

**LOSS AND RESTORATION IN LATER LIFE:  
AN EXAMINATION OF DUAL PROCESS MODEL  
OF COPING WITH BEREAVEMENT\***

**KATE M. BENNETT**

**KERRY GIBBONS**

**SUZANNA MACKENZIE-SMITH**

*University of Liverpool, United Kingdom*

**ABSTRACT**

The Dual Process Model (DPM) of Coping with Bereavement identified two oscillating coping processes, loss and restoration (Stroebe & Schut, 1999). The utility of the model is investigated in two studies. In the first, we carried out secondary analyses on a large-scale qualitative study that we had conducted previously. In the second, we conducted a small-scale study specifically examining the DPM. In the first study we re-examined the interviews for Loss- (LO) and Restoration-Oriented (RO) Coping and examined whether these were associated with psychological adjustment. The results showed that those adjusting well reported the stressors New Roles/Identities/ Relationships and Intrusion of Grief significantly more. Those adjusting less well reported the stressors Denial/Avoidance of Restoration Changes and Distraction/Avoidance of Grief significantly more. In the second study, we asked participants about four RO stressors of the DPM: Attending to Life

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Changes; New Roles/Identities/Relationships; Distraction from Grief; and New Activities. These data showed that not all participants experienced all aspects of RO Coping. In particular, participants had diverse views about the utility of Distraction from Grief as a coping mechanism. The article concludes by discussing the challenges of testing the DPM empirically.

Over recent years researchers have debated the efficacy of traditional models of bereavement (Bennett & Bennett, 2000-2001; Footman, 1998; Walter, 1996). At the same time those working in the field of stress have developed models to explain how people cope with life events in general (Carver, Scheier, & Weintraub, 1989; Lazarus & Folkman, 1984; Moos, 1995). Until 1999 these two areas of research proceeded independently even though bereavement is a subset of life events. However, in 1999, Stroebe and Schut published their DPM that aimed to address deficits in both areas. In this issue they describe the model in detail.

Relatively few studies have examined the DPM empirically (Richardson & Balaswamy, 2001; Richardson, 2007). Richardson and Balaswamy (2001) examined the model in a sample of older widowed men during the second year of their bereavement. They found that both Loss- (LO) and Restoration-Oriented (RO) stressors were important. The former were more important nearer the time of bereavement and influenced negative affect. On the other hand, RO stressors were more relevant later and were often associated with positive affect. In addition, the circumstances of the death were also significant in adjustment, an aspect not accounted for by the DPM. More recently, Richardson (2007) studied older widows and widowers over a longer timeframe. She confirmed that both LO and RO coping were important throughout bereavement. She found a negative relationship between rumination and affect and argued that it was important to help widowed people distinguish between constructive and destructive grief work. Finally, she suggested that widowed people needed to balance out LO and RO activities; a focus on one over and above the other might be problematic for recovery. An important question which researchers have so far been unable to address is whether there is an optimal balance between LO and RO coping, and if so, does that balance change over time? A second question, that researchers do not yet know the answer to, is whether there are optimal degrees of LO or RO coping at different points during the course of bereavement.

Lund, Caserta, de Vries, and Wright (2004) have also considered the DPM therapeutically. They developed a 14-week intervention tailored around LO and RO coping. Their proposed sessions included discussions about the physical, cognitive, and behavioral aspects of grief through to the management of household, motorcar, and nutritional responsibilities. The former discussions focus on LO, while the latter focus on RO. In 2004, they had been awarded funds to test this intervention but as yet there has been no published account of the

empirical results. These are eagerly anticipated and an update is presented in this issue. In addition, using the DPM as a theoretical basis Caserta and Lund (2007) developed the Inventory of Daily Widowed Life, which had both LO and RO subscales. They found that those more recently widowed experienced greater oscillation, while those bereaved for longer experienced more RO coping than LO coping.

In 2005, Shear, Frank, Houck, and Reynolds also used the DPM as the basis for their randomized control trial of treatment for complicated grief. In their complicated grief treatment not only did they focus on grief but they also focused on personal life goals, therefore addressing both LO and RO coping. Their results showed that this approach was more effective than an interpersonal psychotherapy intervention (see also this issue).

