Life After Death: An Autoethnography of a Teacher’s Journey Through Personal Grief and Loss

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Concordia University–Portland
College of Education
Doctorate of Education Program

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Life After Death: An Autoethnography of a Teacher’s Journey Through Personal Grief and Loss

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College of Education

Dissertation submitted to the Faculty of the College of Education
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Abstract

This study sought to understand how grief and loss affected me on a personal and professional level. Additionally, the process of grief and loss and its effects on teacher performance was examined. The death of a loved one often leaves a person feeling a great deal of emotions. As an educator, it is incredibly difficult to process grief and loss at work due to the demands of working with students all day. Nine participants were recruited for this study and I used semistructured interviews to discover more about the experiences of these educators while they dealt with the loss of a loved one at work. The findings of this study discovered five themes: (a) lack of support and resources, (b) non-empathetic displays of action, (c) lack of a designated grieving space, (d) physical and mental stress of death, and (e) performance pressures due to lack of grieving time. The experiences of the stories shared in this study hope to provide insight on how educators navigate through their personal pain and how the school community can offer increased support through these difficult times. This study is significant because it may provide school leaders with necessary information to bring about reformative change that is necessary to offer educators greater support at work when dealing with the death of a loved one.

Keywords: autoethnography, grief, loss, mourning, death, bereavement, educators
Dedication

This dissertation is dedicated to my biggest fan, my day one, my mother, Pamela Reese. Ever since I was a young girl she has encouraged me to go to school and pursue my education. She believed that I could be Dr. Oliver before I even knew what college and higher education were. She has dedicated her life to helping others and she is such an inspiration. She is a boss in every sense of the word. Mama, I thank you for all the words of wisdom that you bestow on me daily. I hope that I have made you proud and will continue to make you proud in the years to come. There are not enough words to express my gratitude. I am blessed that God chose us to be mother and daughter.

I would also like to dedicate this study to my wonderful husband Ray. I know that it has not been easy giving me the space I needed to get this done. I appreciate you always sticking by me and encouraging me to pursue my dreams and interests. I love you. You are God’s manifested provision that I deserve to be happy. I look forward to many more years with you and all the blessings we will enjoy together.

To my three heartbeats, my beautiful boys, Malachi, Micah, and Matthias: I love you more than you will ever know. My prayer is that each of you will complete the assignment that God has placed on your lives. I want you to be God fearing, successful, and bold in achieving your dreams. I pray you will listen to your dad and I when we tell you that you can accomplish any goal and task that you set your minds to. May God pour each of you out blessings that you do not have room enough to receive.

And last but never least, I dedicate this dissertation to my grandma, Willie Mae. She was my first teacher and her death will affect me for the rest of my life. It is through our relationship
that I found a topic for my study. I am beyond blessed that our lives intersected for 26 wonderful years. I love you Grammy forever and always.
Acknowledgements

I would like to give all honor and glory to God for blessing me with the opportunity to be a joint heir with His son, my Savior, Jesus Christ. I am thankful for His grace, mercy, and love. I pray that I can be a good steward over what He has given me and complete the assignment that He has for me. I know that this study is part of my steps being ordered by Him and while I cannot yet see how it will play out, I know it is part of His divine plan. Thank you Lord for blessing me.

To my committee: I’d like to thank my chair, Dr. Chris Jenkins for pushing me to complete this study. We met a year ago about this time and I have appreciated your guidance and support ever since. Without you as my chair, I never would have gotten to where I am now . . . I’d still be stuck on Chapter 2! Your words about trying to fit puzzle pieces from different sets resonated with me and made something click. Your candor and straight-forwardness on our phone calls were right on time. Also, thank you to Dr. John D’Aguanno. Our initial phone call and correspondence got me back on track and gave me hope. I appreciated you being so understanding regarding the difficult situation I was previously in. Like you, I wanted to discover more about myself and share stories. Thank you for being a pioneer at Concordia and doing an Autoethnography. I hope our stories can help others on their journeys. Thank you, Dr. Audrey Rabas, for your constructive criticism and suggestions. You made me think of concepts in a different perspective and challenged me to keep digging for deeper discovery.

To my participants in the study: Thank you for being willing to be vulnerable and share your stories with me in order to bring about some much needed change to our school community. I want our voices to be heard and I think this is a great way to start the conversation.
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Chapter 1: Introduction

I felt disconnected. I felt numb. I felt relief. I felt guilt. An overwhelming sense of confusion swept through my body. One of the most sorrowful moments in life is watching a person you love transition from life to death. The moment itself was surreal; to watch a person who had thrived at one point in time and then in the literal blink of an eye, it was almost as if she had never even existed. There is damage that is done to the psyche when you observe a person move from finite to infinite. Ray (2017) notes that grief is experienced by people in varying cultures but remains universal due to the typical responses, but at some point, it will affect us all.

Background

I was afforded with not having to experience a personal loss until I was 25 years old. My experience came in the form of losing my grandmother who was my first best friend. She was my next-door neighbor, my first teacher, the woman that my mother and I both admired. She was the epitome of everything that I wanted to be when I grew up. She was a dedicated wife for 69 years, an immaculate homemaker, an outstanding cook, and had a way with children like no person I have encountered. Her passing from this life to the next is one of the most devastating events that has occurred in my life.

During the days, weeks, and months that followed her passing, I spent time writing my thoughts in the hopes to process what had happened. At the time, I distinctly felt as if I did not have anyone who I could openly talk to about my feelings without somehow feeling guilt for how I may have been making the other person feel. I can remember having a meltdown about “My grammy,” my nickname for her, and my mother telling me that she understood, but gently reminding me that “She was my mother.” Other relatives seemed to be more lost than me, and
while we shared our moments, I felt my experience was different than theirs, and it was because it was uniquely mine.

I have always considered myself to be a writer and a storyteller. There have been numerous times in my life where I have journaled and felt a cathartic release from being able to express myself. Adams, Bochner, and Ellis (2010) asserted that writing can be therapeutic and a way to heal oneself. I can remember feeling as if my breath was taken from me. I have always been a writer and loved to tell stories, and after the death of my grandmother, I started writing journals about the experiences preceding her death, the days succeeding her death, and the dreams I had months after she died. Below is a passage from a journal entry that I found in a notebook which was penned shortly after my grandmother died.

I cannot believe that my grammy is finally gone. For years, I have watched her make this slow and difficult journey. Her frail body showing signs of 86 years of living; her mind stolen away by Dementia and Alzheimer’s. I’ve been terrified of this day since I was 9 years old and remember frantically screaming at my parents that grandma was going to die. I can remember mama calling grammy and she stuck her head out of the bedroom window to assure me she was fine. “Kim you can be so crazy sometimes” she said with a laugh. Seeing her infectious smile and hearing her laugh was not enough for me; I needed to hug her and feel assurance that only proximity could bring. I was hysterical, and grandma told mama to send me on over. I went running out of the front door and she was already on her front steps waiting for me. The tears tasted the same way they do now and were just as endless. I can remember even 30 years ago crying so hard that I felt like my chest would explode. I’m not even sure how or why I am writing this all down. I haven’t written like this for years. As a kid, Grammy’s was my favorite place to go. It always has
been. There is no place that I would rather be than with my first best friend. Who will be my best friend now? That night I found great peace lying next to her in bed and during my prayers, I told God that I had to be there when my grandma died because otherwise I was not going to be able to make it. It was a prayer that was heard and was answered 17 years later, and for that I am forever grateful. Thank you Lord for blessing me with the chance to be with her when she died. (Oliver, personal communication, January 2006)

When a person experiences loss and goes through the grieving process, there is an extensive process that assists them in embracing their new normal. Worden (2018) notes that while grieving is a difficult process, there are benefits to moving through the process which include being able to continue having a rich life and being an asset to others. When my grandmother passed, I went through a metamorphosis where I wanted to be like her more than ever before. I had just started a master’s level teacher education program in the months before she died because I knew that I was always meant to work with children just as she had. I began to journal about my thoughts, feelings, and dreams surrounding her passing. I did not realize that 13 years later, those same journals would serve a purpose. My study on the matter of personal grief and loss among educators seeks to add to the body of literature that is currently available.

For the few years following my grandmother’s death, I was keeping it together externally the best I knew how. I immersed myself in my schoolwork on my quest to become an expert in my craft. I became a frequent visitor at the school where I intended to student teach. I became acclimated to the community and journaled about my thoughts and feelings. My journals assisted me in keeping track of my classroom observations, my coursework notes, and my feelings about my grandmother’s passing. I felt that I had to do well because my teaching career would be solely dedicated to her honor. My legacy would then add to her legacy. The day I was hired to be
a classroom teacher was one of the happiest moments of my life at that point. I felt that the time had come for me to walk out my God given assignment and officially enter the world of education.

As the years went on, I have continually endured celebrations and loss. Since my grandmother has passed, I have been a successful teacher, a mentor to other educators, held several district committee positions, and presented at various district professional days. I have been a district director for a nationally known college preparation program and had the opportunity to make an impact in the lives of the students I work with. I have obtained two master’s degrees and accepted into a doctorate program. I am happily married and the mother of two, with a third on the way. In all my tremendous highs, I have also experienced some lows in the forms of personal loss. In the last several years, I have lost my grandfather, my husband’s grandmother, my uncle, and had two miscarriages. I have also lost other relatives, the parents of my students, and a student in my math class.

After reviewing literature, I found that there was an absence of research which specifically discussed how teachers maneuvered through their processes of personal grief and loss. At some point in time, all will be affected by death; no living thing can escape from it. I know that my struggle of loss while continuing my professional career is not an exclusive story. However, my story may be relatable and offer some guidance for other educators as they navigate through their teaching careers.

Conceptual Framework

The conceptual framework that assisted me during the research process is Worden’s (2018) four tasks of mourning. The theory served as a guide for organizing my story, how I have
responded to the trials and tribulations that grief brings since my grandmother passed away, and how these experiences impacted me as an educational professional.

Worden (2018) refers to grief as the experience of losing a loved one. The experience includes our feelings, thoughts, and how those manifest and reinforce over time. Mourning is the process that a person will go through as they are making sense of the loss (Worden, 2018). Mourning is a process meaning that the act of mourning itself is a phenomenon that needs to be worked through. Other authors such as Kübler-Ross (1969, 2005), Bowlby (1969, 1973, 1980), and Sanders (1989) have focused on stages, attachment theories, and phases, but Worden developed tasks to show the progression and create deeper understanding for how we mourn the loss of a loved one.

I chose Worden’s tasks of mourning because I felt he encompassed my experience in a clearly defined way more so than the other authors. The first task is accepting the reality of the loss, which is centered on coming to terms with the finality of death. Next, is processing the pain of grief, which can range from literal, physical pain to emotional breakdowns. The third task is adjusting to the world without the deceased, commonly thought of as adjusting to the new normal of life without our loved ones. Finally, the survivor looks to find a way to remember the deceased while continuing with life, which often is channeled through attachments. Worden (2018) suggested that none are in any order due to how personalized the process of grief is for each person.

Statement of the Problem

After conducting a review of literature, there is limited information which specifically discusses educators’ experiences with personal grief and loss and how these issues impact educators in their roles and responsibilities within their school communities. To offer the most
effective assistance to the 3.6 million educators in the United States workforce (U.S. Department of Education, 2018), it is important that the issues of teacher’s grief not be ignored and kept hidden (Rowling, 1995). A study conducted by The American Federation of Teachers and New York Life Foundation (2012) found that 69% of teachers have students in their classroom who have experienced loss, but only 7% of educators have received any type of bereavement training. This study was created based off the most recent data available. The Coalition to Support Grieving Students found it to be so problematic that the organization created greivingstudents.org in order to provide more information in how to support students from an educator’s perspective. Empirical studies have found that teachers would like more education in and better training when helping students cope with issues of grief and trauma (Baweja et al., 2016; Phifer & Hull, 2016). If only 7% of teachers have received bereavement training to help students, a review of literature has shown minimal data for how teachers can navigate the process of grief and loss in their personal lives and how it may affect them in their daily work.

As I searched for literature and research on how teachers handle grief and loss, the majority of articles focused on how educators can help students who have gone through periods of bereavement. I was interested in what research may exist due to my personal issues with grief and loss. One rare study conducted by Rowling (1995) entailed interviewing teachers to understand grief and loss as experienced by individuals within a school community. The study found that educators exhibit three elements which frame the issue of disenfranchised, or hidden grief for teachers. The first element was the need to be human and have personal and connecting interactions, the second was the personal belief that teachers need to control their emotions and exhibit traits of a leader, and the third was to care for young people.
Since that study, there have been many published works which center around how teachers can assist students through bereavement issues and grief (Beinart, Lane, & Rowland, 2014; Dyregrov, Dyregrov, Endsjø, & Idsøe, 2015; Fifield, Ford, & Grusenmeyer, 2014; Hume, Regan, Rhinehalt, & Megronigle, 2016; Stylianou & Zembylas, 2018), but few studies which specifically examine how teachers process their personal grief and loss and how it effects their tasks. Beckelhimer (2017) noted that death affects more than just students and that writing and using language is a powerful tool to help us cope. In their research, the author reflected that when their father died, they still had a responsibility to teach, communicate with students, provide feedback, and give grades . . . none of which they felt like doing. I too had similar feelings during my experiences of loss. While I had garnered the sympathy and empathy of others, grief was not something that I could afford to stay in for long. I had too many responsibilities waiting for me.

The obligations of my profession and educational endeavors were progressively increasing and there was no time for prolonged periods of mourning beyond the customary three-to-five days of bereavement leave. I would like to think I handled each instance of loss with as much grace and mental fortitude as possible, but upon reflection I was a broken person on the job, perfunctory in my thinking, operating at a high level of automaticity but without my usual level of engrossment in my tasks. Being an educator is a laborious labor of love; we study to perfect our craft, plan lessons for multiple subjects using various modalities week after week, we communicate with parents, peers, and our administrators, all while portraying a virtuoso actor in front of our class because regardless of emotions or real life, the show must go on. Whether teachers are dealing with loss in their classroom or school communities, direct or otherwise, the loss has effects on their well-being and their performance.
My study seeks to add to the current body of literature by drawing connections between my personal experiences to the experiences of other grieving teachers. If teachers can glean knowledge from resources that can assist them in working through grief and loss, specifically at a personal level, it can engage them in understanding their own grief and loss, and perhaps provide clarity on how to use self-expression and storytelling to heal and cope within their classrooms and school community.

**Purpose of Study**

The purpose of this study was to understand the processes of grief and loss through the lens of educational staff members. Autoethnography was the chosen method because the art of storytelling helped me connect my experiences of grief to others and offer appropriate assistance to educators to determine what type of support can be offered. Teachers may feel that their grief is somewhat stigmatized due to the demands and confines of the job. Emotions are acceptable to show students for purposes of modeling, but only to a certain point. Doka’s (2002) extensive research on grief calls this disenfranchised grief when there is a stigma that surrounds a person and may prevent them from seeking the help and support they need. Grief that is not seen may not be considered real if it is not explicitly seen. If teachers do not readily express and share their grief with people at the workplace, a place where much of their time is spent, then who do they confide in when there are episodic breakdowns at work?

In terms of grief and loss, teachers have a fear that they may lose it or snap over something small and trivial, which would be an outward sign on losing control (Rowling, 1995). Empirical data is plentiful in the respect of grief and loss, but the topic is challenging to quantify with a series of numbers and relevancy in recent years. Most working professionals have experience with losing a loved one while employed and have had to adhere by their company’s
bereavement policy. There is a standard three-to-five days given based on proximity to the deceased (parent, grandparent, child, or sibling). For other relatives, there may be no time given at all and one would have to take a personal day to cover the time off work. Due to my responsibilities as an educator, my own experiences have been incredibly stressful when a loved one has passed. The sadness of the grief, the stress of typing out narrative style substitute teacher notes, and the anxiety that comes with pretending nothing happened as to not break down in front of students when I see those sweet handmade “I’m Sorry” cards. Educators should have a solid support system and a process where we can work through our processes of grief and loss without feeling the stigma that public grief is not acceptable or make us less professional. One desired goal of this study was to provide the school community with resource ideas that can provide a greater level of support for their grieving teachers, especially those dealing with personal losses.

Research Questions

RQ1. How has mourning and grief through the experience of death and loss affected me?

RQ2. How do educators perceive the process of grief and loss and the impact on their experiences while performing their duties?

Rationale, Relevance, and Significance of the Study

Grief and loss will affect every individual at some point and time. There is a limited amount of research which surrounds how educators handle personal experiences of grief and loss. This study is intended to bring further awareness to the process of moving through grief and loss from an educator’s lens. Educators are faced with numerous stressors each day in addition to dealing with personal life. According to Teachercertification.org (2019):
The primary role of a teacher is to provide information to students. Teachers, especially elementary teachers, are required to teach multiple subjects throughout the day. This requires an immense amount of planning, which is another role of a teacher. Teachers also act as role models and in some cases as a surrogate parent for students who lack the proper guidance and positive adult interactions that are necessary to be successful. Being a developer is another role of educators. Not only in developing students’ skills and potential, but in developing resources to assist with student success. (paras. 1–7)

In addition to those roles, I also act as a counselor, a mediator, and a nurse when necessary. As an educator who has experienced grief and loss, my personal issues of grief have impacted my work. I felt this study was important because it focused on a gap in literature that is currently missing. There is a need for greater understanding and support for teachers who have experienced personal grief and loss. I feel as a teacher that I have had to hide my grief and pain to keep up appearances because I did not want to seem incompetent to my administrators, colleagues, or classroom parents. As an aspiring leader in academics, the knowledge attained from this study will not only contribute to my success, but also provide support for other educators who may be stressed and feeling as if they need to exit the profession due to handling job responsibilities and personal loss. Research indicates that stress and teacher attrition are tied to teacher’s personal lives but also connected to working conditions; excessive workloads and emotional exhaustion help teachers to leave the profession, while supportive environments increase teachers staying in the profession (Chang, 2009; Skaalvik & Skaalvik, 2011, 2015).

Additionally, this study provides useful insight for employment assistant programs which serve educational staff, school administrators, and others within the school community.
Participants in this study benefited from gaining deeper self-awareness in a manner which allows them to heal and be a stronger support system for others.

**Definition of Terms**

**Bereavement.** Defines the loss to which the person is trying to adapt and the experiences of having lost someone close (Worden, 2018).

**Educational staff.** Educational staff is considered to include teachers, paraprofessionals, custodians, librarians, counselors, guidance counselors, kitchen staff, building engineers, administrators, and administrative staff.

**Grief.** The loss due to death (Worden, 2018).

**Loss.** Loss is a sense of deprivation or painful separation from the beloved (Abi Hashem, 2017).

**Assumptions**

Assumptions in research are items which are assumed to be true. One of the assumptions in the research is that all participants, including myself, will be forthright and honest in their responses. The content of this study was surrounded by data that is very personal in nature. Therefore, there may be some questions regarding grief and loss that may be too difficult or painful for participants to answer. In order to protect participants by not causing intentional harm, I accepted their answers at face value and believe they are responding with their entire truth. Creswell (2013) noted that assumptions and paradigms must be explicit in writing and study and should be aware that they influence inquiry. Personal views and beliefs are referenced in the autoethnographic study. The author continues to discuss that “we always bring certain beliefs and philosophical assumptions to our research” (Creswell, 2013, p. 15).
Ontological. The ontological assumption of this study concluded that varying perceptions of reality are associated with grief and loss. While a school system is comprised of many separate entities, each member is integral in the success of the building. To discover these realities, interviews were used as the primary source of data.

Epistemological. Creswell (2013) asks several questions under this practice which include “What counts as knowledge?” and “What is the relationship between the researcher and that being researched?” (p. 21). As a person who has been through grief, I have a first-hand account of the phenomenon being researched so there is familiarity with the topic. I am also an educator and have familiarity with school structure. I understand the demands of those who work in an educational setting.

Axiological. The focus of my research was to understand grief and loss and how it affects educational staff members. I feel that grief and loss are both concepts that affect us all in varying ways, but as educators, the time to grieve is quite limited unless a person is eligible to take a sabbatical or leave of absence. I feel more support and time should be allotted for those who are experiencing loss.

Methodological. I sought to understand the world where I live and work. Creswell (2013) asserted that multiple realities are constructed through our experiences and interactions with others. This view would fall under social constructivism as I attempted to discover the participant’s perspectives.

Delimitations

Delimitations help the researcher define boundaries in their research. Delimitations limit the scope and assist in clarifying the boundaries of the study (Simon, 2011). The sample size for this study consisted of having a minimum of eight participants in order obtain data that was
focused and rich. Another delimitation was the type of questions asked. Questions were open-ended in nature to allow for in-depth responses due to the nature of the study.

**Limitations**

Limitations in a dissertation are possible weaknesses that exists within the study that may be out of the researcher’s control. One limitation is most data comes from the researcher, which could be a weak data set. Due to this, the study is not entirely replicable due to the stories being unique in nature. For the sake of validity and trustworthiness, other stories will be shared, and participants will be advised that honesty is essential to the quality of the study and dishonest answer will result in an exclusion from the study. Another limitation of the analysis provided was that it was not generalizable to all teachers who have suffered loss and dealt with grief during their academic tenure. Autoethnographies focus on the journey of discovery rather than an obvious conclusion. Autoethnographies are fluid and the story never comes to an end, which may be viewed as a limitation. However, due to the limited data and this study being my story, there is an important opportunity to showcase the need for additional research.

**Chapter 1 Summary**

Grief and loss are phenomena that will affect us all at one point in our lifetime. In the subsequent chapters, there will be a literature review which will focus on autoethnography as a research method and the process of progressing through personal grief and loss. Worden’s Four tasks of mourning will serve as the framework for my study, with references from other seminal autoethnographic authors such as Ellis (1999) and Bochner (2012). My experiences with grief and loss will be examined as this study continues. It is my hope this study fully encompassed the challenges of progressing through the loss of a loved one, but specifically through the lens of an educator.
Chapter 2: Literature Review

Literature on grief, mourning, death, and bereavement is plentiful, even though discussing death is a squeamish topic. Regardless of our level of comfort with the topic, it is an experience that links us all. The morbidity is that at some point we all will die and leave someone to mourn our passing and to grieve our end of existence. The manner in which one will deal with death is universal and yet unique. Regardless of religious beliefs and thoughts of an afterlife, our physical separation from our body is final and undeniably a troubling thought for many. Tassell-Matamua (2014) noted that in Western societies there is an ideology that exists that when our physiological structure ends there is nothing that can live on and survive. Perhaps that is the reason why grief and loss are so impactful. When we lose someone who is close to us, there is a part of us that feels that it leaves with them. We spend years developing a relationship that is full of intricacies and in a blink of an eye, the dynamics of the relationship change forever. The loss and meaning on our lives have effects on our social, emotional, and cultural aspects of our lives (Dennis, Klass, & Neimeyer, 2014). There are many terms that describe the living’s life after death experiences: grief, loss, mourning, and yearning, but all are associated with how we cope and can continue with our lives. In the lives of educators, we too suffer from grief and loss and its impacts on our profession. This autoethnographic study will focus on educator’s personal grief and loss and its impacts on our job duties at the data collection and analysis stage, there is a lack of research in the literature which is why this study is significant.

The search for relevant literature was conducted using Concordia University’s online database. ERIC (Proquest), Education Database (PROQUEST), Dissertations & Theses 26 Global (ProQuest), Wiley Online, and Taylor and Francis Online. Google Scholar was also used. Several search attributes were used in the initial literature review search. The attributes
commonly used were grief, teachers, mourning, loss, death, and bereavement. The searches were refined using full-text, scholarly reviewed, and for most articles a 2014 or later publication date was used in order to find the most recent and applicable data.

**Conceptual Framework**

Grief can come in two forms: complicated grief and normal grief, which is uncomplicated. Lindemann’s (1944) seminal research focused on bereaved patients and noted five themes which included bodily distress, fixation on images of the deceased, guilt, hostile reactions, and a deficiency in normal coping without the deceased. Lindemann (1944) also furthered his work by discovering that people seem to mimic certain traits of the deceased as their own. Worden (2018) notes that the behavior associated with grief have expounded and developed categories into which behaviors fall: feelings, physical sensation, cognitions, and behavior. There is also disenfranchised grief, or hidden grief, which is when a person does not have a right to grieve because the loss or relationship is not recognized, or the losses may not be acknowledged (Doka, 2002; Mulvihill & Walsh, 2013).

For this study, Worden’s four tasks of mourning served as the underlining conceptual framework. Worden (2018) asserted that while healing does take time, the process of grieving and mourning creates tasks that must be addressed. These tasks allow a person to be able to effectively move through mourning in a healthy and meaningful way. Mourning those who have died becomes a process of being able to adapt and handle the emotional issues that come with death.

**Task one: To accept the reality of the loss.** The first task of Worden’s (2018) mourning is to accept that the person has really passed on. Many times, people convince themselves that the person is not truly dead or that they will reunite with their loved ones, but truly understand
that death in this life is final. Worden notes that many people refuse to believe that death is real and therefore become stuck in the first task, sometimes for years. Denial is a major factor in accepting death. Death is hard to accept because at some point or another, life events will force us all to face the reality of being mortal; denying death will always fail (Tomer & Wong, 2011).

Through personal experience, I can attest that denial is certainly real when a loved one passes. My stage of denial was just a state of disbelief that my grandmother had passed. My grandmother had been sick for a while and her death was expected. However, it was hard to accept because I had just been talking and laughing with her and she was in great spirits and fine. In an instant, we were joking and then she was just gone. As I frantically performed CPR, I can recall her breath blowing back into my mouth and the excitement I felt that I was able to bring her back again, as I had successfully done numerous times before. The realization that it was her last breath was just unfathomable. Arriving at the hospital and still seeing her vitals like her blood pressure only to be told that the blood continues to flow. I remember wondering how in the 10-minute ride from the house to the hospital, how this was possible. She was legally declared dead an hour after I had called 911, when the nurse finally turned off the machine and told us we could stay as long as we needed to. How could I possibly accept that she was really gone, when she was still medically alive over an hour? Was it possible that they could have brought her back and because she was 86, they just decided to let her die?

