus that includes other family members, focusing on the triad, where much of the action occurs within groups. The family systems theory revolves around family members and their interaction with each other. Attachment theory, in this study, revolves more around the couple subsystem, their patterns of interaction and communication.

#### **2.3.6.2.3 Family systems theory and bereavement**

The family systems theory explains how the family, as a system, responds to the dying member of the system. This study does not focus on the family as a whole but rather on the couple as a subsystem of a family system. According to Whitchurch and Constantine (1993), the interactions between different

subsystems within the main system add characteristics to the whole that make it qualitatively different from each individual member of that system.

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## **2.4 CONCLUSION**

This chapter consisted of three parts where bereavement formed the central construct around which the chapter was structured. The first part discussed literature about bereavement, the second part presented theoretical approaches relevant to studying bereavement, and the final part integrated relevant constructs from the selected theories into a unified approach. Bereavement was defined and conceptualised, including its determinants and misconceptions. Emotions, as an affective schema that dominates bereavement, its diagnostic issues, African cultural perspectives of bereavement and its constructs were discussed. Cognitive theory, as the central theory around which the study revolves, schemata as unconscious mental structures, and scripts were looked

at. Relevant theories were used to complement cognitive theory. Those theories were attribution and systems theories, coping strategies and Schachter and Singer's two-factor theory of emotions in an attempt to explain the cognitive-affective-motivational-behavioural network of the participants in response to the deaths of their husbands.

In the chapter that follows, the methodology of this study is discussed.