Recently, Stroebe, Folkman, Hansson, and Schut (2006) have proposed a framework which integrates both the DPM and Cognitive Stress Theory (Lazarus & Folkman, 1984). Their aim is to enhance the understanding of risk factors in adaptation to bereavement. They suggest that using this framework may enable clinicians to focus on those people who are at risk of serious reactions to bereavement and recognize that for most people bereavement does not require intervention. They also hope that this approach may be of benefit to theoreticians in enabling them to test their hypotheses more effectively. As yet this approach has not been tested empirically.

In two earlier papers we established that it was possible to distinguish between those participants who demonstrated good psychological adjustment (the term coping well was used in the original paper) and those who did not (Bennett, Hughes, & Smith, 2005a, 2005b). In our 2005a paper we found that those who were less well adjusted had more depressive feelings than those who were more well adjusted. In the 2005b paper we showed that talking to one's dead spouse was associated with good adjustment, while keeping oneself to oneself was associated with poor adjustment. In addition, we also found that there were three behaviors that showed an adjustment and gender interaction. Men were more likely to adjust better if they described themselves as "selfish" and as "upset," women were more likely to adjust better if they described themselves as being comfortable "alone."

Here we present two studies. The first re-examines this earlier data in the light of the DPM. Codes that reflect the components of LO and RO coping are examined to see whether they are associated with psychological adjustment. We would predict, based on earlier work, that some stressors such as Doing New Things and Breaking Bonds/Ties/Relocation are common to most bereaved people. On the other hand, we would predict that those engaged in Distraction from Grief or in Denial/Avoidance of Restoration Changes would be less well adjusted, and those with New Roles/Identities/Relationships would be more likely to be well adjusted. In the second study, we focus only on RO stressors to provide an in-depth understanding of how these are incorporated into the daily lives of older widows.

## STUDY 1

### Method

#### *Participants*

The participants were 46 widowed men (only 45 of whom were interviewed) and 46 women. In the analyses presented here, one woman was excluded since she had been widowed for 60 years. The remaining participants were aged between 55 and 95 years (mean = 74), living in Merseyside, United Kingdom. They had been widowed between 3 months to 32 years (mean 8.68 years). Although, some had been widowed for several years, we decided not to exclude them because our previous work has suggested that the effects of bereavement last for a longer time than has previously been found and even those widowed for a long time may still be making RO adjustments (Bennett, 1997; Davidson, 1999; Moore & Stratton, 2003). Demographic details are summarized in Table 1 and include information concerning the excluded woman for consistency with other papers published from the study.

#### *Recruitment*

The research team communicated the aims of the Older Widowed Men and Women Project to a diverse range of formal and informal groups of older people. We also made contact with other welfare organizations and agencies, social services, and sheltered housing schemes, through which links with widowed people were established. The local ethics committee approved the study and confidentiality and anonymity were assured. Names have been changed to preserve anonymity.

Table 1. Demographic Data by Gender of Study 1 Participants

	Mean	Standard deviation	Range
Women (n = 46)			
Age	73.29	8.93	57-95
Years married	35.75	10.70	2-63
Years bereaved	10.94	1.72	1-60
Men (n = 46)			
Age	75.02	7.88	55-93
Years married	39.37	12.97	5-63
Years bereaved	8.18	6.72	0.25-25

*The Interview*

We tape-recorded the semi-structured interviews that lasted from 45 minutes to 1½ hours, conducted in the respondents' own homes. Respondents gave informed consent. The interview was not prescriptive; the aim was to learn from the widowed people what was important to them. The approach was "I am the novice and you have the experience." The interview schedule consisted of seven parts. The first part contained factual questions concerning age, length of marriage, widowhood, and family relations, followed by four sections inquiring about the widowed person's life at various times. The first of these addressed married life before the death of the spouse, asking questions about hobbies, division of labor, and marital quality. The second section asked about the time around the death of the spouse. They were asked to describe what a typical day had been like after the death, what support they had, and how they had felt. They were then asked what they did and how they felt 1 year on. They were asked how their lives had changed by then, what a typical day was like at that stage, whether they were now doing anything new, and in what ways (if any) their feelings had changed. The fifth section asked what their lives were like at the present time. Questions related to what they did with their time, how they felt about their widowhood, how their lives had changed, and what their emotions were.