The ride back to the house was expectedly somber and we left everything in her room just as it was for months. Thirteen years later, some of her clothes are still at the house. I do not believe my family ever wants to rid the house of her completely. We know she is not coming back, but it just feels wrong to get rid of all of her things. Worden (2018) does note that being
attached to belongings is normal, however, it is when this attachment hangs on for years that a person could be in denial. This mummification is a way to preserve memories just as they are.

Another stage of denial or not accepting the reality of loss is denying the meaning (Worden, 2018). Actions such as denying meaning is the opposite of holding on to personal effects and removing memorable items or minimizing loss. Worden discusses how many of his interviewees would deny the importance of relationship or minimize their feelings as a defense mechanism. While I personally have never experienced this, it is not an uncommon phenomenon. Other mourners undergo selective forgetting, which Worden (2018) labels as rehearing and remembering the good memories and blocking out the undesirable ones. There are also certain distress factors which deal with cognitive, emotional, and behavioral issues which Rosner, Pföhl and Kotoučová (2014) named the second cluster of complicated grief. Grievers in this category may deny that death is permanent and need therapy to come to terms that death is final (Worden, 2018).

Other grievers may fall into the spiritualism category (Worden, 2018), but this is not a category where one size would fit all. In my case, I am a Christian and do believe that I will be reunited with my loved ones one day once I die and go to Heaven. I believe in eternal life, but have not made any attempts to conjure up the spirit of any of my loved ones. Parkes (2001) conducted a study on religious spiritualism and found several bereaved persons had attempted to attend seances to make contact. Worden (2018) notes that this type of behavior is not considered normal.

Another group of grievers in denial are those who intellectually understand that the person is gone, but still look for them to be there. Gestures such as expecting a person who has passed to still answer the phone, be in their familiar spot on the couch, or even return home.
Coming to accept a loss takes time both intellectually and emotionally (Worden, 2018). Death can be very hard to accept, but certain events like being with the deceased when they pass, funeral attendance, or being at the burial are examples of assisting in the grief process and providing a therapeutic acceptance (Bailey & Walter, 2015; Worden, 2018). These last moments while loved ones are alive or the final viewing when we can see their bodies, offer opportunities for us to speak our last thoughts to them and for the very brave, offer words that make them come alive during remembrances or eulogies. Sharing these moments and highlighting their life can offer reassurances to the family and make acceptance easier.

**Task two: To process the pain of grief.** The second task in Worden’s (2018) four tasks of mourning is processing the pain that we endure as we grieve the loss of our loved ones. We all experience certain levels of pain when a loved one dies, but the severity or degree of the pain differs. While the intensities may vary, it’s unfathomable that a person would not have any pain after losing someone they had a relationship with (Worden, 2018). The level of attachment between the deceased and survivor does play a role in the depth of the pain. The strength of the relationship, the security the relationship provided, the positive and negative feelings between the parties, conflicts with the deceased, and the level of dependency, which all play a role in the depth of pain (Worden, 2018). The closer one is to a person, the more pain would be involved with the loss. Spouses often experience great pain when their partner dies, because there is a level of security in a marriage or partnership. The loss of one party creates an imbalance and certain needs can no longer be met. In every relationship there are negative and positive feelings that exist. Depending on which feelings are greater, the pain may be less intense, which may be tied to task one and denying meaning. With any relationship, conflicts and feelings are integrated. As Worden (2018) notes, if there was some estrangement or relationship strain with a
deceased parent, the pain may be lessened. Conversely, if there is a feeling of unity and constant reconciliation, the pain may be more substantial. However, the same positive and negative feelings can also be an issue when people suddenly die as there may be unresolved issues. In some instances, the survivor may have purposely avoided a loved one to not become as attached for fear that the pain of losing them would be too great.

Society also can play a role in the process of pain and grief. People will often experience disenfranchised or hidden grief. Doka (2002) refers to this type of grief as socially insignificant. Blood and kin relationships are seen as most important, while other types of relationships like friends, co-workers, distant relatives, care-givers, and even pets are not seen as strong relationships and therefore may not be given the full support and understanding. Worden (2018) attributes this to society being uncomfortable with feelings. The uncomfortableness may lead to insensitive phrases like “Well, you already have children,” “You weren’t that far along anyway,” and “They wouldn’t want you to act like this” are all examples of things that I have had said to me and the last example, I have said to others. In most cases, it seems as if the person, myself included, were trying to make the person feel better, but it can make the person feel as though their grief is not worthy enough and that they need to suppress their pain.

In suppressing pain, there are many avenues that people choose to take. Some people avoid all the negative feelings and issues altogether. Others may turn to unhealthy relationships or substance abuse in order to deal with the pain. Worden (2018) also discusses that some seek a geographical cure, which is moving to a new location in order to escape the pain. Grief can become complicated, or so severe that it is difficult in resuming normal tasks, which can take around six months (Duan et al., 2011; Rosner, Pfoh, & Kotoučová, 2014). While this type of grief only affects a small number of griever, they are afflicted with crippling impairments.
Examples of impairments may be refusing to leave the house, not participating in once enjoyable activities, refraining from proper hygiene, or becoming malnourished if grief becomes too severe. Worden (2018) prefers the term complicated mourning due to the mourning process being the most complicated aspect of loss. The grief is individualized, so one cannot say for sure what makes grief complicated. Mourning becomes complicated because of the process that each of us may go through and how we move through each task.

Task three: To adjust to a world without the deceased. Adjusting to life without the deceased is another task of Worden’s (2018) Tasks of Mourning. According to the researcher, there are three areas of adjustment that a person goes through after losing a loved one. External adjustments are how the normal functions of everyday living are affected. The burning question for me was “How do I continue living without my grandma?” She was the person I always confided in; my grandparent’s house was my safe haven, and my literal home away from home. The months following her passing were hard. I struggled with overcoming that she would never be in her favorite chair again or sit up to greet me when I came over. It became very difficult going to the house, even though my grandfather was still alive. Things were not the same without her, and I began to realize that they never would be. Internal Adjustment essentially looks at the survivor discovering or perhaps even rediscovering their own self-esteem and identity. It also looks at self-efficacy and how a person sees themselves without their loved one. Rather than looking at what the person would have wanted them to do, it involves being self-reliant and self-assured.

Worden (2018) referenced self-definition as the person moves to truly becoming a new person without their loved one. The final adjustment is Spiritual Adjustment, which is fundamentally centered around questioning spiritual beliefs when a loved one dies in a sudden or
tragic manner. This is an adjustment that I have gone through with a few of my personal losses, specifically both of my pregnancy losses and the loss of my husband’s grandmother. I could not and in some manner, I still struggle with making sense of the loss. I wondered what I had done wrong, even though I knew this was incorrect thinking, that caused my pregnancy losses. I knew that God was not punishing me, but it seemed to make more sense than a ‘chemical pregnancy.’

A chemical pregnancy is when a pregnancy ends prior to the fetus being detected on an ultrasound. Women have positive pregnancy tests, but in my cases, I lost all my symptoms before the fifth week of pregnancy. Usually abnormally chromosomes are linked to the loss.

With my pregnancy losses, I was never able to see my baby on an ultrasound, hear a heartbeat, or have other typical keepsakes that pregnant women are offered. All I have are my positive pregnancy tests. It was difficult at the time to make sense of how to share my grief with others.

At the time of my losses I was a director of a program that assisted low-income and first-generation students getting into college. I had earned a couple weeks of paid time off, so I took a week off work. My employers were very empathetic, but even if they had not been, I still would have taken the time. Upon returning to work, my open-door policy took a bit of a hiatus. I had a private office and my door had a tiny window that I was able to cover. I recall thinking that I would never be able to help my lost child navigate through the stressful process of prepping for placement tests, choosing a college, and filing paperwork to access financial aid. The only sense that I have been able to make is that it just was not meant to be; but then why was it allowed to happen in the first place?

My husband’s grandmother was a truly lovely and exceptional person. I wondered how someone as amazing as her, died without warning and notice. It seemed so senseless and so unfair. Years later, I am still struggling with how something like this could have happened, even
though I know we all will eventually succumb to death. Worden (2018) noted that most people will reassess the situation and develop skills to move beyond these issues. Gesser, Wong, and Reker (1997–1998) conducted death acceptance studies and found three types of acceptance: neutral death acceptance, which includes realizing death is inevitable, approach acceptance, which is viewing death as a pathway to an afterlife, and escape acceptance, which is choosing to die versus living to experiencing a painful existence. The first two share similarities with Worden’s third task due to the process of being able to realize the finality of death while also realizing that life truly must and does go on.

**Task four: Remembering the deceased while still living your life.** The final task in mourning is rooted in giving meaning to the person who has passed. Worden (2018) posited that this task is to pay homage to the dead in a way that will not hinder the survivor for moving on with their life. It is realizing that life must continue to be lived, other people can receive our love, and it is okay to be successful. Personally, I worked very hard to get through this stage and my memorializing came in the form of becoming an educator, because my grandmother was my first teacher. As I was growing up, I did not realize what she was instilling in me, but it became apparent in the final months of her life when I made the decision to pursue a career as a teacher. Oftentimes people are actively seeking to give their life meaning through the legacy they leave behind and the materialistic goods they will bestow to others, without realizing the meaning that their death will provide to other people.

Task four is essentially being able to enjoy and love life without your loved one being physically present, which can look differently depending on the griever. As a widower, it may mean engaging in a conversation with a member of the opposite sex or even going out on a date. For a parent who has experienced loss, it may mean considering packing up a child’s room or
donating their child’s personal items after they have died. The goal of task four is to a connection that is appropriate while still considering our loved ones who have died. What is important is to remember that it is acceptable to honor the memories and thoughts of those who have died and still find enjoyment in new things. One of the ways I moved through task 4 is when I called my husband’s grandparents grandma and grandpa. I knew the relationship I had with my grandparents, so the term is not one that I would ever loosely throw around, but it did not feel right calling them by their last name. They had embraced me in their family and made me feel special like I belonged. I had to reflect on what it meant to be a grandparent and was able to come to a place where it felt natural calling them grandma and grandpa. Worden (2018) expounded that the processes of this task would not weigh a person down. Instead, the experiences would assist with a person achieving greater clarity and understanding. I had to come to realize that calling other people grandma and grandpa was not a disrespectful act to either of my grandparents. It was simply a title and it was the relationship that had caused me to second guess myself. I also have to understand that my grandparents were not concerned about what I called other people.

Through these tasks, one can move through the process of grief and loss and seek to find meaning and worth. At times it may be necessary to receive counseling or therapy to assist in the process, but it is paramount that each survivor work through these tasks in order to continue having the rich and fulfilled life they were meant to have.

**Review of Research Literature and Methodological Literature**

The review of the literature is one that focused on the overall topic of grief and loss. My research hopes to fill the gap that currently exists. It can be a challenge for a researcher to identify the gap in literature (Farooq, 2017), but I feel I have found an issue that has not been
properly addressed. Farooq (2017) adopted methodology from Denyer, Smart, and Tranfield (2003) who conducted a search of keywords. Farooq (2017) utilized a strategy using research gap, problem identification, systematic review and other criteria. Initially, I did not include research gap as a keyword in my search. After I adopted this strategy with the same keywords as before but added research gap, the findings still lacked information pertaining to personal grief and loss and its impacts on teachers. It is important to address this issue due to its possible implications on teacher effectiveness, teacher attrition, and teacher mental health and well-being. Since this study seeks to fill a perceived literature gap, the literature review will focus on general issues of grief and personal loss.

For those who have endured the loss of a child, it is said that nothing can compare to the pain of losing a child which includes pregnancy loss. It is especially difficult for women because our bodies are the ones who go through the physical process of carrying a child which lends to the eternal bond that many mothers feel towards their child. The experience of a parent who has lost a child at any age is detrimental and one of the most devastating events that can have haunting and permanent effects.

Armstrong, Hall, Hutti, and Meyers (2013) referred to perinatal loss to include miscarriages, stillborn birth, and neonatal death. Specifically, perinatal loss is loss before 20 weeks of gestation, stillbirth is defined as a loss between 20 weeks and birth, and neonatal death is any time after birth to five years of age (Branjerdporn, Desha, Meredith, Strong, & Wilson, 2017). My literature review began with some self-reflection while I researched grief and loss. Due to autoethnography centering on personal accounts, I was taken back to my own personal experiences with perinatal losses.
When I started my doctoral journey in 2013, I was also teaching full-time. I had struggled with fertility issues but was overjoyed when I received the news that I was expecting a few weeks before I was accepted into my program. Since 2013, I have been blessed to give birth to two healthy little boys. My husband and I decided to grow our family but unfortunately, I suffered from two miscarriages within a year and a half-time period. The miscarriages were incredibly difficult because I had had two normal and relatively complication free pregnancies, aside from having two Caesarian surgeries. The first miscarriage came as a total surprise. Earlier in the week, I had faithfully gone in to have my HCG levels tested and while they were slowly rising, I never thought anything more about it. That Sunday, we invited my parents over for dinner for my mother’s birthday and shared the news that they were going to be grandparents for the third time.

We were elated and excited to embark on this adventure and I could not wait to share the news when the timing was right. My job at the time was working with high school students and helping them with college preparation like writing essays, applying for scholarships, and provided support as needed. I can remember bounding into work on that Monday morning, so full of hope and anticipation to go through the experience of being pregnant again. I had not experienced any cramping or discomfort so was surprised when I went to the restroom and discovered I was bleeding. I immediately called my husband and told him I was going to the doctor because I was concerned something was wrong. Next, I called my mother and told her what was happening, and she assured me that sometimes women do spot and bleed during pregnancy. I then called my father and asked him to pray for me. I think I called the doctor last because I knew in my heart and in my mind that something was wrong, and I did not want to have any medical confirmation. The nurse informed me to come in for an additional test and my
mind raced as I raced to get to the doctor’s office. After I took my blood test, I went home and waited for the news. The call I never wanted to get came and I was told that my levels had dropped, and that the pregnancy would result in a loss. I knew it was serious because it was my doctor who called, not the nurse. I remember crying on the phone and trying to find some type of meaning, but there was no explanation. My doctor was very warm and understanding. She knew there would be no closure for me, so she tried her best to console me over the phone and lend her support.

Women experiencing pregnancy loss search for ways to understand what has happened to them. Books, blogs, theories, religion, and medical explanations are ways that one looks to find meaning with what has happened (Lax & Sell-Smith, 2013). The journey to rationalize pregnancy loss is one that is full of confusion. Many thoughts raced through my mind that afternoon and the following months; everything happens for a reason, I had started my prenatal vitamins too late, I ate too much seafood while on a trip to Washington, D.C. a few weeks before and that somehow stayed in my system, I was too old . . . I just knew that God wouldn’t bless us just to take it away. The days following my loss were filled with anguish as I grasped ways to give my loss a voice. There would be no ultrasound pictures, no birth announcements, no social media posts. I took a week of paid time off from work. The only acknowledgement my pregnancy loss had to the outside world was explaining to my employers what had happened and accepting their condolences. The loss of a child is devastating and in the instance of miscarriages, especially in the early weeks, there are there are no rituals-no memorial services or funerals (Kersting & Nagl, 2015). My positive pregnancy test is all I have. It was especially hard seeing posts with pregnant friends. Of course, I was happy for them, but I could not help but have my own thoughts of “what if” and “that should be us.”
In my second loss, I found out right before my 38th birthday in May, about eight months after our first loss. I remember thinking that our baby would have been born in June and this was an early birthday gift. My husband and I had been planning a getaway with just the two of us to San Diego and I felt compelled to share the news before we left. There was a part of me that was nervous to tell my employer about my pregnancy because I had just been hired to be a classroom teacher again two weeks prior. However, I knew that this time it was meant to be, so I would cross those bridges when I got there. We had a lovely time during our week there, but the walk on Mission Beach was very difficult. I felt cramping and abdominal pain, but assumed it was from the fact that strenuous activity, like walking a few miles on an uneven beach surface, was taking a toll on my usual sedentary body. The next couple of days were uneventful, until I felt that my pregnancy symptoms were gone and the last evening of our trip, a quick run to a local drugstore to purchase pregnancy test confirmed my worst fears: I had lost another baby. The plane ride home was somber. I was thinking how many other women had lost their baby while flying at 30,000 feet in the air. I was supposed to start work the next day but called my principal to tearfully inform her that I had a miscarriage. She was comforting and understood, but I could not afford to take a week off a new job, especially at a year-round school when I was needed to start my orientation and become familiar with my students. So, after one day, as opposed to a week with the first loss, I trudged into work and put on a smile and acted as if everything in the world was right. I watched the kids run and play and thought how my lost babies would never have the opportunity to run and play. There would be no baby showers for them, no first car ride home, no decorated nursery. No first days of school, no learning permits, no graduations.

Pregnancy loss is often referenced as a loss of the future, a loss of what was to be, and a loss of aspirations; parents mourn the idea of what they envisioned for their child (Lax & Sell-
Smith, 2013). The process of moving through the grief of a child can continue for years and involves a range of emotions from crying, feeling sad, depression, guilt, and anger (Chen, Tseng, & Wang, 2014). For those mothers who suffer a loss after 20 weeks and the death of a young child, they are faced with even more difficult decisions as they usually undergo a Dilation and Evacuation (D&E) or a Dilation and Cutterage (D&C) to remove a fetus that has died. There are options for cremations and memorials depending on how far along the pregnancy is.

Over the course of the last 50–75 years, medical professionals have certainly become more aware of the impact that losses of a fetus or stillborn child has on the parents. During times of yesteryear, medical professionals prevented parents from having any sort of physical contact with their babies, which meant their child was not seen or held (Blood & Cacciato, 2014). Encouraging parents to move on from their loss was meant to be a warped way of averting parents from experiencing grief (Cacciato, Erlandsson, Rädestad, & Warland, 2013; Cacciato, Flenady, Koopmans, & Wilson, 2013). My personal experiences would have been even more detrimental if my medical professional team would not have acknowledged my loss in some way and actively sought ways to find answers for me. I was scheduled for a uterine biopsy, which determined nothing more than a small cyst and nothing to cause a pregnancy loss. I am certain had my pregnancy been further along, there would have been some type of pamphlet or literature to perhaps provided some type of in-house counseling, but there was none of that. As a grieving parent, I do feel that more should and could be offered to help parents regardless of their stage of loss. The lack of support from medical professionals is necessary and wanted as it shows a caring and concern for familial needs which include emotional support; Grieving patients value health professionals who have empathy, are honest, and recognize loss (Cacciato, 2012; Kelley & Trinidad, 2012).
Head, Lawson, and Zheng (2015) studied Chinese families whose only child had died. For the past 50 years, China has been under strict ordinance to control their population. This ordinance allows for families to have only one child. Their study focused on Shiduers, Chinese families who suffer the loss of their only child versus those of non Shiduers. Their study found that women tend to have higher levels of depression and a smaller social network when compared with men who are Shiduers. Grief and mourning are individualized; however, most researchers agree that a year is not enough time to grieve the loss of any beloved, let alone a child. Head et al., (2015) found that parents grieved approximately five years after their only child’s death, but unresolved grief lasted from four to nine years after loss. The loss of a child at any point may take years to work through. Head et al., (2015) also revealed that Shiduer’s grief is more intense than griever in other cultures or situations. In most progressive countries, the child is expected to surpass the parent in terms of life expectancy. When a child dies, the parents may feel guilt or that they failed in their role to provide protection. There also may not be an adequate support system to assist parents in their grieving which has an adverse-effect on healing (Rostila, Saarela, & Kawachi, 2016). It is imperative that support systems are in place in social constructs like places of employment, churches, hospitals, and among family and friends to help parents properly grieve and heal with no time constraints. Worden (2018) contends that when a person can discuss their loved one with less pain, that is how one can measure progression and healing.

*Death in families.* Whether the death is expected or comes as a surprise, families often find themselves in limbo of being prepared but also in denial. The death of a family member can cause extreme turmoil and upheaval in the well-being of surviving members. Cognitive, behavioral, and health can be affected when a family member such as a spouse, parent, sibling,
or grandparent dies. The deceased may have ensured that the family would not have to feel the financial strains of the death by leaving a will or having a life insurance policy. The surviving families may logically realize that only a body or the remains of a person are left, but still splurge on caskets with built in mattresses, expensive vaults, and in some cases, cryonics (Robert & Tradii, 2017). As described by Worden (2018) and Kübler-Ross (2016) there are several reactions that a person may have when a loved one passes away depending on the relationship. These responses depend on the relationship, the circumstances surrounding the death, support systems or lack thereof, and unique characteristics such as the survivors experience with death, personality traits, or one’s outlook on life (Bodman, 2015). Death can affect families with disagreements over inheritances, shifts in familial roles, changes in societal status, either through an elevation or declination, and cause families to drift apart or become closer together. The grieving process showcases how family dynamics change with the death of a loved one.

Parental death. I am fortunate that I still have both of my parents, but I know colleagues whose parents passed away while they were employed as teachers and in other professions. In the United States, most adult children have their parents from a span of 40–60 years (Lechner & Leopold, 2015). After a loss, loved ones are expected to mourn over a period of three to seven days. This minute time off work to grieve is unimaginable given the magnitude of the event. My mother and uncles had their parents for over 50 years. My mother was the only sibling who was not retired, and therefore had to return to work within a week and deal with the demands of her job while also battling the loss of her mother. Jun, Mark, and Song (2007) conducted research which focused on the attachment theory and the lack of adulthood studies on the effects of parental death. The researchers found that the longer a child has their parents, the stronger the bond, especially when children take on the role of caregiver. Females are often passed the torch
of being the family nurturer, are often the primary caregiver, and more affected by parental death than males (Caballero, Hayslip, & Pruett, 2015; Jun, Mark, & Wong, 2007; Umberson, 2003). Females are typically the ones who handle the day-to-day duties which can be exhausting especially if the parents or parents are still at home. I personally experienced this exhaustion when my mother and I took care of my grandmother in the months preceding her death. Meal prepping and preparing, bathing, laundry, cleaning the house; all tasks that my grandmother could no longer perform on her own. While our efforts were completely a labor of love and it was our pleasure to be committed to ensuring she was safe and comfortable until her end of life, it was still very challenging to care for her and meet the demands of our jobs. The loss of parents may also realign the family hierarchy leaving one of the adult children as the new head of the family, which typically are daughters (Bodman, 2015). In the case of my grandparents, this was true. All the responsibilities, from coordinating medical care to funeral arrangements, were inherited by my mother.

When the death of a parent occurs, it can often trigger feelings of the surviving children’s mortality (Bodman, 2015; Lechner & Leopold, 2015). These feelings of mortality can have varying effects that may range from stress, anxiety, depression, or isolation. Other feelings may include a sense of wanting to accomplish more or striving to complete a bucket list. For my mother, she specifically never had an opportunity to grieve the loss of either of her parents. Others that I have spoken to over the years in passing have remarked the same thing. That life was too busy, too complicated, and filled with too much pressure to have a proper time to mourn. Often the demands of work and family obligations, such as caring for their own children, do not allow surviving children to have the necessary time to process grief (Kübler-Ross, 2005; Worden,
Survivors typically turn to a broader global understanding such as faith and spirituality to make sense of loss (Burke et al., 2014; Neimeyer et al., 2014).

*Spousal and Elderly Death.* The death of a spouse is also a highly traumatic loss that a person can experience. Grief can bring severe emotional and physical pain. A widowed spouse can go through feelings of guilt for being the surviving spouse. Effects can include cognitive effects like decreased self-worth, behavioral impacts such as excluding yourself from others, and becoming depressed (Li, Schimmele, Wu, & Xu, 2019). Being a widow causes disruptions in support, both financially and in companionship, but may lead to declining health for the spouse who survives (Fenelon & Sullivan, 2014). The average age of a widower in the United States is around 55 years of age while life expectancy in the United States is 78.6 years (Center for Disease Control, 2016) so one can assume during the time from of 70–80, most people are experiencing the loss of their spouses. Bodman (2015) found that some surviving spouses can navigate the loss with ease and even remarry, while others have emotional and physical suffering. Newsom (2011) found that there is a higher rate of complicated grief among the elderly. The data from the study indicates that older people have a great deal of difficulty when coping with grief and loss than younger people. The study also found that in adults over the age of 85, there was a resiliency to complicated grief. When my grandmother passed, she was 86 and my grandfather was 88. He ended up living nine more years and passed away two months shy of 98 years old. As a family we were terribly concerned of how he would fair with being a widow because they were married for 69 ½ years. When our loved ones are sick, especially with a terminal illness, one tends to have anticipatory grief. We wait in anticipation for our loved one to die and prepare ourselves to grieve (Kübler-Ross, 2005; Worden, 2018; Lichtenberg, 2017). While he missed my grandmother, he assured us that he would get through it because he had
been preparing himself for losing her. The older we are, our age prepares us for loss (Kübler-Ross, 2005). He remarked that when you are as old as he is, you get used to seeing death a lot. My grandfather was also what I believe one would consider to be well to do financially. He worked from age 14 to 93, and only stopped when a table fell on his hip at work. He was was able to pay for his home in cash, he paid for my family to relocate from Alabama to Nebraska, and he earned a six figure in come until he retired at 93. It has been shown that surviving spouses with higher socioeconomic status tend to live longer than survivors who have a lower socioeconomic status (Fenelon & Sullivan, 2014). I do not think that a comfortable financial status enabled my grandfather to live 14 years after my grandmother passed, but it certainly helped to not have the stress of financial woes.

However, my grandfather’s narrative about his widow status are not indicative of every widow over 75. Components of his narrative correlate with other widower stories. Blake, Brearley, Milligan, Payne, Thomas, Turner, and Wang (2018) conducted a qualitative study using family caregivers who had experienced loss of an adult loved one in a home setting. In their interviews, one of the widowers had the experience of their spouse battling dementia while another dealt with their spouse cutting themselves off and becoming isolated and distant. With my grandmother, her dementia affected all of us because she was confused all the time. My grandmother was convinced that my grandfather did not show enough compassion, and in some ways, I can confirm he did not. She confided in him less and less, and often would just stay in her room and have limited interaction. Research concluded that in cases where spouses felt depressed and despondent, a bereavement counselor may help to bridge the communication gap, especially in cases where families are not present (Blake et al., 2018; Kübler-Ross, 2005; Worden, 2018). In the case of my grandparents, I doubt that either of them would have been
open to this, especially my grandmother because she did not like the visiting nurses to do their routine checks. Yet, when there is a disconnect between spouses at the end of life, the unanswered questions can lead to prolonged grief due to uncertainty (Blake et al., 2018; Newsom, 2011; Worden, 2018).

When my grandfather passed away, I remember knowing that something was going to happen to him. He was a very healthy man despite eating fried catfish every other day and enjoying Jack Daniels in his coffee each morning and having a sizeable cocktail each night after dinner. Doctors remarked that to be two months away from 98, he had the organs of a 50-year-old, which was a marvel to his family seeing how he had been a steady and somewhat moderately heavy drinker for over 80 years. He had caught a common cold and had been to the doctor, but the situation seemed amiss. My always strong and stoic grandfather was suddenly quite nostalgic and was incredibly chatty in his last years of leaving, so when he did not want to talk to me when I called earlier in the day, I knew something was wrong. I frantically called my mother and my uncle who was his live-in caregiver and begged them to get grandpa back to the doctor. The doctors were baffled because they had just seen him the day before but told my mother and my uncle that he could come in that night or first thing in the morning. My grandfather’s reply to a trip back to the doctor was “I’m not going to no appointment. You’ll see.” I believe he had a premonition that he was going to die and was ready. Worden (2018) and Kübler-Ross (2005) each note the evocative language and reports that loved ones who have already passed are waiting for them. My grandfather knew that he had other loved ones waiting for him. My grandfather was ready and unafraid to walk from this life into the next. In a matter of a few moments, the time it took my uncle to warm up some creamed corn and make his way back to my grandfather, he was gone. My uncle found the room softly glowing, although the
lights had been off, and my grandfather with a smile on his face. It was incredibly challenging to return to work after both grandparents died, but my grandfather’s death was sudden. Yes, he was almost 98, but a few days before he had been his usual self. At work there were the typical condolences and a card signed but it was back to business as usual. I felt I could not cry and show any emotions, because it was not appropriate even though it was my grief process to own. Disenfranchised grief was prevalent for me because while people understood the loss and even had empathy, there was no time and place for that. Simply put, the demands of work trumped my need to grieve. My grief would need to wait until business hours were over.

Kübler-Ross (2005) noted that when there is death, especially when the relationship has been one that is longstanding as in that of a spouse, there are two types of closures that people go through. The first type is unrealistic because we feel the need or urge to wrap up and close the situation, so we move through the process quickly. The other type of closure is when we look for meaning and understanding and attempt to put the loss in perspective. When a person is older and experiences loss, they may not feel the need to live life to the fullest because they feel they have already done so. Before both of my grandparents passed away, they had a sense of eagerness about what was waiting for them. Kübler-Ross (2005) noted that in one of her studies, the mother felt that with being a widow and having seen all her friends die before her, there was nothing left in this life. She was interested in knowing what could be waiting for her after she passed. My grandmother told us that she often had visits from others that had passed on and her face would light up when she told us. Prior to my grandfather dying, he often spoke of seeing “Mama,” what he called my grandma, and how she would come and talk to him. While there are many commonalities with the process of dying, such as labored breathing, the smells and looks of death on a person, and people talking of having passed loved ones in the room, death is still a
unique phenomenon to each person. The same can be said with grieving. Survivors may become distant, create stories and situations which give them a sense of security, or deviate from the rest of the family (Worden, 2018). As a survivor, I can grieve in whatever manner I choose. I went through a series of coping methods which ranged from journaling, talking to others, drinking, and paying homage to my loved ones by living life in a manner that I felt made them proud and still somewhat connected.

Grief and Workplace demands. Within a school environment, there are two separate places that exist; in the classroom and out of the classroom (Clandinin & Connelly, 1995). Depending on where a person is situated, their reaction to a crisis or a dilemma may differ. When my grandmother, grandfather, husband’s grandmother, and my uncle passed, I was working in professions that were situated in higher academics of secondary and post-secondary education. I was not in the role of a classroom teacher. The demands of lesson planning, meeting with parents, and maintaining my high energy for a room full of bright-eyed students was not my world. With my jobs in secondary education, I almost felt like a contractor. My position was directly tied to helping high school students and working with them closely, but only during their breaks, study hall’s, and after school. I had wonderful relationships at each place of employment but was not an official hired staff member through the school district, so the expectations were quite different. Taking a week off work required no extra preparation from me. Yes, there were duties that were being neglected, but there were no lesson plans, and feelings of worry that I would have to reteach content and retrain student behaviors due to my absence. Students and staff were aware of my absence albeit not the reason, and my workload waited until I returned.

After I accepted a position to return to be an elementary classroom teacher after a four-year hiatus, I found out I was pregnant a week after I started. I was to go on vacation with my
husband and figured I would tell my new administrator when I returned. I was concerned she would think I was pregnant when I was hired and for some reason that caused me anxiety; I believe it is because somehow felt I was less marketable being pregnant new hire. It would seem as if I had an agenda and was being deceitful. However, while we were on our trip, I suddenly lost all my symptoms the day before we returned. A trip to a CVS found that those beautiful pink lines I had seen a few days prior had disappeared. We were devastated. My miscarriage began on the plane ride back and I was due to work the day after. Upon arriving home to our boys, we dropped them off at daycare. I tearfully called my employer and sobbing told her I would need to take an extra day. I knew a day was not enough, but I was nervous to ask for more time. After the conversation, my husband and I went to the store and unknowingly purchased a box of cereal that was on a national recall due to being contaminated with Salmonella. Miscarriage on one day and Salmonella the next. Each day I went to work in excruciating pain but did not want to ask for more time off work. I wanted to make a good first impression. I did not want colleagues to think I was flaky and lacking in my commitment. I also did not feel comfortable having to explain my absence to anyone had I chosen to take off extra time.

At the end of the week, I found myself in the hospital. The miscarriage was emotionally and physically draining, but the Salmonella from a box of cereal on a national recall was what sent my body into complete turmoil. I was thankful I did not have lesson plans to worry about and my own class to manage. After I returned to teaching full-time, I was still feeling grief. I was consumed with dual guilt from not being able to prevent the pregnancy loss and guilt from not being happy to have two children already. The demands of the classroom quickly took over my necessity to grieve. There were two new curriculums to learn and figuring out how to teach one of the curriculums was especially challenging. My new school was also holistic in terms of
student consequences. There were no suspensions and expulsions. This was new to me. In my previous roles, I was bestowed the title of a classroom management queen and given multiple behavior students each year. Here I did not feel there were as many behavior problems, but the manner of dealing with behaviors was completely different. In time I would become acclimated to the continuum of support for students which focused heavily on talking to students about their behaviors, but in the beginning weeks of school, it was overwhelming.

It was difficult in the weeks leading up to gearing up to being back in the classroom again. While the summer had lent me a bit of a reprieve from the usual teacher demands, I was having an incredibly hard time adjusting. The energy that I exerted pretending everything was fine was taking the largest toil. In the first months following my loss, I felt like I was spiraling out of control due to all the pressure. It had been four years since I had taught in a classroom and all the grief I had been carrying around for the last few years was encompassed all around me. I would lay awake in bed at night and awaiting the dreaded middle of the night call that had awoken me before; there are no good calls that happen in the middle of the night. Those unescapable feelings compounded with the demands of teaching after a four-year hiatus, were affecting me on personal and professional levels.

According to Teachercertification.org (2019):

The primary role of a teacher is to provide information to students. Teachers, especially elementary teachers, are required to teach multiple subjects throughout the day. This requires an immense amount of planning, which is another role of a teacher. Teachers also act as role models and in some cases as a surrogate parent for students who lack the proper guidance and positive adult interactions that are necessary to be successful. Being a developer is another role of educators. Not only in developing students’ skills and
potential, but in developing resources to assist with student success. In addition to those roles, I also act as a counselor, a mediator, and a nurse. (paras. 1–7)

I would describe my first month back as overwhelming and almost feeling as though I was drowning; the same feelings that I had during my first year of teaching. The school where I work at is a school that caters to students who come from challenging backgrounds. There are five criteria that students, or scholars as we call them, must meet in order to be considered. Scholars need to live within a 1.5-mile radius of the school (which is considered a gang territory), come from a single parent home, have a parent that is incarcerated, has a parent that does not have a high school diploma or G.E.D., or have a low-income status. Some scholars meet all five, some only meet one. Working with students with trauma has effects on teachers due to our sensitivity to our students’ needs. Teachers become weighted by the behavior of students and by trying to achieve our lesson plan objectives (Souers, 2017).

In the first few months of school, I had a moment with a scholar who had an emotional breakdown after another scholar read a passage about a grandparent. Their grandparents had died the year before and the grief was still very raw. I went over to console them about found myself sitting on the floor hugging this child as we both sobbed uncontrollably. I was overcome with the loss of my own grandma from 14 years prior when I was a 25-year-old adult. I instantly went back to that little girl who was terrified her grandmother was going to die. Through my blinded tears I saw other scholars look on in bewilderment. After we regained some of our composure, I saw a few other students were crying too. I allowed them to share their stories of their lost loved ones and I felt nervous about it. I wondered how parents and administrators would take it had they known I allowed students to talk about death in the classroom. I then remembered this study and how teachers have disenfranchised grief. Why would I do the same thing to my students that
I felt others had done to me? I allowed them a free space to talk about their troubles and know that I was not judging. In fact, several remarked to me that it felt good to get it out and they liked the fact that I cried too. I explained to my class that my tears were for both of our grandmothers and that it was ok to cry. I felt proud that I showed these young children the power of empathy and the impact of being real. The sad part is that I panicked about sharing such an experience with them. Death will happen to us all and while no one wants to make children or adults cry for that matter, it is sometimes an uncomfortable topic that needs to be addressed. Rather than giving my total focus for my student needs, I split my concern with worrying about other adult perceptions, specifically administrators, other teachers, and parents. It was as if it was a shameful secret and no one would know. I believe that sort of mentality became engrained over the years; the type of mentality that leads to the hidden grief Doka, (2009) referred to in his work on grief.

While in the moment my grief was open and left me feeling vulnerable and exposed, my instinct was to stuff my feelings-to hide my grief. In that moment, I realized that my grief still had not been sufficiently dealt with. Perhaps it was such a difficult adjustment because I had hidden aspects of grief that were still below the surface. Lack of concentration, feeling tense and irritable, and not feeling as though my work output was good enough are all examples of hidden grief (Tehan & Thompson, 2013). Whenever I have experienced a personal life, it is almost as if time stands still. It is hard to explain, but it is almost as if I was trapped in some odd vortex or time warp. Things are surreal, and it is a challenge to accept life as is without that person.

While the literature lacked in focusing on educator’s grief and loss, there are other professions that have similarities to the demands of educators, including healthcare. While there are stark differences between the two professions, such as teachers having a primary duty of teaching students and nurses having a primary duty of caring for patients, both have a focus on
caring for others as the crux of their job. Cant et al., (2013) synthesized 22 years of quantitative data stemming from nurses and their attitudes concerning death. Their research found that nurses in certain sectors like general practice, oncology, and hospice had low levels of death anxiety and that younger nurses had greater anxiety. The study found that there is a need for greater death education and staff support. Varga (2015) conducted a quantitative study on grief and found 25% of those who completed surveys had experienced the loss of a loved one which included a pet. While most participants did not experience prolonged periods of grief, all students did experience some type of emotional, behavioral, or cognitive change. O’Beirne and Jonasen (2015) surveyed hospice workers and found that hospice nurses have a high level of death anxiety than hospice doctors. The reasoning is that nurses have much more hands-on time with patients and therefore react to mortality differently. Nurses are also better prepared to deal with death than non-nurses due to the education and training they receive.

Tehan and Thompson (2013) noted that whether loss occurs inside or outside of the workplace, it will have serious impacts for the person and others. The authors note that not acknowledging employee grief is a large and unnecessary risk. Thompson (2009) found that no place is exempt from death and categorized businesses into four categories depending on the interaction workers have with death. Businesses with a primary focus would be businesses like hospices and funeral homes. Organizations likes emergency services have a central focus where death is not always occurring but can be imminent at any time. Health setting like hospitals have a continuous focus because death could be a part of their work. Last, all other places of employment fall into a periodic focus. Wherever a person may work, there is no place exempt from being affected by death with schools being no exception, especially considering the uptick in school violence like school shootings, violent student deaths due to gun crimes, and student
suicides. When considering these factors and the personal grief and loss of educators, it is evident how grief has long lasting impacts and can impact educators at work.

**Review of Methodological Issues**

For the purpose of my study, a qualitative research method was most appropriate. There was a mix of qualitative and quantitative methods used for the reviewed research (Armstrong et al., 2013; Blake et al., 2018; Bodman, 2015; Chen, Tseng, & Wang, 2014; Duan et al., 2011; Gesser, Reker, & Wong, 1997–1998; Kotoučová, Pfoh, & Rosner, 2014; Lax & Sell-Smith, 2013; Lechner & Leopold, 2015; Newsom, 2011; Worden, 2018). Interviews and focus groups were among the most frequently used research methods. Weaknesses with qualitative methods is that while the researcher is observing and documenting behavior, it may not be evident why that data is meaningful. Also, rather than using quantified numerical data for analysis, qualitative researchers must look for trends. There is a lack of statistics to validate data unless a mixed methods approach is used. Strengths of qualitative data are flexibility and the ability to respond to participants and data in a real time manner (i.e. interviews and focus groups). Underlying issues may also be emergent through qualitative data due to this flexibility.

Some researchers (Bowen & Cheng, 2016; Duan, et al., 2011; Holt et al., 2015) have utilized quantitative data collection methods. Surveys using multilevel modeling, bivariate descriptive statistics, regression analysis, and correlational and cross-sectional questionnaires were the most common quantitative research methods. There was not set a set range for the sampling among these quantitative studies. Random, purposive, and inclusive sampling were among the most frequent with some containing small data samplings and some using samples which had thousands of participants. The weakness with using quantitative methods are underlying issues may be masked, information from self-reported forms may be inaccurate, and
certain information may be difficult to obtain. Strengths of quantitative data are that information can be generalized and there is easier replication for approaches.

An autoethnography lends itself to allowing the researcher to reflect and draw on their own experiences to understand a certain phenomenon. Many times, in an autobiography, an author will write about epiphanies and how these remembered moments are perceived to have significant impact on the course of a person’s life path (Bochner & Ellis, 2010; Denzin & Plummer; 1990). These epiphanies alter life in such a profound way that life never seems to be the same. Denzin (2011) noted that an author does not live through experiences to create a published document, but the experiences eventually become hindsight for works such as creating an autobiography or autoethnography. Ellis (1999) noted that the vulnerability experienced by an autoethnographer’s revelation of themselves is prevalent and real. I will not be able to take back what I said. I will not be able to interpret how my audience will receive my story. Autoethnographies are raw processes, which blend reality and research in a hope to bridge a communication gap and produce deeper understanding around a phenomenon.

One of the criticisms of authoethnography is that it is not seen as a valid form of research. Of all the methods, it is perceived as self-serving. Walford (2004) noted that people are allowed to write fiction but should not try to pass it off as research. Writing about self also can be seen as problematic (Ellis, 2004). There must be a willingness to self-disclose, have personal thoughts and feelings exposed, and be vulnerable to the world of critiques. Ellis (1999) postulates that an autoethnography require one to live consciously, emotionally, and reflexively. If executed correctly, this method affords the opportunity to be highly transformative in nature. Transformative learning seeks to determine and explain the way the processes that frame of reference through which we view and interpret our experience and perspectives (Mezirow,
An authentic transformation occurs when a creation begins as one entity and morphs into another. Changing one’s way of thinking has to first begin with an examination of self and having deep reflection. Reflection allows one to be aware of themselves and examine their process. In order to receive the lesson reflection teaches, the person has to be true to themselves and honest about whatever they are facing. A learner must be assisted to understand the psychodynamics of his or her action into critical reflection (Mezirow, 1991). The transformative learning process involves opening up and revealing personal perspectives and beliefs to other people. It is a process that includes becoming transparent in those moments and allowing someone else to share their perspective with others. It is truly possible for all parties involved in a situation to change and grow from their experiences. Allowing oneself to be transparent and honest will become a part of a successful transformative journey that can yield great success. My experiences that are the base of my study are experiences that have contributed to my Weltanschauung, or worldview.

Mezirow (1991) suggested that learning may be understood as the process of using a prior interpretation to construe a new or a revised interpretation of the meaning of one’s experience in order to guide future action. As I continue through this journey of life, I suspect I will uncover many more new perspectives and discoveries. The opportunities for growth will continue to present themselves if I remain open to new experiences and perspectives. True transformation occurs when one can become renewed in their thinking and ways of it translates into new action.

**Synthesis of Research Findings**

When grieving the loss of a child, the grief process rarely follows a prescribed pattern. Parents often search for ways to make meaning out of the loss through rationalization. Parents
most often turn to medical and religious explanations to make sense of their loss due to feeling helpless (Cacciator et al., 2013; Kübler-Ross, 2005; Lax & Sell-Smith, 2013; Worden, 2018). The loss of a child can disable a parent from continuing to live in a normal manner and cause deep states of depression, anxiety, prolonged grief, and impaired physical and cognitive issues (Klass, 2014; Kübler-Ross, 2005; Worden, 2018). Off-time deaths are deaths that occur in younger years (Lechner & Leopold, 2015). Parents feel immense guilt and hopelessness because their child will never have the opportunity to live out their dreams and reach their fullest potential due to a premature death. Researchers agree that the death of a child usually causes grief that lasts for at least five years but can turn into complicated grief and span eight to ten years (Head, Lawson, and Zheng, 2015; Kübler-Ross, 2005; Worden, 2018). In order for parents to feel supported, systems such as support groups, assistance from hospitals, family members, therapists and counselors are asked to assess the situation, specifically, which Tasks of Mourning have not been addressed and tailor interventions to address those issues.

The relationships with our parents shape and form who we are as people. Our parents shape our identities in many ways from life beliefs, morals, how we interact with others as our first teachers. Lechner and Leopold (2015) found that most individuals have their parents over the course of 40–60 years, so the impact of loss may affect on mental and emotional stability, financial assistance, and may bring about a realignment of family hierarchy (Bodman, 2015). The death of a parent is a problematic transition for adults with women having greater effects than men, but men being more affected by the loss of their fathers (Caballerro, Hayslip, & Pruett, 2015). Adulthood brings about many challenges which include caring for their own children and the demands of work, so grieving can be difficult (Kübler-Ross, 2005; Worden, 2018).
Coping with grief and loss can be difficult to navigate through. Most researcher agree that in order to analyze and understand grief, a professional counselor may be needed in order to identify unfinished business in order to resolve conflict and move process grief in a healthy manner (Bodman, 2015; Caballero et al., 2015; Head, Lawson, and Zheng, 2015; Klass, 2014; Kübler-Ross, 2005; Worden, 2018). Not coping with issues surrounding death can lead to further and longer lasting issues like prolonged and complicated grief (Worden, 2018). Coping with grief and loss remains an area that needs to be actively explored by research. Bereavement can have long lasting effects and cause negative life events if left unresolved. The pain with the grief and loss that I have experienced, has never gone away. Lichtenberg (2016) noted that grief is never fully closed, and individuals should be aware and more understanding of this. The loss of a child, a parent, or a spouse has long lasting effects, and while time may pass, the thoughts and feelings of what may have been and could have been can linger for years to come.

**Critique of Previous Research**

Researchers agree that death is a phenomenon that greatly affects us all. There are multitudinous studies that focus on grief, loss, death, and bereavement. Qualitative studies to allow the story behind the numbers to be presented. The studies that have been conducted have explored how survivors handle grief and loss on cognitive and behavioral levels. Survivors that had a close relationship with the deceased may experience identify crisis and prolonged periods of grief. Each researcher provided a plethora of information detailing how death can affect personal relationships and one’s psychological and physical health, but no further details were provided for how survivors handled workplace demands and balancing the process of grief and loss. Most of the studies were qualitative in nature, meaning interviews were conducted which provided researchers with the opportunity to ask questions to cover all aspects of moving through
grief and loss. Research needs to evaluate this aspect of life after death among survivors. Data was plentiful on perinatal, childhood, and adolescent bereavement when those populations lost a parent, but scant on adulthood parental loss. Analyzing adulthood parental loss would be useful; in 1st world countries, most individuals lose their parents as adults, so research would be instrumental in exploring grief and loss in adulthood.

Another critique of the literature that currently exists is that there was no sampling that included educators and educational staff. As an educator, we spend our entire days in front of a younger audience. A 30-minute lunch break spent in a classroom or in the car is the most privacy that educators have during the day as the breakroom is often filled with other educational staff. While teachers can show some emotions, showing too much could lead to phone calls from parents and administration questioning our capabilities to perform our duties. Research would have been helpful to include the narratives of educators.

There are many studies that have been conducted concerning how teachers can assist students through their loss, but no studies which detail how educators handle personal grief and loss. In any workplace setting certain emotions are thought to inhibit and cloud judgement and cause an unbalance to the work environment and while most companies may have an Employee Assistance Program, individuals are often not equipped to handle the deeply rooted trauma that occurs with the death of a loved one. Showing signs of depression at work is a clear indicator to employers that one may not be stable or fit to perform their duties in a professional capacity, even more so if there is an impending promotion.

Suffering at work has consequences such as decreased productivity, higher rates of employer turnover, and increased levels of mistrust among coworkers and supervisors (Dutton, Hardin, & Workman, 2015). Further research would be beneficial to include a component of
questions which delve deeper into workplace demands and which type of support would be beneficial to survivors. Being knowledgeable about the signs of grief, which include complicated and disenfranchised grief, would prove to be valuable at work especially after episodes of grief and loss. The findings would be impactful and fill a gap that is now presently absent in existing literature in regard to educators.

**Chapter 2 Summary**

Chapter 2 included discussions on qualitative research concerning death, grief, and loss. Autoethnographies were also discussed. The literature review examined the challenges and detriments that grief and loss can cause to an individual and how one can move through the process of grieving a loved one. Research is firm on the issues and challenges that surround grief and loss, but very little information expounds on how grief and loss effect survivors mentally, emotionally, and physically as it pertains to workplace duties and functions. A sound course of action would include counseling components at places of employment to ease the transition of returning to work that is non-threatening and free of judgement. I presented literature in a manner that would explain the scientific processes of working through grief and loss and couple those findings with my personal experiences. My desire to share these thoughts stemmed from wanting to bring about more acceptance and understanding among survivors and increase awareness of the hidden and disenfranchised grief we all may experience with the loss of a loved one.
Chapter 3: Methodology

This chapter outlined the research design, data collection methods and analysis, instrumentation, and expected findings. The intent of this autoethnography was to allow myself the opportunity to have an outlet to examine the factors that were essential to my self-evolution as an educator using the lens of grief and loss. In order to share my experience of death and loss with others, I collected narratives from participants who have shared a similar experience. I used reflective practice concerning how my personal narrative changed over the years using autoethnography as my method. Autoethnography as a method is cathartic and allowed to gain a deeper understanding of the effects of grief and loss. The research design of this autoethnography paved the way to explore how death and loss have affected me personally and as an educator.

Research Questions

RQ1. How has mourning and grief through the experience of death and loss affected me?

RQ2. How do educators perceive the process of grief and loss and the impact on their experiences while performing their duties?

The research questions provide focus to the study, lay a foundation for the purpose and design, and welcomes the opportunity for discovery.

Purpose and Design of Study

The purpose of this study was to understand the processes of grief and loss through the lens of an educator. The chosen design for this study was qualitative in nature in the form of an autoethnographic study. In autoethnographies, the researcher-participant is on a quest to discover the what, why, and how of a certain phenomenon. I am wanting to know how the personal grief and loss of educators impacts their work. Research seeks to add a deeper
understanding to the existing current body of knowledge that exists. Self-study provides an opportunity to become engaged in the process of questioning, reflecting, and writing (Roger et al., 2018). Autoethnography studies are similar to a research tell-all where the researcher explores exposing truths, lies, and vulnerabilities in order for the research participant to gain revelation about themselves. From a practical and social perspective, my research is to let others to know educators and educational staff are affected by grief and loss in hopes to provide deeper insight and offer suggestions to those in the school community. To do this, I interviewed educators in order to gain thick and rich descriptions (Lincoln & Guba, 1985). Personal accounts from educators allowed me to have data that was chockfull of emotional and intellectual insights. The stories and experiences gathered within autoethnography studies are powerful tools for the researcher and practitioner who works in multifaceted environments (Chang, 2008). There are many professionals who might benefit from the research conducted and discovered through a narrative study. Raab (2013) noted that personal journeys and narratives can serve dual purposes: assisting in gaining deeper knowledge about one’s own identity within their community and revealing truths that can assist colleagues in understanding more about themselves.

Autoethnographies provide the opportunity to self-reflect on life’s experiences and how those experiences connect to society (Ellis, Adams, & Bochner, 2011). Autoethnographies are a form of writing that describes personal experiences and relate those experiences to a larger phenomenon. At the crux of any autoethnography is the epiphany or epiphanies which brought about a transformative moment in the researcher’s life. Autoethnographies seemed like somewhat of a dying breed. Current research tends to fall under the umbrella of traditional research and less on storytelling. Ellis (2004) asserted that stories should be a subject and a method of scientific research. Autoethnography occupies the middle ground on the continuum
between social science and language arts the author incorporates “I” into the research and writing but analyzes themselves as if they were studying someone else (Ellis, 2004). It is a deep process as I, the author, recall all the memories from my past and defined the one turning point where I felt that life changed for me. Even as I am drafted this dissertation, I have dealt with personal loss, but had to continue with this journey.