**Comment on the Method**

There are two potential disadvantages with this type of retrospective interview. First, it assumes that widowed people accurately recall the events surrounding and following the deaths of their spouses. Second, recall may be subjective and dependent on the individual experiences of the bereaved, and may indeed differ from the recollections of bereaved children, for example. However, it is difficult to obtain contemporaneous qualitative accounts of these experiences, particularly in relationship to those that occur very close to the death, for both practical and ethical reasons. We have also found that respondents appear to have detailed recollections about some events, such as those leading up to the death, and poor or non-existent recollections of the events immediately after the death—participants report that these events are often a "blur" (Bennett & Vidal-Hall, 2000). It is also the case that it is the participant's subjective experience that is of interest: there is a great deal of evidence, for example, that subjective rather than objective measures of health are better predictors of mortality (Benyamini, Blumstein, Lusky, & Modan, 2003). The lived experience of the bereaved is important in understanding the DPM, and in particular in the context of its relationship to wellbeing and adjustment. Another potential disadvantage of the method is the variety of length of times since bereavement that are used in the study. As mentioned earlier, other authors have also found that there is great variation in the impact that time since bereavement has on widowed people's lives. If we were to confine our data collection to those bereaved within, for example 2 years

(as many studies do, see Zisook, Paulus, Shuchter, & Judd, 1997), we might miss important bereavement experiences that occur much later than others have suggested (Bennett, 1997; Davidson, 1999; Moore & Stratton, 2003).

### *Analysis*

Two members of the original research team coded the interviews using grounded theory and content analysis methods (Bennett & Vidal-Hall, 2000; Charmaz, 1995; Glaser & Strauss, 1969; Smith, 1995). Each transcript was first read through in its entirety to gain an impression of the interview. It was then re-read line-by-line and coded. This process was reflexive; as new topics emerged they were looked for in earlier parts of the interview. Examples of coded topics include: guilt, independence, presentation of husband, quality of marriage, and death narrative. The transcripts were further examined for broader themes. A number were common to all the interviews and these included: the domain of death, the social domain, the emotional domain and the domain of time. Brief memos were written for each interview (see also Bennett & Vidal-Hall, 2000). In addition reliability checks were undertaken. The reliability was found to be satisfactory. A total of 311 codes emerged from analysis of the 91 interviews. Reliability was assessed and agreement was found to be 80% between the coders. This article focuses on codes relevant to the DPM (Stroebe & Schut, 1999). An initial trawl of the codes suggested that 56 might be relevant. Careful reading of the texts suggested that 44 described aspects of DPM. These codes were then assigned to the nine individual aspects of LO stressors (Grief Work; Intrusion of Grief; Breaking Bonds/Ties/Relocation; and Denial/Avoidance of Restoration Changes) and RO stressors (Attending to Life Changes; Doing New Things; Distraction from Grief; Denial/Avoidance of Grief; and New Roles/Identities/Relationships). Finally, the frequency with which each of the nine stressors occurred was calculated.

We assessed psychological adjustment by expert reading of the interviews and assessment of non-verbal aspects of the interview. For example, coders looked for reports of medication, contact with primary care, not coping. In addition, the non-verbal content of the interviews was taken into account. If a participant mentioned specifically that they were not coping, they were classified as not adjusting well. They were classified either as psychologically well-adjusted or not (and in previous work as good copers or poor copers). Characteristically, people showing good adjustment had developed a life without their spouse, were not unduly distressed during the interview, were able to discuss the issues surrounding their bereavement and widowhood in positive as well as negative terms, and described the events surrounding their bereavement with a degree of distance (see also Bennett et al., 2005a, 2005b). Two members of the team made the assessment, again by reading the transcripts independently, and agreement was found to be 95%. The interviews where there was not agreement were sent to the third member of the team for final decision.