Ethnographers cannot stand above and outside what they study; we need to see what we do not so much as representation, but as communication (Bochner & Ellis, 1996). In autoethnography, the process is meant to construct some sort of meaning and relevance between the researcher and the reader. There is a partnership in the sense that the researcher and their lives (their research) share a relationship. The same can be said for the audience and the reader. Autoethnographies partner all parties together in a shared experience. The concept of death and loss is one that can best be viewed through a personal lens regardless of who is involved, but it allows all to discover themselves first, and then see experiences through the eyes of another. Beeton (2016) noted that participant-observation is a powerful research method, but many times the researcher writes about what they observed and not personally experienced (para 2). A researcher becomes focused on the watching and not the experiencing and feeling. Beeton (2016) suggested that when a study is written from a deep level of immersion where the researcher is part of the study, the results can be powerful, which is why autoethnography approaches are pertinent and a valued method of inquiry (para 2).

Autoethnography is a process where researchers use personal experience (auto) through culture (ethno) and analysis (graphy) and narrative storytelling (Ellis et al., 2010). The culture that I was to be represented of those educators who have experienced grief and loss. I have a desire to know how the personal loss has affected them personally but also as a professional
person. I was interested in knowing what similarities and differences we may share as we collectively share our experiences of navigating through difficult times.

My interest in conducting an autoethnography study had been unknowingly developing over the course of several years. I have always been told that I was a storyteller. My stories are usually long and full of details. The point of the story is important, but the path to the point has great significance as well. As I reflected on the direction of my study, I thought about my own personal story as a working professional over the years. When my grandmother passed away, I was working at an institution of higher education. I was afforded my own semi-private office and the opportunity to take breaks whenever I wanted to. I broke down many times and usually positioned myself away from my large window to cry in private, or I could find an unused classroom and take the necessary time to gather my thoughts. I was constantly busy with students and appointments, and while I never knew when I would have a moment of weakness, I knew that I had time to grieve; grief fit in with my schedule. It was a luxury that I never considered a luxury, until I became a classroom teacher and was met with how inappropriate it was to grieve within my schedule; there simply was no time or place for it.

My process of moving through grief and loss are uniquely mine and mine alone, but while sharing my research, my story, with others, all involved had the opportunity to grow and transform. The stories in the literature review resonated with me and in that moment of resonance, their research fulfilled its calling and its purpose. Raab (2013) noted that there are many reasons why researchers choose autoethnographies as their research method with one being a deeper knowing and understanding of those in a given culture of group. Providing the details of lived experiences helps the reader to easily relate to a study, which results in self-analysis and transformation. (Chang, 2008).
G bergen and G 1eg 1gen (2002) noted that autoethnographies allow one to move beyond the traditional methods of writing. Autoethnographies reveal a person’s vulnerabilities. Autoethnographies are cultural practices where readers are invited into our past, our present, our thoughts and our feelings (Bochner, 2012). Autoethnographies are deeply rooted in empathy. By an author exposing their lives and becoming so vulnerable, it is similar to seeking affirmations that someone else out there in the universe can relate to what you have experienced, just as Mezirow (1991) stated. As I previously stated in Chapter 2, autoethnographies are raw processes, which blend reality and research in a hope to bridge a communication gap and produce deeper understanding around a phenomenon. There is immense value and growth that comes from knowing about yourself and how to move forward and engage the world we live in. As a researcher, my autoethnography will not be mere accounts of being a part of an experience but how I, the researcher, made sense of the world (Duncan, 2004). Thus far, I have had the opportunity to explore grief and loss and it has been an eye-opening experience. I believe that death affects us all, but as an educational society, we do not give adequate time and resources for grieving staff. I have discovered people to be sympathetic and empathetic, but grief still does not have a place at work. We are often taught to model for students how civilized individuals behave. We model conflict resolution, show how to have empathy for others, help students to problem solve. We can certainly help students with their difficulties and hardships, but in my experiences, there was no place to grieve and it was not acceptable to grieve in front of students. Processing grief and loss as an educator has given me a perspective that I lacked previously. I am looking at my life and how these personal effects have impacted my life as a teacher. Autoethnography provides instruments that help me to analyze and examine my life’s events
(Eisner, 1991). In my quest for truth, I hope to expound on my experience and the experience of others.

Bochner and Ellis (2000) defined autoethnographies and autobiographies as writing and research that contain multiple layers and connect personal and cultural. These genres, Ellis and Bochner contend, focus on larger social issues and then focus back inward which is where the vulnerability lies. Other forms of research have the researcher far removed from the writing itself due to limiting personal biases. While an autoethnography is written in the first-person voice, it is a partnership between the researcher and the audience. In autoethnography, the researcher is the subject, and the researcher’s interpretation of the experience is the data (Ellis & Bochner, 2000). This design allows the researcher easy access to the primary data source which is the researcher.

Thick, rich, descriptive insights are part of the foundation of autoethnography research. The thick and rich descriptors allow a deeper connection between author and audience and display issues in a complex manner (Geertz 2000; McMillan, 2012, Saldaña, 2009). Autoethnographies delve deep into the conscious and subconscious of participants to create a sensation that the audience was there in that moment in time and can truly envision themselves in the room. Qualitative research is unique in nature as it is situational and oriented to objects and activities (Stake, 2010). The research in qualitative research is individualized because each participant has a different point of view that is to be observed and realized by the researcher. Some may have had hidden or disenfranchised grief, others may have endured long periods of mourning, other participants may have become more secluded or more outgoing to mask their feelings. During the interview process, each participant experience has a distinct perspective. It is a craft of the researcher to tell each story with the same level of importance. Stake (2010) stated
that the emphasis is on personal experience. Understanding the case requires the understanding of other things that are taking place at the same time. The charge is to reconstruct reality as the participants they are studying see it (McMillan, 2012). The audience should be able to feel as though they were engaged in the research as well due to death affecting everyone in some manner or another. The readers should be able to connect to the feelings of myself and the other participant stories within the study.

The researcher will allow the body of work to act as the senses for their audience. The audience will be able to detect tone in dialogues and conversation, see the obvious and subliminal happenings of the room, and feel the sensation of the relationships.

According to Ricci (2003):

autoethnography allows the reader (and the writer) to experience something new - to feel, to learn, to discover, to co-create. It is a revealing narrative from the self-of-the-writer, from a lived experience. It is an attempt to relive the experience with the reader as each provides his or her own interpretation, understanding, and lens. (p. 594)

One reason why qualitative research is unique is due to the holistic approach. Stake (2010) and McMillan (2012) discussed that qualitative research is more focused on personal interpretation and less on cause-and-effect; There is far more emphasis that is placed on the holistic treatment of phenomena (Stake). On my journey as an educator, it has been a work in progress to construct my identity and necessary to consider my social interactions with students, parents, peer, administrators, and the community. Denzin and Lincoln (2011) describe autoethnography as a genre of writing that connects the audience in a personal way through being conscious. Autoethnography blends three types of writing-native, ethnic, and autobiographical (Reed-Danahay, 1997). My development as an educator is created using a personal learning philosophy...
and the social interactions that I have with students. Those interactions are personal and set the stage for deep reflection. I am immersed in my own story and studies and the reader will become invested and immersed as well. If done correctly, it is very much a partnership. Reflection and honest analysis are also critical in qualitative research. McMillan (2012) purports that data is gathered first and synthesized to form generalization, models, and framework. There is no hypothesis that occurs first. Stake argued (2010) qualitative research prefers natural language, disdaining grand constructs because the researchers are methodologically competent and versed in relevant substantive disciplines.

Chang (2008) asserted that autoethnographies provide direct access to data and affords the possibility of reaching holistic and in-depth cultural self-analysis quickly and the process makes the researchers perspective privilege over other researchers. The lack of research surrounding educators and personal grief has left a gap in how to develop necessary tiers of support and my study seeks to add to the literature that is currently available.

In addition to using methodological tools and literature to analyze experiences, an autoethnographer must consider ways that others experience similar epiphanies (Ellis, 2010). An autoethnographer is not a stand-alone account of experiences because no one person can contribute all their success and failures to themselves alone. While the epicenter of this dissertation is focused on myself, there are other professionals who can add to this body of knowledge and substantiate my findings. Campbell (2015) noted that we need stories to “amass multilayered knowledge of a phenomenon, understand its truths, meanings, and its place in the culture” (para, 15). There may be a multitude of people who have a shared experience, but no one has had an experience exactly like mine due to the unique thoughts and feelings I had during the process.
This particular autoethnography complemented existing research concerning grief and its effects on educators. My perspective and views allowed the reader deeper insights, especially for those who have limited experiences. As an autoethnographer, there are experiences that traditional research would not be able to capture. As a participant and a researcher, I had the opportunity to have my thoughts become part of the field. As a researcher, I was able to bring the field along with me. In traditional studies, the researcher goes to the participants and subjects themselves into the field. Part of my field experience included returning to my grandparent’s home which is now occupied by my uncle. It had been a long time since I entered the house and revisiting where most of my experiences took place brought about many feelings and emotions that I had suppressed. In autoethnography work, the researcher has freedom to write about any and all experiences. I was able to record my daily experiences that deal with death, depression, and pregnancy loss to provide the reader with a first-person point of view as to how the grief and losses I endured affected me as an educator. In addition to my own experiences, I interviewed other educators and discovered how personal grief and loss influenced them.

Adams, Ellis, and Jones (2015) unified the roles of researcher and friend in their studies. The authors become more than just a bystander and discusses at length of how when a participant suffered a familial loss, the loss became part of the story. Ellis discusses how learning takes place through dialogic exchanges and a compassionate research process. Adams, Ellis, and Jones, (2015) enlightened readers regarding personal interactions and experienced challenges. There are over 100 different types of human emotions (Buckley, 2015) and in analytical autoethnography, the researcher is tasked with blending their emotions with experiences and communicating those feelings and experiences using very precise language.
Adams, Ellis, and Jones (2015) noted that to focus on the auto portion would just mean to write about those experiences but the ethnography part requires a blending and merging of personal and cultural experiences which offer insights on everyday interactions. Jones examined her role as an adoptive parent and discovered that her grandmother was also adopted. The need for her study was driven from a personal experience that she wanted to understand on a deeper level. Her grandmother’s death was an epiphanic moment in her life. Epiphanies cause us to pause and reflect; encourage us to explore aspect of our identities, relationships, and communities, that before the incident, we might not have had the occasion or courage to explore (Adams, Ellis, & Jones, 2015). As with my grandmother’s death, this researcher felt compelled to explore other losses in her life.

**Research Population and Sampling Method**

In order to have a successful study, a target population must be present. A population is a group of individuals who have similar characteristics which set them apart from other groups (Creswell, 2013). Due to this study being autobiographical in nature, the researcher was the primary participant. Autoethnography explores a cultural phenomenon through self-analysis and brings forth new knowledge and understanding that relates to society (Chang, 2008). The other participants in the study were educational staff that shed insight into the process of grief and loss in the context of working within a school community. The target population for my study was a group of educators located in the Midwest in a single metropolitan area.

This study focused on the experiences of educational staff’s grief and loss while performing tasks associated with their roles. Therefore, purposive sampling using a homogenous sampling of educational staff members, provided thick and rich data. Patton (2002) described purposive sampling as a technique used in qualitative research which provides rich information...
and is useful in cases when limited resources are available. The process involves intentional selecting the individuals who are most knowledgeable regarding the phenomenon being studied. In an autoethnography, the researcher is the primary participant and must express their experiences in a manner which is reflexive.

Participants in my study had to fit certain criteria which included being active or retired educational staff members, who experienced the loss of a loved one and went through a process of grieving. These losses included pregnancy loss, and the loss of a child, parent, sibling, grandparents, or another relative. No time constraints were placed on when the loss occurred because the process of grief and loss have no set limitations. The duration of grieving after the loss of a loved could span months, years, decades, or a lifetime. Educational staff members included classroom teachers, a counselor, and building administrators. Participants were recruited to join the study using a letter of invitation (see Appendix B).

One of the goals of qualitative research is to understand a particular phenomenon or event. In the case of this study, the phenomenon was personal grief and loss from a death. Participants were interviewed using a series of questions and given a grief bereavement assessment inventory (see Appendixes C and D). The purpose of the assessment inventory was to recognize if there is any current grief among participants and to distinguish the difference between grief and depression. The assessment instrument was created by John M. Schneider. The assessment also provided an outlook on grief that proved to be beneficial to the educators in the study.

In order to strengthen personal revelations, it is necessary to identify others with similar characteristics. While autoethnography does focus on self, it is not a study performed in isolation. There are many others that contributed to the complexity of a study of this nature. The
others have a range of similarities and differences (Chang, 2008). Albeit an autoethnography, the experiences of others are needed in order to provide validation and trustworthiness to my study. Patton (2002) noted that the researcher would ask well situated people who know a lot about the subject and in turn, they can bring others into the study. The rationale for choosing purposive sampling was to have participants who are educators who have experienced grief and loss while performing at schools and interacting with students.

In order to have enough meaningful data, eight participants were interviewed about their experiences with grief and loss and how they have been affected. The importance of participant size in a study is to arrive at a point where data saturation is achieved. Bunce, Guest, and Johnson (2006) asserted that saturation can be achieved in six interviews. Fusch and Ness (2015) posited that data saturation is attained when there is enough data to replicate the study, new information has been learned, and no new coding or themes emerge. Bernard (2012) as well as Aitken and Burmeister (2012) noted that the sample size itself is not that important. Further, Bernard (2012) found that he could not provide an exact number for how many interviews should be conducted. The focus should be on rich and thick and rich data. Rich data is quality while thick is quantity, so the key is to have both (Fusch & Ness, 2015). I asked the same interview questions to each participant so saturation could be achieved (see Appendix C).

The goal for me was to describe a story in a way that not only evokes feeling, but also a deeper understanding. This process includes a great deal of self-closure and a great deal of reflexivity. Ellis, Adams, and Bochner (2011) claimed the best way to understand data is to view it through other people. Viewing the data of others also guarantees rigor and validity. Rubin and Rubin (2012) noted that natural, quality research is fresh and real, and offers the audience a real experience. By recruiting and interviewing educational staff members, I had access to
knowledgeable participants, who did provide thick, rich, and consistent data which will was purposeful in examining the process of grief and loss and provided valuable information.

**Instrumentation**

Ellis and Bochner (2000) asserted that autoethnography places emphasis on the personal experiences of the researcher-participant to understand social and cultural aspects in the world where they live. The researcher-participant gathers the information which is collected through accounts of their experiences in relation to the subject. In autoethnography, the interaction between the researchers’ multiple identities which include being a participant as well as a member of a global world, play a major part in the observations that are analyzed (Hokkaken, 2017). The life of an ethnographer is on display. An advantage of autoethnography is the ease of access to data since the researcher calls on their own experience as the source from which to investigate a particular phenomenon (Mendez, 2013).

A semistructured interview process was used to examine participant experiences. The interview process had open-ended questions which allowed a greater understanding of the experiences through details. Rubin and Rubin (2016) asserted that the researcher must have a specific topic to learn about, prepare a limited number of questions in advance, and be ready to ask follow-up questions to provide data that is rich in detail. Due to the structure of these interviews, participants had the freedom to express themselves as openly as they chose.

The interview instrument was created by the researcher (Appendix B) used open-ended questions. The questions were designed to give further insight into the experience that teachers have at work when a loved ones dies. I reflected on my own experiences and sought to develop questions that would allow for the examination of grief and loss in a manner which encompassed the difficulties, successful coping strategies, and opportunities for growth within the school.
community. The questions focused on how the loss affected their professional performances. The questions asked participants to describe their experiences with building level support among colleagues and administration. Discussion of death can evoke many emotions regardless of the time frame of the loss. In their study of interviewing surrogates and bereaved family members after death, Addington-Hall and McPherson (2001) found:

- Responding to a question about a past event of state of mind is a complex process. It consists of attending and perceiving an event, encoding the information, recalling the appropriate material and judging this according to a response criteria... As the death of a relative is an infrequent but important event, it is likely to be more easily recalled than more frequent or less salient events (pp. 784-788).

The questions were designed to uncover behaviors, feelings, thoughts, and values. I wanted the interviews to flow naturally given the nature of the conversation. I wanted to be sensitive to the feelings of my participants as well as myself. The interview process provided insight and ascertain how participants moved through the process of losing their loved ones and were able to continue working in a professional capacity.

In addition to the interview questions, participants were also asked to complete a grief and depression inventory assessment (see Appendix D). The purpose of the assessment was to examine participants current state of mind in reference to experiencing grief, depression, or both. The inventory assessment was given to participants prior to the interview. I wanted participants to be aware of their personal grief. Before beginning the inventory, I discussed that due to the nature of the topic, I had information available for therapists and support groups if needed. I knew the process could bring up some and even suppressed feelings, and I wanted to offer an
additional layer of support for the educators that were gracious enough to share their stories with me.

I found the assessment while searching for a pre-existing instrument that would provide participants with some additional knowledge regarding their feelings. The assessment inventory I used can be found on Integra.com, an organization committed to providing resources for those suffering with loss and grief. In my communication with the organization’s president, Susan Zimmerman, she informed me that the assessment had been created by Dr. John Schneider, who was also a co-founder. Dr. Schneider was a mental health professional who wanted to create an instrumentation tool that could be used to distinguish between grief and depression. In my communication with her, she gave me permission to use the inventory and publish it in my dissertation. The assessment inventory was sectioned into several categories: loss, behaving, thinking, feeling, physical, pain and pleasure, spiritual, dreams, self, support, and will-to-live. Within those categories, there are two statements. One which describes the feelings of a depressed person and the other of a person who is actively grieving. Once participants completed and scored their inventories, results were discussed with each participant.

Data Collection

Due to the nature of autoethnographies, the researcher is the primary source of data. Therefore, I am the primary data source. The discovery of self and others is a definite benefit of completing an autobiography (Chang, 2008). An autoethnography requires a lifetime of data and being able to finesse the data into a respected research document. There are several stories and memories that must be recalled and transcribed.

The possible amount of data was massive, so the process was tailored and streamlined. To prepare for data collection and analysis I found it necessary to focus on several data types:
personal memory, self-observational, self-reflective, and external (Chang, 2008). My experiences were recounted by memory, self-observational (video and audio tapes), self-reflective (journal writing), and external data (participant questionnaires). The culmination of these past and present experiences captured my lived perspectives. It is critical that my story consists of other stories as well, to give my research plausibility. Duncan (2004) signified that autoethnography reports do more than just tell stories; they provide scholarly and justifiable interpretations based on multiple sources of evidence.

The path for data collection has a wide array of offerings and choices. Delgado, Plakhotnik, and Seepersad (2015) utilized journals, interactive interviews among the researchers, and Google docs to collection data for their study. While journals and interviews are sound methods, correspondence, pictures, test results, and questionnaires are also important forms of data (Duncan, 2004; Wall, 2006). It has already been established that in an autoethnography, the researcher is the primary source of data. However, Duncan (2004) and Holt et al., (2015) remind us that it is still critical to have rigorous data collections methods and analysis. Chemello, Mendonca, O’Dougherty, Ramalho-de-Oliveira, and Silva (2017) conducted research using journals, reflections, field entry notes, semistructured interviews, and reflective meetings with co-authors to discuss perceptions, feelings, and learnings.

While autoethnographies are deeply rooted in a single story, a life is not lived in solitude. Therefore, other participants will be included in the study to add another element of validity. As the participant researcher, I am the direct participant; other participants are considered indirect. Pseudonyms will be utilized and assigned to each participant which helps protect their confidentiality (Yin, 2009). Interviews were conducted with each participant on an individual basis, face-to-face, and recorded using Temi.com, an audio recording and transcription website.
that was secure. I also used an audio recorder to record the interview sessions. The recordings and transcriptions are stored in a secured location in a locked security box. These additional measures added an extra layer of security. Participants will be allowed to exit the process at any time.

**Identification of Attributes**

Attributes of this study were holistic in nature and therefore not considered as quantifiable, but more effectively measured through qualitative means (Creswell, 2013). The primary attributes of the study were centered around grief and loss, but terms like bereavement and death will also be utilized interchangeably. Participants completed a grief assessment depression inventory (Appendix D) in order to determine their current level of grief and depression. The scale was developed by Schneider (2001). Worden (2018) posits that grief is the loss due to death and bereavement is the loss which a person is attempting to adapt to. Abi Hashem (2017) defines loss as the deprivation and painful separation from a loved one. While there are many theories which have studied death and the stages of grieving, most theories share similar processes of maneuvering through loss. There is a period of denial or shock, a period of emotional despair, and a period of acceptance. For some, grief may be prolonged and be complicated and require therapy (Worden, 2018). The questions asked to participants uncovered their feelings of grief and loss, their experiences during their period of mourning, and how grief has impacted their work.

**Data Analysis Procedures**

Once data were gathered, I immersed myself into the specific details and contents and analyze the data. The study included a deep analysis of how grief and loss can be a research tool. Throughout the process, I used the information to look for similarities and develop themes
through coding (Rubin and Rubin; 2012; Saldaña, 2013; Data analysis began with developing a process for coding. Wall (2016) offered that readers should not have to guess what the researcher means or figure out the message of the study on their own; the message should be clearly stated. “The researcher (or the research team) makes all the judgments about coding, categorizing, decontextualizing, and recontextualizing the data” (Starks & Trinidad, 2007, p. 1376). Nowell, Norris, White, and Moules (2017) used a six-step process to maximize their thematic analysis. The steps are familiarizing yourself with the data, generalizing the codes, searching for themes, reviewing themes, defining and naming themes, and producing the report. Rubin and Rubin (2012) noted that analysis of responsive interviews which include summarizing and transcribing information, coding relevant data, sorting and summarizing said data, integrating the data, and then combining concepts to develop a theory.

Due to the nature of autoethnography and being the primary researcher, I am familiar with my own data through reviewing recollections, diaries, photographs, and journals. I familiarized myself with participant data by reviewing notes and personal accounts. The interviews will be recorded which will allow me to review as needed and jot down thoughts as they come to me (Rubin & Rubin, 2012). While there may be thousands of codes, there will be reoccurring themes, but it takes time to find them. It may take several rounds of analysis to make meaning of findings. Saldaña (2013) described codifying as arrange data systematically which includes looking for patterns and then group findings into categories. After reviewing all participant data, I labeled experiences based on my evaluations.

In addition to discovering themes, reflexivity is also essential in qualitative research especially an autoethnography. Malterud (2001) attested that a researcher’s circumstances directly affect what we choose to study. In an autoethnography, the researcher’s life and lifestyle
have some bearing on their choice of study. Occupation, religious beliefs, family composition, and interests are revealed in research. A researcher who was adopted may choose to compose a study regarding adoption and its effects to provide deeper insights. A nurse or medical professional may conduct a study on how treatments effect patients to provide deeper revelation beyond the package inserts and generic warnings found on labels and commercials. In my case, I chose to conduct a study on death and loss. To provide rich data, the researcher needs to examine the phenomenon through multiple perspectives and lenses. Lincoln and Guba (1985) suggested utilizing a reflexive journal that contains method decisions and a reflection of occurrences. The journal thus far in my study has provided me an opportunity to release some of my most concealed thoughts which in turn revealed new understandings. Being reflexive allows for the researcher to examine what they know or understand and undergirds how they know it. The understanding that is attained goes beyond surface level examination and questioning but allows for the researcher to get at the cruxes of issues.

Validation

Validity in a study contains methods that gives the research credibility. There are several pathways to achieve a credible study which range from member checking, peer review, and thick and rich descriptions. External auditing is another method employed by researchers, and for this study, a dissertation committee fulfilled that role by ensuring my study was one of integrity through their concise and constructive feedback.

McIlveen (2008):

That a story produced by autoethnography should combine theory and autobiographical reporting of experiences to show three occurrences: It should be a faithful rendition of the authors experiences which would include fairness and ontological authenticity; be
transformative for the author through self-explication such as educative and catalytic authenticity; and inform the reader of an experience they have never endured or would not endured or have experienced or may experience but unable to share with other community scholars. (p. 4)

As previously stated, autoethnographies are rooted in empathy. The author tells the story and wants the reader to identity and relate to the experiences and from that comes a shared moment between the writer and the reader. Ellis (2000) expressed that empathy that resonates within the reader is a form of validation. Every individual will have some experience to share about death. For some they may not experience the loss of a loved one until they are older. For others, their first experience may occur when they are young. Other have had many instances of losing a loved one, while some may have only experienced a few losses. Some losses feel distant and may not have much effect, while others are very personal and have prolonged and damaging effects. In autoethnography, I linked my experiences with others. It was like two strangers meeting and exchanging pleasantries only to find out that they have a commonality and now have a bond. Through authentic dialogue which ranges from conversational banter to in depth knowledge sharing, people become conjoined. Sanders, Parsons, Mwavita, and Thomas (2015) specified that analysis processes are cooperative and critically dialogic and happens in conversations such as interviews and sharing stories. As I found greater understanding of how personal grief and loss impacts educators, the shared stories of others added to that validation.

Duncan (2004) addressed several key issues regarding the legitimacy and representation of her account. Of those issues, instrumental utility, construct validity, external validity, reliability, and scholarship were the main focuses. Eisner (1991) defined instrumental utility as usefulness of an autoethnography case study, but the same criteria can be applied to all methods.
There are three methods of usefulness that the author examined. A study is considered useful if it helps readers understand a situation, or phenomena that is otherwise confusing or enigmatic. Death certainly falls within the category of being mysterious because it signifies the end of a relationship and a person’s physical presence. Even though a person’s works may leave a legacy long after their passing, their physical being is forever separated from us. I hope that this study brings forth greater understanding and clarity for myself, participants, and my audience.

Ellis (2004) found that autoethnography are not meant to be generalizable, but there must be something that tugs at the reader and can help the person understand an unfamiliar notion. Eisner (1991) also claimed that usefulness comes from assisting the reader to anticipate future scenarios and possibilities. When I read this, I immediately thought of foreshadowing. As we learn to become sound learners, this is a skill that we are taught to strengthen our predicative thinking. Even when we are faced with issues we do not understand, we learn to trust in the process. Last, Eisner (1991) said that if a study highlights an aspect of a situation that might otherwise go unnoticed, it is useful. There are substantial amounts of data on grief, but limited information on personal teacher grief. It is a situation that has gone unnoticed.

There should be multiple sources of evidence which includes interviews, journals, and notebooks. Duncan (2004) also noted other sources of evidence from their study which included letters, memos, meetings from minutes, sketches, comments, emails, and other items. For my autoethnography study, items will include my drafts, notes, written memories, interview notes, and questionnaire results. In concerns to external validity, the findings from the study and the themes that arise are made strong when applied to other situations.

Unlike other approaches to research, autoethnographers achieve validity and reliability by establishing a connection with the reader (Kelley, 2014). The validity and truth come from the
authenticity of the work that is produced. Again, empathy is a major factor. Ellis et al., (2008) found that validity is achieved when readers feel empathy. Producing an authentic work is essential to the success of the product. If the reader does not believe in what is being written, they will disengage and never make the connection that is necessary, hence the reason why it is so important for the researcher to be vulnerable and expose their entire truths. Kelley (2014) stated that reliability is related to validity but seeks to establish the credibility of the writer. By giving my personal accounts through memories and reflections, the data becomes reliable.

Member checking is another way to verify interview data. It is akin to having a conversation with someone and asking if you understood the person correctly, usually by asking following up questions or checking for understanding. In an autoethnography, member checking allows for participants to verify the experiences they shared in the interviewing process. Member checking allows that the participants view’s and perspectives are being considered and respected (Creswell, 2010; Lincoln & Guba, 1985). There are often other findings discovered after reviewing the original transcripts. Rereading and data immersion allowed me to discover new revelations and find other meanings that were overlooked. In addition, allowing participants to revise and edit their results is empowering (Lincoln & Guba, 1985). However, the reasoning for allowing revisions to data is not entirely understood. It is flawed to allow a participant to change their mind and provide the individual with an opportunity to change their mind; to allow data to be extracted and changed seems to go against what the data originally discovered (Birt, Campbell, Cavers, Scott, & Walter, 2016; Morse 2015). For the purpose of my study, member checking was utilized. Creswell (2005) and Yin (2014) each noted that member checking opens the lines of communication to discuss the findings and use the member checking process as an opportunity to expound on the interview. After listening to each audio file, I used Temi to
transcribe the audio files into text. Once the text was analyzed, I sent the transcripts to each of the participants via email and asked each person to review the report for accuracy and to reply with any changes they felt were needed to ensure their words and accounts were represented in correctly. No participant changed their stories which confirmed my analysis was accurate and trustworthy.

**Credibility.** One method to ensure that data is credible is through the interviewee selection process. Credible research is trustworthy and reliable. As a researcher, it was my responsibility to find participants with the experiences that will persuade my audience with their accurate accounts (Rubin & Rubin, 2012). My study was centered around grief and loss through the lens of an educator, so my participants had to be educators and educational staff members who were knowledgeable about grief and loss and willing to be intimately honest about their experiences. It was important to formulate questions in a manner that allowed them to be comfortable, willing to share, and respectful of what they have gone through while still being insightful enough to illicit responses that answered the research questions and added to the purpose of the study. Factual and truthful data is essential, so it is important check what details and facts come out during the interview session. Rubin and Rubin (2012) insisted that transparency is critical in credible research. Additionally, my notes will also include my thoughts and feelings as participants are sharing their stories. Saldaña (2013) shared that one way to add to credibility is to have large amounts of data, interviews that are in-depth, and being open to asking participants “why” questions in order to gain more insight. I chose to ask a lot of “how” questions. My instrumentation will allow the chance to ask questions that go beyond surface level response and provide data that is sound and trustworthy.
**Dependability.** Dependability is based on consistency of the data and findings and if results are time tested and able to be replicated in a comparable study (Bitsch, 2005). Due to the fluidity of studies, the process needs to thoroughly document in the event other researchers may choose to reproduce the work. This process of documentation permits future researchers to have the necessary framework to repeat the study which adds to the dependability of being able to stay the same over time (Anney, 2014). One of the practices to establish dependability that I will be using is using my chair and committee members as external auditors. One of their roles will serve as reviews and examiners of my data collection methods, the analysis process, and the results of the study. Another method that will be utilized in this study will be recoding data. Recoding, known as coding agreement, is a process that involves reviewing the data a second time, or however many times is necessary, that will allow me to gain more revelations in my themes and patterns (Anney, 2014; Saldaña, 2013). This process will provide a clearer version of my participant stories to emerge.

**Expected Findings**

I expected to confirm that grief and loss affect job functions of educators and that a lack of resources and appropriate support systems are in place to assist educational staff members. As a researcher, I am expecting that the work conducted in this study will add to the body of knowledge in existing literature presently found in autoethnographies. Another expected finding is that all participants were willing to share their stories concerning death and loss, and how their school community could improve in providing proper support to help alleviate stress and make tasks easier during time of bereavement. In the following chapters, I will describe and discuss participant findings and common themes.
Ethical Issues in the Study

Any time there are human subjects involved, there is a risk of ethics being compromised. Therefore, it is of the utmost importance to remain professional and honest in your interactions with participants. Saldaña (2013) coined the term rigorously ethical to denote that a researcher must be rigorously ethical and treat participants with respect, rigorously ethical with data by protecting it and not discarding texts that does not align with the study, and rigorously ethical with the analysis by maintaining integrity. It is imperative that questions are worded in a manner that do not cause undue stress or pressure on participants and while questions will be carefully crafted to allow for dignity and respect, especially considering the delicate nature of the research. A researcher should never be so preoccupied with obtaining information that the discomfort and pain of an interviewee is ignored (Rubin & Rubin, 2012). Due to the sensitive information that may be revealed and the emotions that may displayed, I provided participants with local bereavement area support group information. The support groups range for those who have experienced perinatal and infant loss, spousal loss, any all other types of bereavement.

To ensure that my study met ethical standards and consideration was given for the well being of the human participants in the study, my study had to receive approval from the Institutional Review Board (IRB). The IRB’s focus is to ensure that the research is conducted in a manner which is safe for the human participants in the study. The process involved the submission of my proposal to the IRB and answering questions regarding my study, paying careful attention to subject matter which may have been harmful or caused distress to my participants. Once IRB approval was achieved, I was then able to start the data collection process and begin recruiting participants for the study. All participants in the study signed the IRB consent form prior to being interviewed (see Appendix A).
The very nature of autoethnography guarantees those associated with me may be recognized in the study due to my personal revelations. Penning an autoethnographic study invites the public to be critical of the story they are reading. The researcher is naked in a sense and open to criticism, attacks, and disapproval (Ellis & Bochner, 1997). As the researcher-participant, I will be expected to fully disclose details concerning my life, even those details that are deemed uncomfortable to share. However, participants will be given extensive liberty to share their stories as they choose. At all times, the researcher reserves the right to omit text that may cause unnecessary harm to myself or my participants.

Due to my purposive sampling methods, I wanted to make sure my participants’ identities were kept confidential, so each educator was assigned a pseudonym, or a fictitious last name. Participants in the study will receive a consent form prior to the interview, which will continue pertinent information regarding the study. Participants were allowed to ask questions prior to the interview and could have opted out at any time. As the researcher, I avoided collecting any information was not pertinent or held any bearing on the outcomes of the study. The recording devices used in the study will be kept in a locked security box only accessible to the researcher. The transcriptions from the study will also be securely stored on an online database and on my password protected laptop. Data collected from this study will be deleted within three years according to Concordia University guidelines.

Due to the researcher being an educator, there are certain biases that exist. Yin (2009) noted it is the obligation of the researcher to be aware of biases and act accordingly. Due to my sampling and this study being autoethnographical in nature, I am aware of my personal biases. Due to my position as both researcher and participant and my purposive and snowball sampling method, it would be almost impossible to distance myself from the research I will conduct.
Those carrying out qualitative research are an integral part of the process and final product, and separation from this is neither possible nor desirable (Galdas, 2017). It is imperative that my personal thoughts remain at the forefront of my study. During one of her TEDx talks in Houston, Brené Brown, a qualitative researcher made a remarked that resonated with me. She was feeling insecure about being labeled a storyteller for an upcoming event because it downplayed the seriousness of her work. She reminded herself that the label of storyteller was indeed true. “I thought, you know, I am a storyteller. I’m a qualitative researcher. I collect stories; that’s what I do. Maybe stories are just data with a soul. And maybe I’m just a storyteller” (Brown, 2010). I agree with her sentiments that stories are data with a soul because of the meaning and truths that are revealed as the story continues to unfold. An effective storyteller can draw people in, keep them fixated on what is being said, and at times evoke powerful, unsolicited emotions. The process of an autoethnography allowed me to use personal experience and existing literature to investigate the issue at hand. Sharing my story of death and loss gave me an opportunity to examine the phenomenon more closely and add to the body of existing literature.

**Chapter 3 Summary**

Chapter 3 described the research methodology used in the study which was an autoethnography. An autoethnography is a study where the researcher is the primary participant. Additionally, the chapter included further details regarding the purpose of the study, the population and sampling method, and the data collection process. Chapter 3 was written in a manner which would allow for the study to be replicated for further research. Chapter 4 has a discussion of the research findings.
Chapter 4: Data Analysis and Results

Introduction

The intent and purpose of Chapter 4 was to review the results of the research of this study which focused on how educators navigate through personal grief and loss while performing their job duties. I have experienced a great deal of personal loss within the past few years. Personally, I have suffered through losing my grandfather, my husband’s grandmother, my uncle, and two pregnancies in the form of miscarriages. Additionally, I had two aunts die on the same day, and my husband lost his aunt, uncle, and grandfather as well. My uncle and my husband’s aunt passed away within a few days of each other. The amount of stress that surrounded each loss ranged from moderate to severe. There is no doubt that these losses affected me and while I reflected on my experiences, I felt it was necessary to explore how death and loss affected my work performance. These losses were the catalyst which implored me to begin a journey of exploration into how death and loss affect educators.

Description of Sample

One of the concerns with conducting an autoethnographic study is the fact that the study is solely focused on one participant who is the primary researcher. In order to add trustworthiness to the study, I used the shared experiences of other teachers to give a voice to my research. “As witnesses, autoethnographers not only work with others to validate the meaning of their pain, but also allow participants and readers to feel validated and/or better able to cope with or want to change their circumstances” (Adams, Bochner, & Ellis, 2010, para. 27). As stated in Chapter 3, there is no designated sample size where autoethnography is concerned. Anywhere from five to hundreds of participants can be included in a study; however, the key is to have enough participants to add validity and provide saturation and not too many participants where
the stories become lost (Aitken & Burmeister, 2012; Bunce, Guest, & Johnson, 2006) The number of participants in this study was nine, including myself. There were six classroom teachers, one counselor, and two administrators included in the study. It became apparent that saturation was achieved early on, as similar thoughts and experiences were replicated during the interviewing process. I wanted to ensure that my participants came from a similar yet varied background, meaning I wanted to have educators that all had experienced a personal loss and shared some commonalities in that regard, but varied due to the schools, districts, and years of experience as educators.

During the IRB approval process, it was suggested to not specifically target certain educators for the study due to the sensitive nature of the study. Therefore, the sample remained purposeful in the respect that participants were all educators I had a personal connection to, but my recruiting method was broad. I used Facebook to openly invite any educator interested in participating in my study to contact me through a direct message. There were also some educators who thought my topic was interesting and volunteered to be a participant in my study. Snowball sampling was also pursued; however, no further participants were acquired using this technique.

Once interest was shown, each participant was provided with a consent form prior to the interview. Participants were then asked to sign up for a one-on-one interview. My job as the primary researcher was to make sure that participants knew ahead of time the type of questions that would be asked. I did not share my exact questions with participants, but I made sure that participants were aware that the questions would be sensitive in nature and focus on the death of a loved one and how that experience affected them professionally. The interviews took place in
private at a neutral location and each participant was assigned a pseudonym to protect their identity.

All nine participants reside in the same Midwestern metropolitan city. All participants are currently employed in varying roles within their educational systems. Two participants are current administrators, six are classroom teachers, and one is a counselor. Participants in the study have had a wide range of roles within education which include positions at the elementary, middle school, and high school level as teachers, counselors, and program managers. The certified work experience of participants ranges from five to 37 years and participants hold a variety of degrees which range from Bachelors to Doctorates. Specialty endorsements also include Special Education, English as a Second Language, Mathematics, and Reading. There were three African-American participants and the remaining six were Caucasian. All participants were female.

Table 1

<table>
<thead>
<tr>
<th>Pseudonym</th>
<th>Educational Role</th>
<th>Years of Experience</th>
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<td>Cook</td>
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<td>Scott</td>
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<td>Gray</td>
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<td>Wilson</td>
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</tr>
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<td>James</td>
<td>Principal</td>
<td>28</td>
</tr>
<tr>
<td>Reed</td>
<td>Principal</td>
<td>27</td>
</tr>
</tbody>
</table>

Research Methodology and Analysis

I chose to conduct an autoethnographic study which afforded me the opportunity to tell my story and the story of others. The reality of how death and loss affect a person cannot be quantified or captured using a survey. Story telling was the most appropriate way to discuss a
phenomenon such as death and grieving the loss of a loved one. While autoethnography is centered on the researchers personal account, it offered an opportunity to become deeply immersed in the experiences of educators who suffered personal grief and loss. As discussed in Chapter 2, there is an array of literature which discusses grief and loss, but not from an educator standpoint. There were two overarching research questions that I sought to answer: How has mourning and grief through the experience of death and loss affected me? How do educators perceive the process of grief and loss and the impact on their experiences while performing their duties?

I was able to interview a group of people who had experienced losses which included pregnancy, parental, sibling, and other familial loss. In addition to the eight external participants, I also participated and was interviewed using my own questions. The process of being the primary researcher allowed me to have meaningful and deep conversations where emotions, thoughts, and feelings were evident and forthright; I was able to have a greater understanding of the data (Creswell, 2013). Each interview was candid and sincere, and themes began to emerge almost immediately within the first couple of interviews.

For this study, I used semistructured interviews as the main data collection tool. The interviews allowed me to become more familiar with the personal experiences of the participant. Many of the sentiments that were shared were similar to the feelings and thoughts that had emerged in my own interview. The interviews were conducted at neutral locations agreed upon by myself and the participant. Participants were asked 12 open ended questions which related to their personal experiences with grief and loss and how they were affected in their job duties (see Appendix C). Each participant was briefed on the nature of the questions and encouraged to answer in as much detail as possible. Participants were informed that they may become
emotional and assured that whatever emotions displayed were normal. The interviews began with each participant completing a Grief and Death Assessment Inventory (see Appendix D). The inventory was meant to provide a personal awareness as to whether the participant was feeling complicated grief, uncomplicated grief, or depression. Each participant was informed of additional resources like local therapists and support groups. I decided to not automatically provide participants with information because I did not want to assume or offend them, but I had the resources with me had they wanted the information. Once the survey was completed, I reviewed the responses with the participants and explained the different types of grief. All the participants agreed that the results were accurate.

Once the inventory was complete, the interviews began. I allowed the participant to share as much or as little as they wanted. For some interviews, I had to ask additional questions to ensure the initial question was fully answered. For example, I asked the interviewee to provide more detail or rephrased the question. During the interview, I made notes regarding tone, perceived feelings, and items I found interesting. I knew there would be a large number of audio recordings to listen to, and I wanted to make sure I notated items of importance so I could reflect when it was time to transcribe the data and review audio files for accuracy. The notes also provided to be useful because they provided additional context in revealing some of the initial codes. Once the interview was finished, participants were thanked for volunteering and being a part of the study. A few of the participants continued conversing about the topic of the study even after the interview was officially over.

Following the interviews, I uploaded each audio file to my computer and an external zip drive. I then used Temi.com, an audio transcription program, and converted the recording to a text file. The text files allowed me to have a visual reference for each interview and added
another layer of reliability. Each participant was emailed the text file of their interview as part of the member checking process. Member checking entails interviewees reviewing transcripts of what was said for accuracy. No participant corrected their information, so the data was perceived as credible and trustworthy.

The next stage in the process was analyzing the data using codes and developing themes. According to Saldaña (2013), a code is “a word or short phrase that symbolically assigns a summative, salient, essence-capturing, and/or evocative attribute for a portion of language-based or visual data” (p. 4). Coding is not a process that includes reviewing data one time. To fully understand the data, transcripts need to be reviewed more than once; I reviewed my transcripts three times and made notes each time. After that, it became more obvious about which words and phrases were repetitive which is how I developed my themes. In order to determine the most significant and frequent codes, researchers use focused coding (Saldaña, 2013). Additionally, in Vivo codes were used. In Vivo codes use the participants exact words which because it enables the voice of the participant to be heard (Creswell, 2013). There are many techniques to use when coding data such as using software and hand coding. As I was debating about how to organize my information, I did trials of NVivo, Maxqda, and Atlas Ti. I also researched manual methods and decided to implement a method used by Lincoln and Guba (1985) called cutting and sorting. After printing out all the transcripts that I had copied and pasted into Microsoft Word, I went through and highlighted words and phrases that struck me as relevant. I pasted the words and phrases on an index card. I labeled and marked words, phrases, and thoughts that I felt were relevant such as similarities and differences among interviews, my personal opinions, items that surprised me, and statements that I agreed with due to my own personal experiences. Once I was finished going through all nine transcripts, I was able to organize codes into similar categories.
By manually organizing my information, I felt more familiar with my data. There were 77 in Vivo codes that included several words and phrases that were repetitive, which I felt may develop into themes, but needed to conduct another round of coding to further investigate my findings (see Appendix E). Once the first cycle of coding was completed, I then entered a second cycle of coding to narrow down words and phrases. Narrowing the codes assisted me in being able to determine the themes.

**Summary of Findings**

Finally, I combined those repetitive phrases and develop meaningful categories and themes which will help in determining what can be learned from the study. Analyzing and thematic discovery represent data in their entirety. Some of the codes included phrases such as lack of concern, focus being all on the students, anxiety, lack of concern, balance, insensitivity, and worry. After reviewing the first cycle of codes (see Appendix), I was able to determine five emerging themes regarding how educators experience the process of grief and loss while performing their duties at work: Lack of Support and Resources, Non-Empathetic Displays of Action, Lack of a Designated Grieving Space, Physical and Mental Stress of Death, and Performance Pressures due to Lack of Grieving Time.

The framework for my study focused on work conducted by Worden (2018), which focused on the four tasks of mourning. The tasks include accepting the reality of the loss, processing the pain of grief, adjusting to the world without the deceased, and looking for ways to remember the deceased. The tasks can happen in any order (Worden, 2018). As discussed in Chapters 2 and 3, my study looks to fill a gap in literature which lacked on expounding upon the process that educators experience while going through a personal loss. As the codes and themes were discovered, the stage of processing the grief and loss was the main task which my data
represented. All participants who experienced at least one loss (a few participants discussed more than one loss during the interview), agreed that there were conflicts, whether internal, external, or both, when they returned to work. The data discoveries and results will be presented in the next section.

**Presentation of Data and Results**

The data in my study was derived from one-on-one semistructured interviews. The data was gathered through these interviews and recorded, transcribed using an online transcription service, coded, and analyzed into five themes. The data presented is separated into each theme: Lack of Support and Resources, Non-Empathetic Displays of Action, Lack of a Designated Grieving Space, Physical and Mental Stress of Death, and Performance Pressures due to Lack of Grieving Time. The responses reveal that most participants had comparable experiences when working through issues of grief and loss while at work.

**Theme 1: Lack of support and resources.** One of the themes that emerge from the interviews was the lack of resources for educators after loss had occurred and it was time to return to work. All participants cited a need to have more resources available to assist teachers in coping with their personal loss. Counseling was the item that all participants cited as being important to helping teachers sort through their feelings and just having someone to talk to. However, there were some contrasting views in terms of the type of counselor that educators felt would be best suited for their needs. Views regarding counselors ranged from having the appropriate counselors in house or on campus, having counselors available at both places, and having external counselors to talk to because being heard and listened to was somewhat important after experiencing a loss. Ms. Reed felt that the quest to find counselors should start within the community. “We need more community counselors. We need to encourage people in
our community to study to be community counselors. Community counselors do not just grow on trees. We should encourage our students to pursue counseling professions.” Half of the participants felt that an outside person was needed because they felt someone in house may not keep information confidential. Ms. Cook stated, “I would not want somebody in the school because I feel like you wouldn’t be able to really have anonymity.”

Of the employees that supported an on premises counselor, they felt it would be beneficial to have a person readily available to talk and listen to issues but had similar concerns about keeping issues confidential. Ms. Cook disclosed that while a person at their school was in a counseling role, that person failed at keeping private conversations confidential. Her solution was that “Some sort of agreement needs to be signed and if that is broken, there should be some consequences in place.” Ms. Dillard also favored having a hybrid of some sort available; a counselor off-site but making sure there was “a space at the building so you could put a name with a face.” Ms. James mentioned that due to employees being embarrassed about counseling or feeling they need do not need to see anyone, it should be part of the district policy where employees are required to seek counseling for certain traumatic events because a person may discover certain issues they need to continually address.

Except for Ms. Morgan, participants mentioned that an Employee Assistance Program, or EAP, was present in their current or previous district. The issue with the EAP is that it was off-site and located in a warehouse. In addition to the appearance being off-putting, there were only three counseling sessions that were covered under insurance. The people on site may have been helpful, but there was a disconnect in the relationship. As a person who visited the EAP that participants referenced, I did not feel vested enough to return. Regardless of which program or
person is utilized, one of the most important elements in a solid counseling service is that the person or persons remain trustworthy and unbiased.

Another issue closely related to counseling is that participants felt administrators needed to have training for how to effectively converse with staff following a loss. Since most participants felt grief counseling is essential, they felt that principals lacked in how to best support staff. Even administrators felt that training was important. Educators cited that it appeared that principals were equipped with how to handle students with trauma with a certain degree of care, but that same care was not given to the adult staff members in the building. Different scenarios were discussed such as if an administrator should tell other staff members in the building of the loss. Some felt that they wanted staff to know so another level of support could be available, while others felt that they were private grievers and preferred a huge announcement not be made. Ms. Wilson, who acts in the role of a counselor, felt that the silence of their principal caused them harm when the death of her grandmother caused her to miss several days of work. Other teachers were angry and hostile because her absence lead to a loss of perceived plan time, even though classroom counseling isn’t recognized as plan time. Ms. Wilson was treated poorly and had comments made to her about making up the time she missed with students. She felt that if her principal would have addressed this issue upfront, the hostility would have dissipated. If the principal would have addressed the concerns at the beginning, she is adamant she would not have been attacked and made to feel like she was not doing her job.

Theme 2: Non-empathetic displays of action. The second theme that emerged was the absence of empathy shown by staff, especially building administrators. As the head of the building, the principal is the individual charged with setting the tone of the building. Of the nine participants of the study, seven felt that the administrator lacked empathy regarding their loss,
while two felt their immediate administrator was empathetic and offered meaningful support.

Different feelings that were revealed were “there was no acknowledgement of my loss,” “no one checked on me personally,” “no follow up afterwards,” and “conversations were very disingenuous.” Many participants felt that when they told their administrators about the loss that had happened, mainly infant and parental loss, they were met with responses that did not reference their loss. The administrators never once apologized or offered any condolences. Instead, responses included head nodding or sharing a related similar story about a loss they had personally suffered. Ms. Morgan: “When I talked to administration, there was no real empathy, and no one reached out to me to ask how I was doing.” Ms. Reed experienced a similar experience. A supervisor who she trusted and confided in remarked that they also had lost their mother and it was “a beautiful transition.” Ms. Reed’s mother had been on life support for two weeks after unexpectedly falling into a coma. For obvious reasons, she did not feel that the beautiful transition remark was exactly fitting to her situation. For Ms. Wilson, staff was encouraged to not reach out due to school not being an appropriate place to show emotions.

For the two participants who felt they were met with empathy from their administrators, their experience was very positive. The administrators were understanding and assured them they needed to take the time they needed in order to be in a good place mentally when they returned to work. Ms. Scott remarked that their principal was not the type to leave their office very much but would constantly come to the classroom and check up on her. Her principal would embrace her, rub her back, and continually take the time to ask how she was doing and if she was okay. Ms. James had a premonition that she needed to take a day off and be with her mother and the administrators were very supportive. Her mother passed the next day. “I have strong memories of being very empathetic and very supportive . . . they told me not to worry about anything, that
they had things covered.” She recalls that while plans did need to be submitted and ready a week in advance, she was still concerned that she may have missed things and it was a relief to know she did not need to worry.

In order to combat the feeling that administrators lack empathy, participants suggested that sensitivity training be mandatory for administrators and supervisory staff that work with teachers. Ms. Gray remarked, “How do we teach empathy to grown adults?” Some of the educators expressed concern that their students were more caring than the adults they worked with. Of the parents and students who were made aware of loss, most were supportive and empathetic towards the needs of the participants. Two of the participants were working with older students at the middle school and high school level. Those students offered gestures of support by asking how they were doing and having conversations about loss. Ms. Gray shared her experience with her students:

I think because I had older students and they asked a lot of questions, I was able to kind of process it like a little bit through that, like talking to them. They were 17 and 18 so they could have a decent conversation with you. I was able to process it a little bit . . . I think that almost turned into more of like a teachable moment for my students.