We used chi-square analysis to test whether particular stressors were more common among those with good or poor adjustment.

## Results

Table 2 shows the frequency table and  $\chi^2$  for LO and RO coping. Only two LO stressors differentiated between good and poor adjustment. Significantly more people with good adjustment reported the stressor Intrusion of Grief than those with poor adjustment ( $\chi^2 = 6.58, p \leq .001$ ) and the reverse was true for Denial/Avoidance of Restoration Changes ( $\chi^2 = 16.68, p \leq .001$ ). In addition, it is worth noting that the majority of respondents reported Breaking Bonds/Ties/Relocation. On the other hand, relatively few reported Grief Work. There were two RO stressors that differentiated between good and poor adjustment. More people with good adjustment reported New Roles/Identities/Relationships ( $\chi^2 = 5.42, p \leq .02$ ) more often and those with poor adjustment reported the stressor Distraction from Grief more frequently ( $\chi^2 = 4.05, p \leq .04$ ). Many participants reported the stressors Doing New Things and Avoidance/Denial of Grief.

We were also interested in seeing whether we could use this data to begin to assess oscillation. As a starting point we began by calculating how many participants experienced both LO and RO coping. We suggest that those people who reported only one type of coping were unlikely to be oscillating. Twelve participants were, therefore, identified as not oscillating. Eleven of those did not experience LO coping, and only one did not experience RO coping. The remaining 79 did experience both RO and LO coping, therefore, could have experienced oscillation (87%). We then calculated whether experiencing oscillation was significantly associated with good psychological adjustment but we did not find a significant association (Fisher's exact test:  $p = .67$ ). Our analysis is not as refined as that conducted by Caserta and Lund (2007), and as they point out it is likely that oscillation is complex, multi-dimensional, and dynamic. Nevertheless, these analyses suggest that oscillation, or something resembling it, is common among widowed people.

## STUDY 2

### Method

#### *Participants*

Thirteen widowed women were interviewed in this small-scale study (one widow was excluded because she had been widowed for 25 years). These widows had been widowed from 1.5 to 16 years (mean 7 years) and were aged from 51 to 85 (mean 70 years) (see Table 3). The sample was an opportunity sample recruited both from the NW of England and the South of England. The University of Liverpool's Research Governance Committee approved study and confidentiality and anonymity were assured. Names have been changed to preserve anonymity.

Table 2. Chi-Square Analysis of Coping and Use of Dual Process Model Categories from Study 1

Use of Dual Process Model Categories	Coping		$\chi^2$	<i>p</i>	Overall % of participants using strategy
	Yes	No			
Loss-Oriented					
Grief Work			0.65	.42	23%
Yes	17	9			
No	48	17			
Intrusion			6.58	.001	59%
Yes	44	10			
No	21	16			
Breaking Bonds/Ties			0.08	.78	67%
Yes	43	18			
No	22	8			
Denial/Avoidance of Restoration Changes			16.68	0.001	27%
Yes	10	15			
No	55	11			
Restoration-Oriented					
Attending to Life Changes			1.01	.32	71%
Yes	35	30			
No	7	19			
New Activities			.007	.93	80%
Yes	52	21			
No	13	5			
Distraction from Grief			4.05	0.04	24%
Yes	12	10			
No	53	16			
Denial/Avoidance of Grief			0.43	.84	63%
Yes	41	17			
No	24	9			
New Roles			5.42	0.02	54%
Yes	40	9			
No	25	17			

### *The Interview*

The interviews were conducted by KG and SM-S, who were undergraduate students, for their final year research project. They were both young women aged from 20 to 22 at the time of the interviews. They were trained by KMB who has substantial experience in interviewing widowed women. There was no evidence that the quality or detail of the interviews was significantly different from that of Study 1.



Table 3. Study 2 Demographic Details<sup>a</sup>

	Mean	Standard deviation	Range
Age	71.1	9.75	51-85
Years married	34.1	15.0	10-59
Years bereaved	6.5	4.3	1.5-1.6

<sup>a</sup>Excludes Widow 6 who was widowed for 25 years.