Ms. Reed experienced the loss of her mother over spring break, so her absence was not greatly felt initially. However, she took some time off the following week and students were eager to talk to her when she returned. Students offered condolences, asked how she was feeling, and gave her hugs. The population she works with are students who are heavily affected by death and almost numb to it, so she was felt hopeful and encouraged that these students were empathetic. She stated:
I told them I appreciated their, you know, sympathy for me and being empathetic. I said, that is a part of growing up—that’s a part of becoming an adult and you’re on the right track. And I so appreciated that.

Others remarked that they received cards and small gifts like candy from students. At conferences, parents told one teacher that they told their child to be good because they were aware she was going through a rough time. Sadly, Ms. Reed discussed that when she told a school counselor about her loss, the counselor just nodded and said, “‘uh hmm’ . . . there was no I’m so sorry or sorry for what happened . . . no I’m sorry for your loss.” She was surprised because she felt if anyone would have had the right words to say and a high level of empathy to offer, it would have been the counselor. Some colleagues were very supportive with participants and offered to watch their classrooms if they needed a break or needed to step away from students. Ms. Gray shared: “not from administration, from other coworkers. There was a lot of support and a lot of hugs and kind of just a lot of grace if I needed it.” They lent their shoulders to cry, said prayers, and sent emails and cards to show their support. Ms. Morgan revealed that with her perinatal loss, it was staff who showed the most empathy:

My colleagues were super supportive. Some of them knew everything that was going on, some did not know, and they did not ask questions. They were just there to support. My grade level texted and showed their concern . . . they said they would do whatever I needed. And then there’s other colleagues, not people in my grade level, but in the building, that were super supportive that came over and brought dinner in cards.

Regarding her principal’s reaction, Ms. Morgan continued:

I was just in the principal’s office and it was pretty emotional. And she said do you need to leave, or can you teach today? So, I said I could teach, and I stayed and went on with
the day and then that was, that was pretty much it from there. There was never any other
follow-up as to how I was doing after that. . . . Yeah, I would have expected a little bit
more sympathy and understanding and them saying that they would handle it and cover
the classroom and probably let me go.

Overall, most participants felt it was crucial for someone, mainly their administrator, to “say
something.” The feelings of not being supported lingered with the teachers and the admin that
had a poor experience. The manner in which the teacher was addressed after their loss left long-
lasting impressions, whether positive or negative.

**Theme 3: Lack of designated grieving space.** The third theme that emerged was the
lack of a physical space to express grief. Teaching entails being able to show emotion and often
that emotion come in the form of caring for students and showing them how to be savvy with
their own expressions. However, the loss of a loved one can trigger varying emotions that
teachers may feel have no place at work. When those feelings do come to the forefront, there is
often no place to comfortably let those emotions flow. Except for the two principals that were
interviewed who were able to use their personal office as a place of refuge, the remaining
teachers agreed there was no designated space to use when they needed a moment to grieve. The
bathroom was the place to go if teachers needed to let out some emotions, but most agreed that
they rarely showed any emotion at school. Dillard remarked:

> I just did not take those moments because I felt like there wasn’t a place to take them and
> I did not. We were all so overworked with the kids we had. And the condition of the
> building and the way it was being run that I did not want to have someone else try and
> cover my class while covering theirs because we did not have paraeducators in the room

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to help us. You were on your own. In the other building, I felt like I just needed to keep it moving. . . . If I needed a place, I would’ve just had to go find some quiet closet to do it.

There was no place where they felt comfortable in the school where crying or showing emotion was acceptable. Ms. Morgan said that the only place aside from a restroom she used was her classroom if the kids were not present. She would just “shut the door” if she needed to have a moment of privacy.

While participants agree that there was no designated area to go to, they also agreed that they just kept their emotions in while at work. They either “did not deal with it at school” or “just sucked it up.” Work also provided a distraction for one participant and one administrator because it kept their minds off what was happening in their personal life. Ms. Cook shared:

When I go to work, I’m in my own space anyway. So just going there and just blocking out everything else that’s going on and just focusing on the kids helped a lot. The children, the kids, my students made things easier. While I was there it kind of took me away from what was going on.

However, when I asked Ms. Cook about her school having a place to go to, she disclosed that she did not feel there was a place. “And actually, I can remember one time I did break down, I left the class. And it’s funny that you mentioned that because I was thinking, oh my God where do I go?”

Ms. James commented that during her days as classroom teacher, she did not feel the need to cry while at work. However, it has been several years since that loss had happened so details were harder to remember, but she said that it was possible that she went to an assistant principal’s office if she needed to because the two of them had a close relationship. She also felt that there were other colleagues where she could have visited their rooms because she felt
comfortable letting her guard down. In her current position, it is incredibly time consuming, so she did not find much time where she could just have a moment at school.

Ms. Scott shared that after the loss of her mother, “there a place to go to no, please. No. No, there's no place in the school that we got to go to. None whatsoever.” Ms. Gray divulged: “There was a lot of support and a lot of hugs and kind of just a lot of grace if I needed it. . . . If I needed to go to the bathroom, to cry . . . so no dedicated space. No place. Just the bathroom.”

**Theme 4: The physical and mental stress of death.** Grief can have a tremendous impact on one’s mental and physical health. Each participant noted that the loss of their loved one affected them in some way whether it was crying or losing their sense of control for a moment while at work. At times breaking down in the classroom or finding the nearest bathroom were the only places of refuge if the emotions were uncontrollable. Participants noted that there were other physical indicators of how grief had taken a toll on them, even before their loved ones physically passed. For three, their loved one was sick and expected to die. These participants felt some uneasiness because they had no idea when they would get word that their loved one was dying or had died. Ms. Scott reflected: “It was a major stressor constantly. I’d get a call and be like ‘Oh God, this is it.’ Every time the phone rang, it was always in the back of my mind that they’re calling about mom. It was a lot of stress.” Ms. Reed discussed the stress of having a person on their team who intentionally caused disruption in order to put themselves in the spotlight; this person took advantage of her absence and there were a lot of issues that needed to be undone which caused additional stress. The workplace stress coupled with the death of her mother brought on “much physical anguish.” She talked about how the hospital is in close proximity to her job and she is daily reminded of the events that took place at the hospital:
Mentally I have to adjust to what actually happened . . . and put the hurt pain where it should be, so it doesn’t affect what I do and who I am working with. I have to have a focus, which was my students, and making sure they were ok. . . . I work with students who have gone through trauma, so I deal with trauma every day. It is a constant mental strain. So the same care I give to my students in their trauma, I had to give that same care to me.

A few participants stressed that they had trouble staying focused and efficiently completing tasks. Ms. James shared “I [lost] my normal check it off, get it done style of work. I became more forgetful.”

Ms. Cook talked about starting a new job and that no one knew her mother was sick and that she was taking care of her. “I had a lot on my plate at that time just because I did not talk to her [boss], to anyone, about it. I think that’s something that I probably would have dealt with it better if I felt I had someone to talk to, but I just did not feel that I had support.”

Teachers felt exhausted and admitted that they were on the “struggle bus” when it came to managing the stress that the loss of their loved one had caused them. Being on auto-pilot, having stomachaches, and overall feeling physical ill. Grief is deeply personal and effects individuals in different manner. Once the recordings stopped, a few participants mentioned that they had to take medication in order to manage all their feelings and take the edge off the day. Death is a non-preventable phenomenon, so managing the stressors via medication was a way for teachers to have some sort of control during a time when life was uncontrollable.

**Theme 5: Performance pressures due to lack of grieving time.** Within the confounds of any workplace, all employees feel some type of pressure to perform at an optimum level. The expectation is no different for teachers. All participants felt that there was a high level of
pressure to perform a certain way while at work regardless of the loss they endured. Some of the phrases that were under this theme were “putting on a show,” “being brave,” and had to “hide emotions.” All participants felt pressure to keep up their appearances of their assigned roles and get back to business as usual. It was an unspoken rule to come to work and perform without regard for their loss. One teacher felt that she was not allowed to be human when she returned to work. Ms. Wilson noted that in their role as a counselor, she too was expected to act inhumane when asked about whether she had to hide her grief. She has worked over the years to be more real with students and with adults but admits in the beginning she had to “put her face on”, smile, and not show feelings. She felt compelled to carry on as usual. Both administrators interviewed, Ms. James and Ms. Reed, felt they needed to keep their composure at work for the sake of their staff. Ms. James noted that she did not want people to feel uncomfortable if she brought her sorrow into the workplace. Ms. Reed expressed these sentiments about hiding feelings:” I had to mask my pain because as the director, I am supposed to be the person who is strong. I cannot show fear, sadness, or stress. I had to hide all of those emotions.” Overall, all the educators felt that they needed to conceal their emotions and pause their feelings at work for the sake of the students. Grief is for home, not work.

Participants voiced displeasure over the amount of time they were given to grieve. Several of the interviewees discussed how they took the maximum number of days which was approximately three to five days for most organizations. The participants also talked about how when they needed more time, the request was met with disdain from their administrators who pressured them in returning to work. Ms. Gray, who requested more time off work, one more day to be exact, was told by her principal that the kids needed her. She was thrown by that response because she was not thinking about her students. After the loss of her sibling, she was judged
because her principal did not want to give her any extra time and asked her if she needed more time to process. She took her five days and returned to work which her admin felt was extra lengthy. She recalled being “super pissy” to the point where co-workers had to tell her to curtail her attitude, but the reality is that a week before, she had an older brother and now no longer did. She felt she had a right to not be okay. She had a right to have an attitude, to show her faults, and to allow herself to act freely without having to follow the workplace rules. She earned the right to be “super pissy.” Ms. Scott had this to say after the death of her mother:

the thing is you come back to school and you’re expected to get back into the swing of things . . . you’re trying to do what’s best for the kids, but you know my mom died. I remember thinking as I was driving home to school, but my mom died. With classroom management, I did not care about who did this or who got in trouble and I’d be like I don’t give a shit. I don’t care right now because I’ve got a lot of other things on my mind. With lesson plans, I was going through the motions. Was I the best teacher? Hell no, no not at all. I just think teachers need more time.

In addition to not having enough time to grieve, a major source of contention for the classroom teachers and counselor was having to take unpaid leave if they needed more time to process their grief. In one instance, Ms. Dillard used her pre-approved personal days to attend her grandmother’s funeral only to have the days denied upon her return which resulted in a loss of pay. It turns out that there was a flaw in the contract. Some teachers ended up getting retroactive pay further down the line, but she admits she was angry that there were no provisions made in circumstances like this. After her neonatal loss, Ms. Morgan offered the following regarding her performance:
I think it [the loss] affected the way I acted towards students and my performance just because it was always on my mind in the forefront at the beginning until time went on. You know, it got better. But at the beginning if I would have had more time off, I think it would have helped my performance.

Overall, participants agreed that there was not enough time to grieve after the loss of a loved one and that they would have appreciated having more time. However, work and the pressure to conduct themselves in a “normal” manner did provide a distraction and temporarily took their mind off the loss.

**Chapter 4 Summary**

The purpose of this qualitative autoethnographic study was to understand the processes of grief and loss through the lens of educational staff members. Each of the nine participants of the study candidly expressed their feelings about balancing work and managing their personal grief and loss. The chapter included descriptors of the sample, an explanation of how the data was analyzed, and a discussion of the interviews. Five themes emerged through the conversations with participants: lack of support and resources, non-empathetic displays of action, lack of a designated grieving space, physical and mental stress of death, and performance pressures due to lack of grieving time. The consensus from the educators is that there is not enough consideration given to grieving teachers and the school community needs to do a better job of providing supports to ensure staff is taking care of so they can in turn take care of the students. Chapter 5 will present a summary of the results, discussion of the literature, limitations, implications for practice, policy, and theory, recommendations for future research, and a conclusion.
Chapter 5: Discussion and Conclusion

Introduction

The purpose of this qualitative authoethnographic study was to understand the processes of grief and loss through the lens of educational staff members. Autoethnography was the chosen method because the art of storytelling helped me in connecting my experience to the experiences of others. I wanted to approach my encounters of grief and loss to discover a more profound degree of self-awareness. As I reflect on how I became a novice autoethnographer, it would appear that I arrived by happenstance, but I am believer that I am here by design.

In April 2013, I was at work and received a phone call that I felt would be life changing. It was an advisor from Concordia University–Portland calling to tell me that I was accepted into the first cohort of its doctorate program. I remember being in my fourth grade classroom and screaming at the top of my lungs while I jumped up and down for joy. Attaining my doctorate had been a goal since my early 20s, and to hear that I would be officially starting a program meant the world to me.

As I previously mentioned in Chapter 1, my grandmother was a major influence and inspiration in my journey to become an educator. My mother has always been my number 1 advocate and encouraged me to continue going until I had a doctorate for as long as I can remember. I vividly recall being in grade school and hearing my mother talk about her dreams for me. The two of them together certainly paved the way for me to be the educator I am today. My grandparents were my next-door neighbors (two houses up the street), so when my grandmother died, I was devastated. I had finally decided that I was returning to school to become a teacher and she died almost as soon as I began the program. I remember her being so proud of me and I was depressed that she would not be here to physically see me achieve my
lifelong dream. So, when I got the call that I was accepted, I already knew within my heart that my dissertation would focus largely on her and our relationship, and how her death impacted my life.

The initial draft of my original dissertation was all about faith, spirituality, and self-efficacy as they pertained to the death of my grandmother. I was interested in the topic, but it felt clunky and disjointed. My chair likened it to trying to put together a puzzle with pieces that were all from different sets. The cohesion was not there. My chair walked and talked me through my ideas, and as I began to verbalize my interests, I found what was missing. I talked about how her death had affected me personally and professionally. I started thinking about how writing a dissertation about death could prove to be cathartic, but I wanted to write it from a working professional’s point of view, specifically as an educator. I wondered what other people had experienced when they returned to work after the death of a loved one. When my grandmother died, I was working in higher education and had much more freedom to cry when I needed and basically be at work, but not fully engaged. The work itself was not challenging to the point where I could not find time to breakdown if I needed. She was my first experience with the death of a close family member and since then I have had many more losses.

I have endured several losses that devastated me and caused me great distress. My grandfather, although quite aged (he died 2 months shy of 98), unexpectedly died in 2015. My husband’s grandmother, who I loved and deeply adored, unexpectedly suffered a heart condition and was in a coma for two weeks before the decision was made to take her off life support in 2017. In 2018, I received one of those middle of the night phone calls that everyone dreads which informed me that my uncle, my mother’s oldest brother, had died. Losing J.C., Eleanor, and James within a short time span was incredibly difficult. For the first time in my life I felt old;
while the comparison is a bit dramatic, I remember seeing my grandpa looking out the window looking somber and wondered why he appeared so sad. I recalled him answering that he felt alone because he had outlived just about all of his loved ones. Death had left without a wife, a child, grandchildren, siblings, other relatives, and friends. It hit me that the older I get, the more loved ones that I would lose, and I had no control over it. The thought of it caused me to have several personal and secretive panic attacks. As I began conducting research about the effects of death and loss, I became somewhat angry and dismayed. After knowing a person over the span of 30 to 50 years, it seemed unreasonable to return to life as it was before the loss, which includes going back to work in 3 to 5 days after a traumatic death has occurred. I had a desire to discover more about death and its effects on the survivors left behind, specifically those that are educators.

In Chapter 5, I will discuss my grief and loss in further detail and how this research journey was transformative for me both personally and professionally. I will present the findings of my research, how the results related to the literature in Chapter 2, limitations of the study, implications for practice, policy, and theory, my recommendations for future research, and my concluding thoughts.

While writing this dissertation, I have been affected by several familial deaths which include my grandpa and uncle, as well as my husband’s grandmother. Other losses include my husband’s uncle, grandfather, aunt, and two of my aunts, two sisters, died on the same day. At the time of their deaths, I was still in the drafting stage of my first and second chapters of writing. When I suffered two miscarriages within several months of each other, I really thought about death and its implications on work productivity. As previously discussed in Chapter 2, my miscarriages dealt a devastating blow to my husband and my family. As a woman who was told
she would never have children, my first-born son was a prayed for blessing. For some reason, I keep every positive pregnancy test that I take. I almost consider them trophies after being told that I would never become pregnant or have children . . . my silent “take that” to all the naysayers, as if my children were evidence enough. I believe I bought six pregnancy tests and used every single one of them. Those bold, pink lines are what every woman who wants a baby prays and wishes for. It is what dreams are made of.

My middle child was an incredible surprise considering what we went through the first time around. So, when I became pregnant the third time, I never imagined that the pregnancy would result in a loss. I was so excited to shout it from the rooftops, but instead opted to first share with my parents by inviting them over for dinner. I bought a birthday card for my mom and told her about her delayed gift. We were all so excited. I just remember feeling on top of the world. The next morning, I went into work as the director of a local Upward Bound for high school students, and had several people comment on my “glow.” I did not want to tell everyone just yet, but I remember thinking how excited they would be when they heard why I seemed to be glowing. My morning started like all the rest with me writing passes for students, talking to them about their classes and goals, and searching for allowable costs for the grant. I can remember sitting in my chair and then starting to feel like I had urinated on myself. I immediately panicked and right away just knew I was having a miscarriage even though I had never had one before. I got up and went to the bathroom and found that my underwear was covered in blood. I had experienced spotting with my middle child, but this was different. I was in a full-blown state of panic when I ran out of the bathroom back to my office and tearfully told my colleagues I was leaving for the day.
First, I called my husband and then my parents and we all shared a moment of prayer. Next, I called the doctor and they asked me to come in for a check of my HCG levels. A few hours later, the test confirmed that my levels had dropped and there was nothing they could do. I called my supervisor and told her what was happening. She was so warm and understanding and empathetic. She immediately expressed her condolences. She told me to take all the time that I needed and ask what she could do for me and how my staff could take on my responsibilities. I thanked her and tearfully apologized for taking time off. She told me not to worry about anything at all. She asked my permission if she could tell her boss, one of the vice presidents, about my loss and I told her that was fine. She was deliberate and intentional about making sure that I felt supported and that my needs were met. Over the course of the next week, I sat home and continued to lose my baby. I cried throughout the day, each day because I had never felt so hopeless and out of control. Each time that I went to the bathroom, all I could think of was how I was flushing away my baby. There were no memorial ashes, although that experience would have sucked just as much, no condolence cards, nothing except a positive pregnancy test . . . it was like my child never existed.

When I did return to work, I was not my usual self. I split my time between the high school and the corporate office, and at the high school, I was not the Mrs. Oliver that staff and students had grown to know over the past year. I was quiet, reserved, and almost standoffish. I kept my door closed for the first few days back and even covered the rectangular window in my door. When I did feel ready, I began by parting my door so students knew I was in the office, but perhaps would think twice about coming in. The truth is, in those moments, I did not feel like helping my students prepare for college. My child would never have that opportunity and I was very depressed and bitter about it. Several of my high school students asked me if everything
was ok, but at that time I did not feel it was appropriate to have a discussion with them. I was not at a place where I was comfortable expressing my grief to students. I felt pressured to say what happened with colleagues because I was constantly asked what was wrong. When I was able to share the loss with colleagues, I was thankful for their empathy and sensitivity. As time went on, I was able to work through my depression and grief. I considered going to the doctor for medication, but instead I pushed through my feelings on my own. Months later I finally arrived at a place where it got easier to see newborns in their cute little outfits and seeing women’s baby bumps did not fill me with sorrow.

My second pregnancy loss came as a total surprise and in hindsight, it was the loss that taught me how devastating a death is when you cannot be expressive. My husband and I had booked a trip to celebrate our birthdays and flew out to sunny San Diego. I was so excited thinking of all the new possibilities for our lives and how this baby was going to complete our family. In the back of my mind, I was scared, but I figured there was no way I would have two miscarriages within a years’ time. After the first loss, I had a series of tests, including a uterine biopsy, and all my tests came back perfect. I recall walking on the Mission Beach and thinking that it was causing me too much strain on my abdomen. In those moments, I thought all the strenuous walking was going to cause me harm to my pregnancy, but dismissed the thought because I saw other women, visibly pregnant, walking, running, and enjoying themselves. The next day, I woke up and did not feel pregnant anymore. It just seemed like all my symptoms were disappearing. We took an Uber to pick up a rental car and later that evening found a CVS where I bought a pregnancy test. I was trying to think positive, but in my heart, I knew what the results were. The first test the line was very faint and not nearly as dark as it should have been. My heart sank but I still wanted to believe that this pregnancy would result in a baby come
February the following year. I took another test at 0 dark thirty and it was even fainter than the one I had taken earlier. We tried to enjoy our remaining time and not think about what was happening to us, to me. The morning before we left, I took the final test in the box and they line was so faint, it was barely noticeable. My hope, like that beautiful, positive, pink line, had dissipated. We were devastated. I was devastated. My body had betrayed me yet again.

After a layover, our plane returned home around 1 a.m. I was to start work the next day, and I dreaded calling my new employer to tell her I would not be able to start. My first thought was that she would think I was deceptive because I did not reveal I was pregnant sooner. I had worked for a week and then went on vacation. The only person I had disclosed it to was our building secretary who kept my secret safe and encouraged me to tell about my pregnancy in my time when I was ready. I remember telling my husband that the least of my concerns should have been how my principal would take me not starting work. I felt guilty for doing what was best for me in my moment of loss. But I had been a classroom teacher for years. I knew the pressures I felt before I left the classroom to pursue other interests, and on my first day stepping back into a teacher role, I was not going to be able to make it. I made the call and sobbed the entire way through; the principal understood I could not come in and gave me some words of encouragement, which I deeply needed and appreciated. But I honestly needed more time than that, but she did not offer, and I felt scared to ask. I told her I would come in the next day. I hung up and cried. When we went to pick up our two boys, they did not understand why mommy was so sad and crying. I think it was harder for them because they had not seen either of us for several days. I left being one mommy and returned another.

On the day I returned to work, I remember feeling so fake. I felt like that my baby was in Heaven looking down on me and wondering how I could behave like he or she did not matter.
smiled and laughed and joked. I acted as though I did not have a care in the world and was so happy to be there. That day I helped children try to be their very best version of themselves in the capacity that I could. I watched them play and engage with each other and regretted all the moments that I would never witness and would miss. I was filled with sadness for what would never be-the loss of my future. There were moments where I would become teary eyed and literally dug my nails into my skin to suppress my tears keep up my façade. There was no place for grief at work; not figuratively or literally. I wanted to be respected and taken seriously, not viewed as an emotional basket case who falls apart over things. But losing a baby is more than just a thing that happened. It was a life changing event because I will never forget those two babies that I lost. Even though we were able to get pregnant and I carried our third son to term, I often remind myself that I am a mother of five, not just the three boys that people see.

**Discussion of the Results**

This study sought to find a deeper understanding behind the phenomena of death and how it effects educators in the workplace. In the next section, I will discuss the results of the study, specifically that modeling grief is not a common among educators, but a practice that can serve as a guide and assist students and others in how to cope when a personal loss occurs. The study was guided by two main research questions:

RQ1. How has mourning and grief through the experience of death and loss affected me?

RQ2. How do educators perceive the process of grief and loss and the impact on their experiences while performing their duties?

In order to answer these questions, participants were interviewed using a semi-structured format with open-ended questions. The data extracted from the interviews was then transcribed,
analyzed, and coded. Several phrases were prevalent, and five themes emerged. The findings of the study are discussed in the remainder of the chapter.

As I previously mentioned in Chapter 2, one of my students had a breakdown over her grandmother in class and I initially did not know how to handle it. For her, I knew to comfort her, but my first thought was how I needed to keep myself from crying too. I felt that if students saw me cry, they would assume I was weak and therefore “run all over me” for the duration of the school year. In my mind, showing emotion was an almost guaranteed way to lose control of my class. I had never intended for those tears to flow as I sat crisscross applesauce on the floor with her as we both sobbed over the loss of our grandmothers. That day she taught me that it was acceptable for me as a teacher to unapologetically grieve in the open. Students cry all the time for a variety of reasons, but that is an emotion that teachers rarely show. I did not realize what I was learning at the time, but in that moment, I was learning how to model showing sadness from an adult point of view and how to normalize it. Other students had a look of surprise on their faces, a couple had smirks, but the majority had a look of acceptance on their faces and in their eyes.

Over the next several months, my students would see me model a variety of emotions which included sadness and grief, complete with tears. It was towards the end of the fourth term (we have five terms because we are a year-round school), when I found out about my husband’s uncle, I had just told my students to line up for recess. I picked up my phone so I could use my timer and saw the message “Uncle Marshall died.” I immediately burst into tears and sobbed, but by this point in the year, my students were used to it. When they found out what happened, they offered their condolences. They had come to know me as their teacher who was not afraid to be expressive. I cried during movies, cried when my para’s brother died and I saw the most
thoughtful cards they had drawn for her, cried when they sang their grandparents day song, cried when they cried over a classmate transferring to a new school. I became very open and honest with them about my tears and letting them know it was ok to cry. My tears that morning did not catch them off guard or make them feel uncomfortable because throughout the year I had modeled how important it was to not be afraid to cry and that it was ok to see how an adult works through their moments of sadness. Both boys and girls in my class were open to being expressive and showing their emotion if they felt the need. Reflecting on the previous year, they were a group of students who were very in touch with their feelings and I would like to think I played a part in their comfort and level of expression.

All the participants in the study discussed how they never showed their emotions in front of the students. Some of those underlying feelings come from not appearing to have control and being concerned that it would be too revealing. When one of my student’s mothers had a miscarriage, it was devastating. She and I were only two weeks apart and her daughter, my student, would often talk to me about what was happening with my baby so she could have something to look forward to. Another student’s mother was also pregnant at the same time, and the three of us forged a bond over these unborn babies. The miscarriage tore this little girl apart. She became unstable in her emotions, had a lower level of tolerance, and showed signs of depression. Her mother and I talked about her issues and how seeing a therapist may be beneficial for her. I became very self-conscious about my growing baby bump. I would catch her staring at it and she would hug me less and less. One day she got in trouble and stayed with me to talk and she yelled how she was sad because she lost her sister. It pierced my heart to hear those guttural sobs coming from a 9-year-old . . . so much that I began to sob too. She allowed me to hold her and I revealed that I had lost two babies, so I understood in some way what her
mother was going through. She pulled back and looked at me in disbelief. I sent her mother a message and told her about my losses. Discussing my personal infertility and loss are not subjects that I just readily open up and share about.

This process of writing and being vulnerable is deeply exposing. I had already started this process of writing this study and I firmly believe this process gave me the courage to admit to a 9-year-old and her mother that I had two miscarriages because my story could be beneficial to someone. As the week went on, she ended up telling some of the other girls in the class about my loss. I knew that disclosing to her was a risk, but in that moment I wanted her to know that things were going to be ok. Surprisingly, I was not upset by it at all. We did not have classroom discussions about it, but it gave those students a new insight about their teacher. I hope that as they grow older and become more reflective, they can use some of what they witnessed in my classroom to become empathetic and understanding people. Many of my colleagues discussed the need for sensitivity training and perhaps if we can start modeling how to handle grief in the elementary ages, it will become engrained in students. Many schools are starting to adopt Social and Emotional Lessons, SEL, but I think it goes beyond that. The lessons that students need to learn and see come from watching the adults around them be honest and open. As a teacher, it is being so in tune with yourself and comfortable in your own skin, that everyone else, including students, feel safe as well.

Summary of the Results

This autoethnographic study primarily sought the answers to discovering how mourning and grief through the experience of death affected me as a researcher and how educators perceived the process of grief and loss while examining the impact of the experience while performing their duties. There was a gap in literature on these issues which compelled me to take
a closer look into the phenomenon of death in the workplace, specifically at local schools in my area through the lens of educators. Worden’s task of mourning served as the conceptual framework because his work resonated with my personal experiences. His four tasks, accepting reality of the loss, processing the pain of grief, adjusting to the world without the deceased, and finding a way to honor the deceased while continuing to live, were tasks that my participants and I felt. Worden noted that the tasks did not have to be in order, and for this study, I felt the accepting, processing, and adjusting were prevalent for the teachers because the loss was fresh. We all were forced back into our normal routines, even though our routines were no longer the norm. Being at work challenged all of us to rethink and reimagine of how our lives would change going forward and while we had to focus on workplace demands, our thought processes did not just turn off. Suppressing our feelings and thoughts were how most of us coped which was determined to be an unacceptable practice. Educators need more support than internally suppressing our emotions.

The study revealed certain themes that recurred during the interview process. Overall, teachers felt a lack of support and resources from their school community. In most cases, there was no admin follow up, or counselors and therapists made available to help teachers work through their loss. Teachers also expressed concern over the lack of empathy they encountered when navigating through the process of losing their loved ones. Shortened time off, lack of understanding for their feelings, and no one (mainly administrators) “checking on” the teachers, caused further distress and distrust. The study also revealed that teachers do not have a designated space to grieve and often had to bottle their emotions until they left the building. There were no places of refuge for them if they needed to grieve. The bathroom was the most common place if teachers needed a retreating space. Lastly, the study revealed that there is a
great amount of physical and mental stress caused when a loved one dies, which should come as no surprise. Having to be fully present for students while combating the stress, grief, and depression stemming from the death of a loved one, had a negative impact on teachers.

All participants completed a grief/depression assessment inventory (see Appendix D) which also had some revealing data. Teachers indicated that most of their losses had occurred anywhere between seven months to more than five years ago. It would be expected that those with the most recent losses would have higher amounts of grief and depression, but even those with losses over five years ago are still experiencing moments of grief. The positive takeaway is that the grief is uncomplicated or normal and professional help was not needed at this point in time. One question on the survey in particular asked about how feelings have been affected since the death. Five of the nine participants indicated that they felt grief, even for the losses that were more than five years ago. Some of the statements within this question were feelings of being broken-hearted, angry, sad, and having feelings so intense that you could not stay with them, but also feeling happy, terrific, joyful, and loved. A gamut of emotions that teachers feel that are not turned off when duty hours begin.

Another question on the inventory asked responders to indicate how they have been behaving since the loss occurred and again, most participants, six out of nine, felt grief, and three responded neither. Statements within this question were feeling easily distracted, feeling others have been insensitive, being lonely even when others are around, and losing themselves in hobbies, work, sports, or caring for their children. However, those distractions still did not work to alleviate their grief.

When asked how the loss has affected feelings about self, five of the nine participants indicated that they were experiencing grief. Four responded with neither. Statements like having
the loss put them in touch with their best self, realizing there are things that needed to be processed and rectified, being hurt by others being preoccupied, having the loss mean more than others acknowledged, and being deeply moved by those who have been supported.

One question that I believe brought forth some interesting data was a question about the support that participants had. Six responded that they were experiencing grief, one indicated neither, one indicated depressed, and one responded they were experiencing grief and depression. This was telling for me because eight of the nine participants indicated that they identified with some of the statements like feeling comfortable when they were around sympathetic people, responding positively when a person was warm, persistent, and reassuring, feeling connected with people with similar losses, and having a certain vulnerability they did not have before.

The data from the interview process and the assessment inventory emphasized that teachers feel the need to be supported and that communication and showing empathy were very important. Teachers have a desire to feel encouraged, acknowledged, and be listened to and supported with how they may need to grieve. Ultimately when these measures are in place, they can alleviate some of those hard to deal with feelings and allow educators to have authentic control of their emotions which results in a better school environment for the teacher and ultimately school culture

Discussion of the Results in Relation to the Literature

Excluding myself, the participants in the study did not openly display their grief through tears and emotions in front of students. Initially, I did not show that I was suffering and was very uncomfortable with the idea of showing emotions in front of my students. I was reluctant because I felt I needed to portray a certain type of teacher; I have joked for years that I am far
from a Stepford teacher (my play on Stepford wives), pretending to be this soft-spoken and automated teacher who responds to every situation with perfection. I have always prided myself on showing emotion, being loud and silly, and having a good time interacting with my students. Yet, showing grief and crying in front of students was always a no-no. I always felt it was wrong and inappropriate because good teachers do not show negative emotions, only positive ones. While my questions did not directly ask participants why they were uncomfortable, the interviews revealed a great deal about maintaining a level of control and respect, which is the perception of how a teacher ought to behave and what we should be showing students. However, Cohen and Mannarino (2011), assert that when teachers avoid the issue of discussing grief, it can interfere with a students’ grieving process since the role of a teacher is to assist in helping students to adjust. There are many studies which discuss how important it is for teachers to help students work through their grief. Dyregrov, Dyregrov, and Isdoe (2013) indicated that it is crucial and necessary for students to have strong teacher to support them in the time of their grief. Their study highlighted that students spend a considerable amount of time at school and schools plays a crucial role in helping students deal. Schools provide stability when death uproots the normalcy of a child in many ways, but mostly through the presence of a classroom teacher. Studies have shown the importance of an empathetic teacher makes a substantial difference. And yet, how can a teacher effectively model grief work, if they are not allowed to work through their own losses? Modeling entails understanding a process and knowing how to work through it, so that process can be shown to someone else. I wouldn’t dare be unfamiliar with a math problem and work through it simultaneously with students or worse yet, expect students to work through a problem on their own with no real assistance from me. Why then when it comes to grief are teachers expected to keep a stiff upper lip and not show their pain?
In Chapter 2, Rowling (1995) and Doka (2002) both discussed the concept of disenfranchised grief, or grief that feels as if it must remain hidden and secretive. Within the scope of this study, none of us participants explicitly stated that our grief was disenfranchised, but we all felt the need at some point to hide our real feelings to students, colleagues, and our supervisors. Teachers are seen as being emotional Rock of Gibraltar’s that can be there for students when they face challenges, but not allowed to show personal weaknesses. The grief must remain covert because it challenges our seemingly flawless professional role. It was stressful for me in every situation whether I chose to hide my loss in its entirety or chose to breakdown and display my emotions. I displayed internal disenfranchised grief when I bottled my emotions and allowed my mind to wander. I had times when thoughts held my mind captive and I was uncertain of when I would become free again. When I openly wept in front of my family or strangers, or made posts on Facebook in my support groups, my grief turned into public displays of mourning. Again, while my participants and I never explicitly stated any of this, I believe that we felt some amount of shame, which is a major component for why we chose to hide their grief. Internal shame for feeling that we showcased a loss of control or external silent shaming from others. Either way we always felt compelled to be presentable and polished. The fact that my participants hid in bathrooms and cried behind closed doors illustrates that teachers showing grief at work is not acceptable.

The literature review also touched on several types of loss which ranged from pregnancy to parental loss. In the scope of this study, both myself and another participant had a perinatal loss. Another participant suffered from medical issues which prevent her from biologically being a mother, which continues to be a devastating loss for her. Corsini-Munt, Duhamel, Fleiszer, Gilbert, Lang, and Sword (2011) reasoned that prenatal loss can be categorized as ambiguous.
The ambiguity stems from not having a physical life that was lost; society does not always view perinatal losses as real because they are untraditional. Leon (2008) emphasized the grief and mourning of what could have been:

The raw material feeding the grieving process is scarce or absent after perinatal loss.

Grieving demands recollecting the sights, sounds, smells, and touch of the beloved—the favourite chair in which he would sit the sound of his laughter, and the image of his smile. When the unborn child dies, there is so little to grieve. . . . So much of perinatal loss involves grieving the loss of the future: relinquishing the wishes, hopes, and fantasies about one who could have been but never was (but briefly). (para 6)

One personal discovery that emerged indicated that when a teacher experiences a perinatal loss, it is difficult returning to work due to their proximity with children. In some professions it may be easier to have a disconnect, but when you work closely and have relationships with children, it is hard not to imagine what could have been. When I disclosed my loss to students, I did not expect them to understand the depth of what it was like seeing them every day. Even with my colleagues, I do not believe that they were thinking of how seeing classrooms full of students affected my mental fortitude each day. I speculate that a nurse in a perinatal unit who experienced a perinatal loss would be afforded a high level of empathy due to the loss of her infant. People around her would realize that since she works with babies and lost a baby, her work may prove to be difficult and challenging at times. Even consider a person who works with the elderly who recently lost their parent. I believe they would be given a greater amount of empathy as well due to the ages of their patients and their elderly parent. I felt that my loss wasn’t given the same level of empathetic thought because of the age difference with my baby and the ages of the children I worked with. However, when you think of perinatal loss as a
loss of the future, it should be understandable why an educator would struggle and be challenged
in the workplace. Those revelations occurred as a result of this study, and I would implore the
school community to do a better job of understanding what teachers with perinate losses or
issues of infertility go through mentally and psychologically in the days and months following a
loss or news of being unable to conceive.

Other losses in the literature review emphasized the severe detriment caused from the
loss of family members. Participants in my study lost their mothers, fathers, grandfather, uncle,
and brother. A search of parental loss will bring forth plenty of articles which focus on losing a
parent as a young age and losing a parent as an adult. The search of teachers and parental loss
populates plentiful responses as well, but most focus on how teachers assist students, and do not
focus on teacher’s personal losses. The majority of participants in my study had experienced a
loss of their parents, with most losing their mothers. Losing a mother has been linked to lower
levels of psychological wellness, which includes self-esteem and happiness, for both sons and
daughters (Marks, Jun, & Song, 2007). For Ms. Gray who lost her brother, she expressed how
one week she had her brother and then he was gone. She admitted that she was snippy and short
with colleagues when she came back, partly due to her not being able to take the sufficient time
she needed. Worden (2018) and Kübler-Ross (2016) inferred that there are different reactions
when a loved one passes away which can depend on the relationship, events surrounding the
death, the survivor’s personality, and the support system (Bodman, 2015). Some teachers
admitted that at times they had a lackadaisical attitude about their work and little faith in their
leaders. Ms. Dillard confided that when her father passed away, she did not even inform her
principal because they were not very close, and she did not think much of her. The principal
never did do much in terms of acknowledging the loss but did call to tell her that she had to
move classrooms. The teacher admitted that there was a definite lack of sensitivity and that was something that she never forgot. When another family passed, there still was a total lack of concern shown. Then with a new administrator, she did not even tell the principal her uncle had passed because she always seemed so busy anyway. The responses of the previous administrator and the district caused her to be resentful, angry, and distrusting of leadership.

I was shocked when I conducted searches for articles and noticed that there was a limited amount of studies which explore how death affects those at work. Alexanderson, Kjeldgard, Mittendorfer-Rutz, Runeson, and Wilcox (2015), found that most people will experience the death of a loved one while being employed. The scope of my study did not focus on the loss itself and the feelings surrounding the death, but more on how participants handled returning to work. Except for one, participants in the study did not feel that the bereavement policy at their place of employment was adequate. My research seems to indicate that it does not matter whether the death was expected; time to adjust was inadequate and did not help to ease the pain.

Regardless of the relationship, the expectance of death, or the age of the participant when their family member died, there was a notable disconnect with work expectations. One of the recurring trends that did emerge was that work provided a needed distraction for most participants. It was agreed and understood that more time would have made the transition easier when returning to work but being at work provided a needed distraction. There was no discussion of distractions within the literature researched, so this was a new finding. Educators admitted to some loss of focus, but that being forced to be present and in the moment in a highly demanding job helped in some ways to center them. With my first loss, I did not feel that work was a distraction which may have been in part to still having an office to shut myself off when and as needed. However, when I had to directly work with students, I was so busy with attending
to their needs, I did not find much time to grieve or show any loss. I do not believe that returning to work within a few days of a loss is the therapy that teachers desired. The pressure to perform compelled me to mask how I felt and was not the healthiest way to approach my loss. It would have been more beneficial to have someone at work to talk to, which was a sentiment shared by my interviewees.

A few of the participants requested an additional day or so, and in my case with my first loss, I took off a week. Upon my return I was physically present at work but closed myself off to be accessible to give myself more time to sort out my feelings and emotions. As I was interviewing, I was struck by how requests for a few days was met with scoffs from supervisors. To know a person for a lifetime and then lose them and be expected to get back to work within 5 days is absurd. My participants and myself felt emotionally drained and mentally absent having to return to work. The feedback from participants indicates that having a few more days off, would have been very impactful and put them in a better frame of mind. Currently there are no federal laws for bereavement leave and it is up to the discretion of each organization to make decisions regarding their policies. One of my participants described how when they were in a supervisory role, they were willing to adjust and do what was needed in order to make situations easier for their staff. Of course, the argument could be made that employees could take more time off, but that is usually unpaid which could case another element of distress. James and Friedman (2003) conducted a study that estimated employee grief cost around 75 billion dollars a year stemming from employees losing concentration, poor judgement, and injuries, so it would be fruitful if companies thought ahead about how they can circumvent these issues. In my study, participants felt that offering empathy training would go a long way to make employees feel valued. This empathy training could be a part of the onboarding process for new staff members
or be conducted at the beginning of the school year from a certified grief counselor. Part of that training would be understanding that educational staff may need more time off and not pressuring or guilting staff into returning too soon. Participants felt that a few extra days would have gone a long way towards getting them back on track at a faster rate.

**Limitations**

Autoethnography allows the audience to have greater insight into the topic of study than numbers. It provides a front row seat into the experiences of the researcher and the participants in the study. Nevertheless, the method comes with certain restrictions and limitations. One of the limitations of this study lies within the sampling of the participants. When considering the job performance of those in the education field, I focused on the positions that work closely with students daily, therefore classroom teachers, counselors, and administrators were all considered to participate. Even though the results are not generalizable, the findings may be transferable and add to improving school culture both at the district and building level in terms of increasing awareness about the impact that personal grief and loss has on teachers. However, I did feel dismissive of other staff members who work in the building that were not certified such as secretaries, paraprofessionals, and custodial staff. Their grief and loss is not lessened due to their positions, titles, and certifications. While their effects may be different than that of certified staff, their experiences still have meaning.

**Implication of the Results for Practice, Policy, and Theory**

The education industry is foundational on providing services to students and their families in order to help them to be successful. Decades ago, I think it would be safe to argue that initially, schools were solely focused on providing students with the skills they needed to succeed academically. The 3Rs—Reading, Writing, and Arithmetic—were the focus. Schools
now provide all types of services and supports to students to ensure that we are addressing all of a student’s basic, physiological, and self-fulfillment needs. We want to make sure that students are rested and fed when they are in class, and if they are not, we provide them with the opportunities to take naps and get snacks because we understand that a child will struggle with learning if they are tired or hungry. We make sure that students feel safe and secure so they can learn without fear. We have adopted social and emotional lessons to make sure that students know the benefits of working well with others and how they can have pride in themselves. All those fulfilled needs then lead students to feeling empowered and knowing they can conquer the world and achieve their destinies. And teachers are at the helm. Educators in the classroom are the driving forces ensuring that all these initiatives are being implemented. Every weekly grade level meeting, monthly staff meeting, and professional development day is all geared towards bettering students and supporting them with by any means necessary. Educators do all that for students because it is our passion, it is our job, and it is our duty.

With that being said, most of my participants, myself included, feel as if we are not cared about during our times of grief and loss. We do not feel that our basic needs are being met in terms of feeling cared for, appreciated, given the benefit of the doubt, and most importantly, having empathetic leaders that will understand the everyday struggle of being in the classroom and how those struggles become greater when compounded with grief and loss. While the administrators in the study felt that in their positions, they did a good job of providing support to staff, it occurred to me that the administrator narrative was the opposite of the educator one. I wondered why this disconnect was present and what could be done to change the story.

One policy that could be changed would be to restructure bereavement leave. Most organizations ranged from three to five days depending on the relationship of the deceased and
the survivor and the location of the funeral. In some cases, only a day is granted. Employees could always take extra days if they have the paid time off, but those requests were not always met with acceptance. Reading through a policy of one of the largest local districts in my state revealed that their bereavement leave policy was similar to most. Three to five days are given depending on the relationship with travel time is included and extended time from accrued paid time off.

Feedback from participants was clear that more time was needed. Teachers want the assurance that days will be there if they need them and that they will not be met with rejection or resistance if they need more time. There needs to be a compassionate and thoughtfully constructed plan and approach when considering bereavement plans. The 1996 Employment Rights Act, section 57 (A) gives employees the right to have a reasonable amount of time off following an event such as a death in the family. Again, since there is no law that mandates the time off for bereavement, three to five days was the standard for all participants. For a school district, leave is usually mandated at the Human Resources level and discretion is not given to individual schools. For the sake of being fair and unbiased towards individual employees, policies should remain at that level. However, schools should be able to extend more time because death isn’t a one size fits all occurrence and people will respond in different ways. At a minimum, those days should be paid and not counted against an employee’s paid time off.

The interviews were very telling that teachers just want to be heard. “Say something” was one of the remarks made and starting a genuine dialogue is a wonderful way to let employees know that they are cared for. Expressing condolences should be the first start, but again, it needs to be a genuine expression. Statements like “I would have called but I did not want to bother you” are insincere. While employees may be busy and grieving, a text message, email, or
voicemail would be appreciated. Employees need to know that their administrator took the time out of their day and initiated a heartfelt contact. One of the teachers in the study had commented that their principal did not immediately release them on the day of their loss. The teacher was taken aback by how the situation was handled and unfortunately it did put some strain on the relationship whether the principal knows it or not. It should be standard practice to release the bereaved person expeditiously and alleviate their concerns about work. The two participants who had positive experiences discussed how their admins took the time to say “I’m sorry” and told them not to worry about anything and took care of the details. These details included completing lesson plans, dividing students among other classes, and finding substitutes. Both administrators in the study stressed the importance of being willing to work with people if they need extra time and having their offices be places of refuge.

Another implication to policy is to have school staff partake in empathy training and awareness, which participants felt would go a long way in making employees feel valued, which coincided with the research (Bodman, 2015; Caballero et al., 2015, Kübler-Ross, 2005; Klass, 2014; Head, Lawson, & Zheng, 2015, Worden, 2018). This empathy training could be a part of the onboarding process for new staff members or be conducted at the beginning of the school year from a certified grief counselor with refresher sessions occurring each year. One of the administrators discussed her training as a grief minister and how that counseling training gave her a different perspective when helping people with a loss. She noted that one poignant moment for her was when she learned that offering a tissue when people cry could be a negative thing—handing someone a tissue when they cry is like telling them to clean up their mess and that you don’t want to see it. She also discussed that it is important to remember that grief has no timeline, so awareness is important when it comes to staff. She went on to offer that mandated
counseling was another way that staff can get support: Set up a date and time and make sure that an employee has a few sessions where they can talk to a counselor or therapist. The counseling would be required after the death of a loved one. Both administrators also noted that losing their parents was an experience that taught them more about how to approach and support others, especially for the administrator who did not get the support she needed. She has now made it a point to make sure her staff was not treated the way she was.

The framework used in this study was based on Worden’s four tasks of mourning. Worden’s (2009) framework provides tasks that are aimed at understanding the process of grief and loss. Worden focused on the mourning aspect which is how we adapt to the loss. Part of survivorship is being able to make the necessary adaptations in order to successfully overcome the challenges of loss. It takes a great amount of effort and dedication to not only understanding grief and the process of mourning but integrating oneself into a new life without our loved one in it. The tasks are not in any specific order and often there is a fluidity of moving back and forth through the tasks. Worden’s tasks are rooted in the attachments that we have as human beings and how we are affected when a loss occurs, and that attachment is severed. The findings in this study support these tasks as important tools to navigate through the grieving process.

The focus of this study was how educators navigated through the process of grief and loss and how it can affect job performance. The research conducted in this study brought personal experiences and feelings to the forefront. While there is not a lacking in the amount of death research, there was a gap concerning educators and how death affects their duties. Each participant shared a story of suppressing their emotional anguish while at work and feeling the need to have a great system of support. The data indicated that while educators move through these tasks at work seemingly unbothered on the exterior, there are internal struggles which
teachers endure while at work when healing after the loss of a loved one. The survivors in this study experienced grief on multiple levels: emotionally, cognitively, and physically. The obvious emotive reactions like crying were expected, but the teachers in my study also felt physical ailments like stomachaches and headache, cognitive issues like slower processing and decreased logic and reasoning, and anxiety which at times required medication.

The information garnered from this study provides evidence that teachers need additional supports while they are performing their duties at work. The interviews brought about a personal awareness regarding death and coping, and the data suggests that educators desire support when navigating through these tasks with each educator discussing the lack of school-based support systems. Participants expressed a desire to have professional counselors and therapists available for them, internal and external to the building, but also expressed a desire to have deeper empathetic relationships, places to grieve, and more time off for processing their loss. This study dually showcased the vulnerabilities of educators, but also the need for greater involvement in the school community when death effects its teachers.

**Recommendations for Further Research**

The choice was made to limit the sample of this autoethnographic study to educators who were classified as certified staff members. One recommendation would be to conduct a study which includes noncertified staff as well. Including all school staff members would bring forth deeper and richer data if the process of navigating grief and loss in the school community was researched in the future. In addition to focusing on all staff, I would also recommend that the study be limited to one school site and change the research method to a case study. While the data provided was insightful and added to the current body of knowledge, it would be impactful to focus on one school building to view how grief and loss affect a single site. The study focused
on American teachers at a Midwestern school, but the research could be expanded to explore bereavement in other cultures and countries.

**Conclusion**

During one of her TEDx talks in Houston, Brené Brown, a qualitative researcher made a remarked that resonated with me. She was feeling insecure about being labeled a storyteller for an upcoming event because it downplayed the seriousness of her work. She reminded herself that the label of storyteller was indeed true. “I thought, you know, I am a storyteller. I’m a qualitative researcher. I collect stories; that’s what I do. Maybe stories are just data with a soul. And maybe I’m just a storyteller” (Brown, 2010). I agree with her sentiments that stories are data with a soul because of the meaning and truths that are revealed as the story continues to unfold. An effective storyteller can draw people in, keep them fixated on what is being said, and at times evoke powerful emotions. I hope that I have written a piece of work that has done just that and will start a dialogue that will contribute towards a change in policies.

This study brought the issue of hiding grief and pain to light. The takeaway that most educators wanted people to know from this study is that they are not ok after the death of a loved one. Being forced to be strong and not show feelings has its emotional toll at work, but more importantly, it makes educators feel as though they are not genuinely cared for. All the educators I spoke to were very passionate about their profession and felt they gave all they had to students. They were saddened that when they needed the most understanding that same type of concern was not reciprocated. Educational leaders must be aware of how their actions and inactions can cause detriment to staff.

As educators reflected on what they wanted people to remember about educator grief and loss, here are some of the final commonly agreed upon points extracted from the interviews:
• People do not necessarily need you to show up at a funeral because they may not even know that you are there. What they need to know is that before and after a loss, when they see you in the workplace, that you were thinking of them and made an attempt to make them feel better.

• The interview has brought a new level of awareness and the need to be more cognizant and aware of what supports are given when a person experiences a loss. This experience also brought about the realization of what should be expected as an employee from my employer.

• In the long run if support is provided for the educators, it will be beneficial for students and teachers alike because teachers will be better equipped to embrace the process of grieving and loss. Educators will be able to provide support to students, but also know how to navigate the process for their own personal healing.

• We (the education community) must have a support system for dealing with death and other personal issues.

• Teachers take work home every day, so we are not getting downtime or self-care time. There are not enough conversations with how we can take care of ourselves and how our schools can take care of us. We must take care of our people if we expect to keep people to teach kids.

This journey began in a quest to understand how my experiences of losing a loved one have affected me personally and at work. While I may have gone through a process of grieving for numerous loved ones over the past several years, I had never taken the time to be reflective regarding my grief within the workplace, especially as a classroom teacher. As I conducted
interviews it became clear that many educators do not feel supported at work when the death of a loved one occurs. I was not expecting most of my participants to feel this way.

The school community must begin to view itself beyond being only sanctuaries for students, but for its teachers when it comes to recognizing the trauma that comes with losing a loved one. The findings are essential and valuable to constructing professional development training on how staff and school leaders can have a better understanding of grief and loss. Communication and flexibility with schedules are some of the main supports that teachers need in order to feel better equipped with returning to school at a high functioning level. Educators are expected to have rigorous lessons, exemplary classroom management, and great rapport with students and their families. So, when a death causes a derailment in a teacher’s life, there needs to be professional support systems in place.