We tape-recorded the semi-structured interviews that lasted from 45 minutes to 1½ hours, conducted in the respondents' own homes. Respondents gave informed consent. The interview focused on RO coping. Participants were asked about practical changes that they had made since their spouse died and how difficult it had been to make those changes (Attending to Life Changes). They were asked whether they had taken up any new activities and why they had done so (Doing New Things). They were asked about the kinds of things they did to keep their minds off the loss and whether these had helped (Distraction from Grief). Finally, they were asked whether they had any new roles, relationships, or a changed sense of identity (New Roles/Identities/Relationships) and what their impact had been. We did not ask participants about Denial/Avoidance of Grief because we wished to avoid highly sensitive topics, as undergraduate students undertook these interviews. In the event, participants did talk spontaneously about sensitive subjects and about LO coping. When this occurred, participants were not discouraged from discussing these issues, and the interviewers responded sensitively. No participants became unduly distressed during the interviews.

### *Analysis*

As with Study 1, the interviews using grounded theory and content analysis methods (Bennett & Vidal-Hall, 2000; Charmaz, 1995; Glaser & Strauss, 1967; Smith, 1995). In traditional grounded theory methods of analysis there are no pre-conceived views about what the data will show. Rather, the data is read with a view to identifying new areas for theoretical development. However, we were primarily interested in exploring issues raised by the DPM and, therefore, there were a priori questions that we wanted to address which have been outlined above.

Each transcript was first read through in its entirety to gain an impression of the interview. It was then re-read line-by-line and coded. This process was reflexive; as new topics emerged they were looked for in earlier parts of the interview. All interviews were read and coded independently by all three authors. Any discrepancies between coders were discussed and resolved. However, in

general, there were high levels of agreement. The focus, initially, of the coding was on RO but, since LO themes emerged spontaneously, these were also coded where they were present.

## Results

### *Attending to Life Changes*

The results indicate that one of the most challenging and indeed immediate changes that had to be made concerned finance. Several of the women had not managed their finances before and they had to learn how to do this. For example, Widow 4 closed down all the automatic payments. Her quote illustrates not only the practical challenges but also the psychological challenges of bereavement, that is, the need to establish control over her new life and to reduce unnecessary anxiety:

He paid everything on direct debit, and I closed them all down, because it frightened me to think that this money could go out.

For Widow 14, the attending to life's changes had already begun prior to her bereavement with her husband's illness, but she also illustrates the financial strains that accompanies widowhood for many women:

That was quite hard because Ken was always in charge of the bills . . . but Ken was ill I had time to get used to sorting things out.

My finances just hit the floor because when he died, everything died with him.

In other work, with both men and women, pre-bereavement caring and anticipation has also been found to be useful in preparing people for the practical challenges that bereavement brings (Bennett, 2007). For other women, prior experience also assisted them in attending to life's changes:

There was nothing different in that because I always pay the bills.

Thus, from a practical standpoint prior learning and pre-bereavement independence are valuable in attending to life's changes and contribute to lessening the stresses of bereavement. The ability to carry out these tasks may also have an impact in lessening the psychological burden that acquiring new skills often entails, allowing more psychological resources to be directed where they are most needed. There is the potential, for soon-to-be-widowed people at least (for example, those with terminally ill spouses), to receive pre-widowhood training in the same way that Lund and colleagues proposed post-bereavement (2004). It is interesting that these widows focused particularly on the financial skills that they need to acquire. It is likely that this is a cohort effect. Women born later may have more experience of managing their own finances as they begin to spend more time living alone, rather than going straight from parental to marital home, and also spend more time in the labor force. Nevertheless, whenever a spouse dies

there are likely to be financial matters that need to be resolved and redistributed, along with other practical life changes.

### *Doing New Things*

In the first study we found that the majority of participants engaged in new things. This was also the case in this study. Some women took up voluntary work or education as in the cases of Women 9 and 4. Widow 9 points out that it was something that she had taken up before her husband died, put on hold while he was dying and then took up again:

I started this voluntary work when I retired, and I'd just started it funnily enough, just before he died. But I'd put my life on hold for a year because I knew he was probably going to die in that time. (Widow 9)

I feel as if I could cope with the studying now. (Widow 4)

For other women, family activities were important new things. In the case of Widow 8 it was the birth of a grandchild that provided the focus. In the course of the interview she describes how she transferred her love from her husband to her granddaughter:

It's having the granddaughter and stuff that has actually saved me . . . it seemed like a replacement thing to love.