This is the type of study that could be transferred and conducted at any place of employment. Death was the phenomenon that I chose, but a researcher could focus on personal illness, divorce, and maternity or paternity leave to uncover what their employees need during these life experiences and how to ensure employees remain thriving members at work. I thought that it was common sense on how to respond and treat a person when their loved one dies, but this experience has shown me that we all have room to grow and sometimes need direct help for how to be supportive of others. At some point, I would like to take Maslow’s hierarchy of needs and work with a group of teachers to explicitly name what specific supports are needed at each level to help adults navigate through our professional lives. For example, food and sleep are both at the foundation level of necessities, so maybe teachers need access to a wellness lounge where there are healthy snacks and comfortable places to get a 30-minute nap if they need it over their plan time. For the next level of safety, there is a focus on security of employment and of
resources where specific supports for some of life’s challenges would fall into. I believe that teachers would appreciate having access to supports and services which could include referrals of lawyers, counselors, and therapists. My hope is that our stories in this study have a positive impact on the school community and cause those at the leadership level to take another look at their policies and allocate provisions for teachers during their times of need.
References


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Appendix A: Consent Form

**Research Study Title:** Life After Death: An Autoethnography of a Teacher’s Journey Through Personal Grief and Loss  
**Principal Investigator:** Kimberlyn Y. Oliver  
**Research Institution:** Concordia University–Portland  
**Faculty Advisor:** Dr. Chris Jenkins

**Purpose and what you will be doing:**  
The purpose of this survey is to examine the experiences of educator’s personal grief and loss. We expect approximately eight to ten volunteers. No one will be paid to be in the study. We will begin enrollment on June 26, 2019 and end enrollment on July 28, 2019. To be in the study, you will participate in a one-on-one interview that may last approximately 60 to 90 minutes depending on the depth of responses. The location of the interviews will be in a mutual location. The interview should take one session to complete. In order to have accuracy of data, I would like your permission to audio record the interviews. The recordings will be deleted after transcription and member checking. Once the interview is completed, you will be given an opportunity to review the information for accuracy and clarification. The interviews will be transcribed for analysis and erased when the analysis portion of the study is complete. Participant data is retractable up until the point of analysis.

**Risks:**  
There are no risks to participating in this study other than providing your information. However, we will protect your information. Any personal information you provide will be coded so it cannot be linked to you. Any name or identifying information you give will be kept securely via electronic encryption and secured in a lock box. When we or any of our investigators look at the data, none of the data will have your name or identifying information. We will only use a secret code to analyze the data. A pseudonym will be used in the study to protect your identity. We will not identify you in any publication or report. Your information will be kept private at all times and then all study documents will be destroyed 3 years after we conclude this study. There is a minimal emotional risk due to the nature of the study and the emotions and experiences that may surface. I will have a list of grief and bereavement counselors and support group information available to you if you experience any type of emotional distress.

**Benefits:**  
Information you provide will help other educational professionals understand the challenges that are faced when processing personal grief and loss in the workplace. You could benefit this by adding to the existing knowledge that exists and provide insight to the school community as to what type of supports should be offered when educators return to work after experiencing a death in their family.

**Confidentiality:**  
This information will not be distributed to any other agency and will be kept private and confidential. The only exception to this is if you tell us abuse or neglect that makes us seriously concerned for your immediate health and safety.
Right to Withdraw:
Your participation is greatly appreciated, but we acknowledge that the questions we are asking are personal in nature. You are free at any point to choose not to engage with or stop the study. You may skip any questions you do not wish to answer. This study is not required and there is no penalty for not participating. If at any time you experience a negative emotion from answering the questions, we will stop asking you questions.

Contact Information:
You will receive a copy of this consent form. If you have questions you can talk to or write the principal investigator, Kimberlyn Oliver at [email redacted] or call [phone number redacted]. If you want to talk with a participant advocate other than the investigator, you can write or call the director of our institutional review board, Dr. OraLee Branch (email obranch@cuportland.edu or call 503-493-6390).

Your Statement of Consent:
I have read the above information. I asked questions if I had them, and my questions were answered. I volunteer my consent for this study.

_____________________________                   ___________
Participant Name                   Date

_____________________________                   ___________
Participant Signature                   Date

_____________________________                   ___________
Investigator Name                   Date

_____________________________                   ___________
Investigator Signature                   Date

Investigator: Kimberlyn Oliver
Email: [email redacted]
c/o: Professor Dr. Chris Jenkins
Concordia University – Portland
2811 NE Holman Street
Portland, Oregon  97221
Appendix B: Research Participant Request

Dear (Participant’s Name),

I am requesting your participation in my research study. My desire is that the stories of educational staff members process through grief and loss will bring about change in the school community. My research is autoethnographic in nature, meaning I will be discussing my own issues through journaling, memories, and reflection. I am interested in knowing if we share a similar experience in our grieving processes with the loss of a loved one. Each chapter of my study goes into detail which describes my reasoning for conducting this study, literature which details grief and loss, and my methodology. My final chapters will include a chapter which analyzes the interview data and report on the findings. My desire for this study derives from a lack of research and literature which discusses how educational staff members work through their personal grief and loss and continue with their work responsibilities. I want to be able to expound on our experiences and bring about the necessary provisions that support our need to grieve in a way where our grief does not have to be hidden and can be openly understood.

If you choose to participate in this study, please respond within 5 business days. Your participation is voluntary, and you may exit the study at any time if you feel uncomfortable. There will be no compensation for participation in the study. The process will include a one-on-one, face-to-face interview at the location of your choice. Upon agreeing to be interviewed, you are also consenting to allowing the interview to be audio recorded which will allow for information to be analyzed. Participants will be allowed to review the conversation for accuracy.

Thank you for reviewing this request. I appreciate your attentiveness to this matter and look forward to hearing from you soon.

Sincerely,

Kimberlyn Y. Oliver, Doctoral Candidate
Appendix C: Interview Questions

1. Tell me about your experience as an educational staff member (positions and years)?

2. Describe the experiences you have had pertaining to grief and loss while performing your duties as an educational staff member.

3. How did your loss affect your job performance?

4. Tell me about your experiences with hiding your grief and the freedom to express your feelings when needed while at work.

5. How did your school offer a place or refuge or distraction for those who were experiencing personal grief and loss?

6. What was your safe place when you needed (a room where you could go if needed to cry?)

7. Tell me about your administrators during your times of loss (personality, approachability, empathetic).

8. What type of support did you receive from colleagues?

9. If students and parents were made aware of your loss, how did that happen and in what ways did they offer support?

10. Describe any moments when you felt judged during your time of bereavement.

11. What are some reasons why it may be challenging to discuss issues of grief and loss in a school environment?

12. How can the school community offer more support to assist staff in personal grief and loss?
Additional questions:

What do you want the school community to know regarding death and loss and how it affects educators?

For administrators only:

How do you feel you support teachers when they are working through their grief and loss?
Appendix D: Grief/Depression Assessment Inventory

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There are a series of paragraphs below that are paired: One describes how a person who is depressed might respond, the other a person who is actively grieving an important loss or life change. For each paragraph, check the statement that best describes your response. Not all the statements will apply. You may wish to underline statements within a question that do apply. At the end choose which of the two paragraphs comes closer to describing your present state: grieving, depression, both, or neither. Sometimes you’ll choose neither. Sometimes, it might be both. By the end of the inventory, you’ll have an idea whether you are grieving, depressed, or experiencing some of both.

This inventory should NOT be used in place of more comprehensive diagnostic methods, nor is it intended to provide a professional diagnosis.

If there has been a loss or a significant change in your life, how long ago did it occur or begin to affect you?
■ A week or less.
■ Less than a month.
■ One month to six months.
■ Seven months to a year.
■ Less than two years.
■ Two to five years.
■ More than five years.
■ It happened while I was growing up.

The loss(es) were:
■ One(s) I could anticipate.
■ Sudden and unexpected.
■ Due to a chronic situation / condition.
■ Caused by a traumatic event(s).

1. How have you experienced this loss or a significant change?
   **Grief:** The way I am feeling makes sense in light of what has happened. These losses or changes are the sources of what I am going through. Others have validated my losses.

   **Depression:** I don’t understand why I am feeling this way. Nothing makes sense. No one considers what has happened as deserving of a second thought or any feelings on my part. I am not sure myself whether a loss has occurred.

   For me this item is most like:
   ■ Grief    ■ Depression    ■ Both    ■ Neither
2. How have you been behaving since this began?
   **Grief:** I am easily distracted. I wish I looked better. Sometimes I look better than I feel. Sometimes I feel better than I look. Some people have avoided me since this loss. Others have been insensitive. I am more cautious. I am aware of life’s fragility as a result of what has happened.
   I have tried to lose myself in my job, hobbies, and sports or in caring for my children but it doesn’t always work. At times I prefer to be alone. At times, I feel lonely even when I am with others. Being with others can wear me out. It is an effort to do things.

   **Depression:** I am often preoccupied. I don’t care how I look—*or*, I have to look perfect or else I feel terrible. Nobody suspects or for that matter really cares how I am really doing. Danger makes me feel real *or* I don’t take any risks. I refuse to take antidepressants. I don’t always take my antidepressants *or* I can’t function without my antidepressants.
   Work/my children is/are my life. I keep busy all the time *or* I can’t find anything to occupy me. I constantly watch television. I hate being alone *or* I hate being with others. I don’t see the point in trying.

   For me this item is most like:
   ■ Grief ■ Depression ■ Both ■ Neither

3. How has your thinking been affected?
   **Grief:** It’s hard to concentrate but I can if I have to. Sometimes I don’t know how I got somewhere. Time drags. There are times when I am startled that time has passed. I avoid listening to the radio or watching TV, for fear it will remind me about what happened. At times, I can think about other things than this—only to find myself right back in it. I’ve lost the best part of me. If only I had been able to do something different, this would not have happened.
   Nothing can ever bring back what I have lost. I am often aware of what I have lost or what has changed. I am often preoccupied with the thoughts and memories associated with my loss. Just when I think it couldn’t get any worse, it does.

   **Depression:** I am so preoccupied I can lose days or weeks. The newspaper/TV seems unreal, like I am in another world from it. I can’t stop thinking about why this has happened to me. This proves how worthless I am. I am to blame for what has happened. Someone must be punished for this. I will not rest until that happens.
   I operate as if nothing has changed. I don’t think about it if I can help it. Thinking makes me feel worse. Things always get worse.

   For me this item is most like:
   ■ Grief ■ Depression ■ Both ■ Neither
4. How have your feelings been affected?

**Grief:** My heart feels broken. I can get very angry about this. I can be very sad. The tears are hard to stop. At times I am so upset I could throw up. I yearn to be able to love again. There are times when I can laugh. I can feel joy. There are times when my feelings overwhelm me. There are times when I feel better. Sometimes my feelings are so intense I’m not sure I can stay with them. I am ashamed because of what happened and how I reacted to it. I feel numb. I have a hard time being around others. There are times when I feel better. Sometimes my feelings are so intense I’m not sure I can stay with them. I am ashamed because of what happened and how I reacted to it. I feel numb. I have a hard time being around others. There are times when I feel terrific. There are times when I feel love.

**Depression:** I am not angry. I shouldn’t feel angry. I don’t cry. I don’t feel sad. I have no right to feel sad. It’s best not to get upset. There’s nothing to be upset about. I know I will never be able to love again. I feel down when others seem happy. I wouldn’t know what joy or happiness is. I avoid feeling anything about this. I never feel better. If I let myself I would get so upset I couldn’t stand it. I could never admit how badly I’ve reacted to all this. I feel nothing. I never feel terrific. I never feel love.

For me this item is most like:
- [ ] Grief
- [ ] Depression
- [ ] Both
- [ ] Neither

5. How do you feel physically?

**Grief:** I can start out a day feeling OK, and get wiped out during the day. Any sustained effort exhausts me. I feel lethargic, totally drained, lacking in energy. I have a hard time concentrating for more than a few minutes at a time. It’s hard to go to sleep. I have trouble staying asleep. My heart hurts. I can’t get enough rest. I feel better after I exercise. I do better when I’m active. I’ve never felt/looked better. I don’t pay attention to what I’m eating. Sometimes I don’t feel like eating. I’ve felt nauseous after I eat. I don’t feel like eating but make myself at times. Eating helps me escape. How well I eat makes a difference. I have lost weight since this loss. I have gained weight since this loss. Drinking can give me temporary relief. I watch how much I drink. I’d rather not be taking drugs. The escapes I find are only temporary sources of relief. Prescription drugs for depression give me clarity about what I am dealing with.

**Depression:** I have no energy. I am in always in a fog or twilight zone. I can’t seem to sleep more than four hours a night. I sleep more than ten hours every night. I always feel exhausted. I exercise constantly (more than two hours a day) or I don’t exercise at all. I’ve never looked/felt worse. I don’t care if I eat too much. I don’t care if I don’t eat. I throw up what I eat. I weigh less than I ever have. I weigh more than I ever have.

For me this item is most like:
- [ ] Grief
- [ ] Depression
- [ ] Both
- [ ] Neither
6. How do you feel pain and pleasure?

**Grief:** The pain comes and goes. When it is bad, it has never been worse. There are times when I don’t seem to enjoy anything, but at other times I’m OK. There are times when something that is ordinarily pleasurable gives me pain. I feel more relief from the pain than real pleasure. Except when I am reminded of my loss, I can enjoy life. I have a sense of humor. My sense of humor can be pretty dark these days. I can laugh. I enjoy being in nature. I watch sunsets and/or sunrises. Sometimes a time of joy produces tears and sadness.

**Depression:** I drink alcohol to drown the pain. I use drugs to escape. The only time I feel OK or can escape the pain is when I’m drinking/taking drugs. I’m sick a lot. I am in pain a lot. I can’t remember the last time I really enjoyed anything. When I have sex it feels like I can escape my problems temporarily. Pleasure is not a part of my life. I feel numb. Nothing seems funny. I have an especially hard time when others have fun.

For me this item is most like:
- Grief
- Depression
- Both
- Neither

7. How has this affected you spiritually?

**Grief:** I pray for strength to get me through this. I wonder if there is any hope for me. This loss seems so unfair. I am angry with God. I was naive to think this couldn’t happen. I have lost my sense of innocence. I am confused by what this means. I have lost something essential. My life story has lost its thread of meaning. It’s hard to imagine life ever having meaning again. My religious faith (God) is getting me through this or I’m changing (or know I must change) some of my most cherished beliefs—perhaps even my religion. I don’t know if I can ever be forgiven for this—or—if I can ever forgive others. I do believe forgiveness is possible. Forgiveness would require the grace of God—or something equally miraculous. I feel connected to something beyond me—e.g., a Higher Power, God (or love). Getting through this will heal me—something better lies ahead. Being in nature restores my soul. Sometimes I lose sight of my faith—but I am sustain by knowing others believe in me. I don’t yet know what meaning this loss has.

**Depression:** My life is hopeless. I am a broken person. I am being punished. This proves how worthless I am. Nothing meaningful can come from this. What has happened is totally unfair. God is punishing me. I deserve to go to hell. I had it coming or I don’t deserve this. I find no comfort in prayer or religion.

I can never forgive. I can never be forgiven. I can’t accept why this has happened to me. My beliefs have not given me any answers.

For me this item is most like:
- Grief
- Depression
- Both
- Neither
8. **What are your dreams like?**  
**Grief:** I dream a lot but I don’t usually remember them. I long to dream of the one I lost but can’t. I’ve been too tired to dream. It’s only in my dreams that I seem to be dealing with this. My dreams since the loss are vivid and clear, and they are often comforting. They make it easier to understand what has happened. In my fantasies, I remain connected to the person/object I lost. I have “imaginary” conversations (daydreams) with the one I lost. 

**Depression:** I don’t dream. When I do dream, I have nightmares. My dreams about the loss are disturbing. I dream of the destruction of the one I lost. My dreams actually keep me from sleeping. Voices from my loss can tell me to do things I ordinarily wouldn’t do.

For me this item is most like:  
■ Grief ■ Depression ■ Both ■ Neither

9. **How has this affected how you feel about yourself?**  
**Grief:** This loss has put me in touch with my “best self.” It has caused me to question some of my values and beliefs. There are things about this loss that I need to process. There are some things I need to rectify. I’ve alienated people I wish I could reconnect with. I have been hurt by other’s insensitivity. I have hurt others by being preoccupied. This loss has more meaning to me than others acknowledge. I am doing the best I can. I have been deeply moved by how some people have supported me. I am at peace with myself.

**Depression:** I don’t care what happens. I’ve not been myself—I can’t seem to do what I need to do. I can’t seem to snap out of it. People have injured me since this loss. Those I have injured could never forgive me. There is nothing meaningful about this. I can’t deal with it. Generally, other people don’t affect me. If people really knew me, they wouldn’t like me. I resent people trying to get me to feel better or to give up what they think are my bad habits or my self-destructiveness. Life is sheer torture to me.

For me this item is most like:  
■ Grief ■ Depression ■ Both ■ Neither
10. What kinds of support do you have?

Grief: I feel comforted when I’m with sympathetic people. I get uncomfortable when the conversation centers on me. I respond when someone is warm, persistent, and reassuring. I enjoy listening to others. Sometimes I feel like I talk too much. Sometimes I am vulnerable in ways I wouldn’t be otherwise. At times I appreciate being left alone. If someone has a good heart, I can overlook faults. I have lost some old friends. I am reassured by the presence of friends who will listen to my story. I feel connected to people with similar losses. I’ve made new friends who accept me as I am. I miss being loved or opportunities to love. I am in love again.

Depression: I say things to get others off my back. I never talk about what happened. I deliberately hurt others. I want others to suffer as much as I have. Others take advantage of me. When I’m alone, I feel frightened and abandoned. I hate being around people who are optimistic and superficial. I find it impossible to tolerate mistakes or incompetence. Others don’t care. I wear people out—they get irritable with me. People get angry with me. I have been assaulted verbally and/or physically. No one listens to my story. I feel disconnected. I’ve worn out my support system. I don’t have a support system. I feel unloved. It’s better to be punished than ignored. I feel incapable of loving anyone.

For me this item is most like:
- Grief
- Depression
- Both
- Neither

11. How has this affected your will to live?

Grief: If life were to continue like this, it wouldn’t be worth living. I have thought of what it would take to not to have this pain. I would not commit suicide because of this: My religious beliefs, the effect my death would have on the people who love me or having a something to live for keeps me going.

Depression: I’m looking for a way out. I cannot say I wouldn’t commit suicide. I have nothing to live for. Life isn’t worth living. Others would be better off without me. I deserve to die.

For me this item is most like:
- Grief
- Depression
- Both
- Neither
### How To Calculate Your Profile

Repeat below your responses to each of the items above. Total your checks in each section and find the total below: Life After Death_Oliver_20200122

<table>
<thead>
<tr>
<th>Item</th>
<th>Grief</th>
<th>Depression</th>
<th>Both</th>
<th>Neither</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Loss</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Behaving</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Thinking</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Feeling</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Physical</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Pain and Pleasure</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Spiritual</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Dreams</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Self</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>10. Support</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Will-to-Live</td>
<td></td>
<td>*</td>
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</tbody>
</table>

### Totals

|       |            |            |      |         |

### How To Interpret Your Scores

**Uncomplicated grief:** If you scored “grief” in all areas, you are clearly grieving normally, and probably do not need professional help, although you may wish to talk with someone.

**Complicated grief:** If you score mostly for “grief,” but also have some “depression” items checked in any area, you should consult with your family doctor, therapist, or clergy.

**Depression:** If most items are checked as “depression,” professional help is highly recommended.

**Notes:**

* **Item 11:** If you checked “depression” on “Will to Live,” professional help is urgently recommended.

If this way of responding to your loss(es) has lasted less than six months, it is natural for both grief and depression to be present. If your loss and your reaction to it has lasted longer than six months, depression items should have diminished.

These guidelines usually apply only to losses that were anticipated. Traumatizing losses will take longer (multiply by years). Also multiple losses will take longer as well (each loss x six months or more, though time is not an accurate measure.) Sudden losses also can take much longer. Chronic health conditions produce chronic grief, so little diminishing will be seen over time. However, in any of these situations, being able to “look good” to others can begin to appear after six months, and some progress can be noted in moving from the “depression” items even if it’s at a slower pace.
### Appendix E: in Vivo codes derived from one-on-one interviews

<table>
<thead>
<tr>
<th>Depression</th>
<th>Put on a show</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coping</td>
<td>Be brave</td>
</tr>
<tr>
<td>Lack of concern</td>
<td>Not allowed to be human</td>
</tr>
<tr>
<td>Not empathetic</td>
<td>Expected to be inhumane</td>
</tr>
<tr>
<td>Don’t understand</td>
<td>Mental health is important</td>
</tr>
<tr>
<td>Not enough time off to grieve</td>
<td>Focus all on the kids</td>
</tr>
<tr>
<td>Suck it up</td>
<td>Tried my best</td>
</tr>
<tr>
<td>Hide emotions</td>
<td>Did not show emotions at work</td>
</tr>
<tr>
<td>Auto-pilot</td>
<td>Can’t cry in front of students</td>
</tr>
<tr>
<td>No place to go</td>
<td>Physical stress</td>
</tr>
<tr>
<td>Bathroom grief</td>
<td>Anxiety</td>
</tr>
<tr>
<td>Kids were more sensitive than staff</td>
<td>Weak</td>
</tr>
<tr>
<td>Have to do better</td>
<td>Student centered trauma care-not the adults</td>
</tr>
<tr>
<td>Teacher care</td>
<td>Stomachache</td>
</tr>
<tr>
<td>Self-care</td>
<td>Hostile environment</td>
</tr>
<tr>
<td>More time off</td>
<td>Angry teachers</td>
</tr>
<tr>
<td>Not focused</td>
<td>Unpaid leave sucks</td>
</tr>
<tr>
<td>Say something</td>
<td>Don’t worry about a thing</td>
</tr>
<tr>
<td>Connection</td>
<td>Breakdown</td>
</tr>
<tr>
<td>Struggle</td>
<td>Colleague support</td>
</tr>
<tr>
<td>Emotions not ok to show</td>
<td>Panicking about where will I go</td>
</tr>
<tr>
<td>Balance</td>
<td>Insensitive admin</td>
</tr>
<tr>
<td>My values changed</td>
<td>Worry</td>
</tr>
<tr>
<td>-------------------</td>
<td>------</td>
</tr>
<tr>
<td>Counseling</td>
<td>Non-sympathetic</td>
</tr>
<tr>
<td>Bias</td>
<td>“I lost my _______ too”</td>
</tr>
<tr>
<td>Teach empathy</td>
<td>Physically ill</td>
</tr>
<tr>
<td>Training for admins</td>
<td>Admin was good to me</td>
</tr>
<tr>
<td>Disingenuine</td>
<td>Did not feel worried</td>
</tr>
<tr>
<td>Avoidance</td>
<td>Supervisor covered for me</td>
</tr>
<tr>
<td>Uncomfortable</td>
<td>Similar stories</td>
</tr>
<tr>
<td>Zoned out</td>
<td>No one checked on me personally</td>
</tr>
<tr>
<td>Counseling with strangers</td>
<td>Need more people to be supportive</td>
</tr>
<tr>
<td>EAP</td>
<td>More resources</td>
</tr>
<tr>
<td>Pressure for lesson plans</td>
<td>Pressure to be there</td>
</tr>
<tr>
<td>No acknowledgement</td>
<td>Needed to be off-premonition</td>
</tr>
<tr>
<td>Need time after the service</td>
<td>No follow up afterwards</td>
</tr>
<tr>
<td>I was numb when I returned</td>
<td>Loss of pay</td>
</tr>
<tr>
<td>Did not give a shit about what was going on</td>
<td>Private person</td>
</tr>
<tr>
<td>Busy work for the students</td>
<td></td>
</tr>
</tbody>
</table>
Appendix G: Statement of Original Work

The Concordia University Doctorate of Education Program is a collaborative community of scholar-practitioners, who seek to transform society by pursuing ethically-informed, rigorously-researched, inquiry-based projects that benefit professional, institutional, and local educational contexts. Each member of the community affirms throughout their program of study, adherence to the principles and standards outlined in the Concordia University Academic Integrity Policy. This policy states the following:

Statement of academic integrity.

As a member of the Concordia University community, I will neither engage in fraudulent or unauthorized behaviors in the presentation and completion of my work, nor will I provide unauthorized assistance to others.

Explanations:

*What does “fraudulent” mean?*

“Fraudulent” work is any material submitted for evaluation that is falsely or improperly presented as one’s own. This includes, but is not limited to texts, graphics and other multi-media files appropriated from any source, including another individual, that are intentionally presented as all or part of a candidate’s final work without full and complete documentation.

*What is “unauthorized” assistance?*

“Unauthorized assistance” refers to any support candidates solicit in the completion of their work, that has not been either explicitly specified as appropriate by the instructor, or any assistance that is understood in the class context as inappropriate. This can include, but is not limited to:

- Use of unauthorized notes or another’s work during an online test
- Use of unauthorized notes or personal assistance in an online exam setting
- Inappropriate collaboration in preparation and/or completion of a project
- Unauthorized solicitation of professional resources for the completion of the work.
Statement of Original Work (Continued)

I attest that:

1. I have read, understood, and complied with all aspects of the Concordia University–Portland Academic Integrity Policy during the development and writing of this dissertation.

2. Where information and/or materials from outside sources has been used in the production of this dissertation, all information and/or materials from outside sources has been properly referenced and all permissions required for use of the information and/or materials have been obtained, in accordance with research standards outlined in the *Publication Manual of The American Psychological Association.*

Kimberlyn Y. Oliver

Digital Signature

Kimberlyn Y. Oliver

Name (Typed)

December 3, 2019

Date