Finally, there were widows who took up multiple activities. Widow 15 provides a list of the clubs she has joined and Widow 11 recalls how it was a chosen strategy (and we shall return to her shortly):

I joined the B\* Support group, . . . I've joined Fairbrook, . . . a scrabble club. (Widow 15)

In the initial period I made a point of never saying no . . . a consciously chosen strategy. (Widow 11)

Widow 11 describes the taking up of new activities as a deliberate strategy and it is evidence that some behaviors fit into more than one type of DPM coping behavior, in this case Doing New Things and Distraction from Grief.

### **Distraction from Grief**

When we asked about Distraction from Grief two clear opinions were held by the widows. Their strength of opinion is interesting for two reasons. First, it was the only one of the stressors where the women discussed it in strategic terms. Second, they reflect on a debate that occurs within the bereavement community, both academic and practice-based. Widows who practice distraction as a means of coping with bereavement hold the first view, exemplified by Widow 11 above. Widow 1 who avoided going to sleep at first and later to bed, because at first she could not face waking up and later not face waking up alone, also illustrates it:

I didn't go to bed. I couldn't. . . . And at first I didn't want to go to sleep.

Other women talk about staying away from home or avoiding rooms or reminders of their spouses. On the other hand, there were women who firmly believed that distraction was unhelpful and indeed that found solace from the closeness with their dead spouse:

I've never made any attempt to keep my mind off it cos I don't think that's a particularly good thing to do. (Widow 8)

I used to go into his room and tidy all his things . . . because I felt really close to him. (Widow 4)

### **New Roles/Identities/Relationships**

Finally, women discussed their new roles, identities, and relationships. For two of the women there was a clear association between their new role and roles held by their husbands, what might be seen as identification:

He was chairman of a World War I association and I took that on. (Widow 9)

I felt it was a more positive thing to do to have a kind of living memorial and pass on something that had been characteristic of them . . . so . . . I set up a Latin club. (Widow 13)

Many of the women discussed how their characters and outlooks have changed. Widows 2 and 4 typify these changes, respectively:

I'm like a bird out of a cage. (Widow 2)

I've become stronger. (Widow 4)

Finally, we asked about intimate relations. Often the widows do not want the burden of looking after a man:

I wouldn't want a relationship, to have to look after a man. (Widow 12)

For others, they see both advantages and disadvantages:

The independence on the one hand that you wish you had someone to help you with, but independence, on the other hand where you can sit and watch what you like. (Widow 11)

Among the younger widows there was more interest in finding another partner:

I'm interested but there aren't any men about are there (laughs), none that fancy me. (Widow 13, age 51)

Finally, there were two widows who had been widowed, repartnered, and then widowed again. Widow 10 had been married and widowed twice, and Widow 3 had been widowed once and then had been bereaved of her LAT (living alone together) partner—of whom she said:

He was such a soul mate for me.

## DISCUSSION

We present data from two studies that looked at the DPM in detail. The first found that there was an association between some components of the DPM and psychological adjustment, the second provided qualitative data on the ways in which widows experienced RO coping.

In the first study we found that four components of the Dual Process Model differentiated between good and poor adjustment. Two, Intrusion of Grief and New Roles/Identities/Relationships, were associated with good adjustment and two, Denial/Avoidance of Restoration Changes and Distraction from Grief, were associated with poor adjustment. The remainder did not significantly differentiate adjustment. Many experienced some components such as Doing New Things, whereas Grief Work was experienced by relatively few.

Turning first to behaviors associated with LO coping, one might not expect Intrusion of Grief to be used more often by those who are adjusting well, especially given the negative valence of the word “intrusion.” However, when we were looking at our existing analysis and codes which fitted with Stroebe and Schut’s description of “intrusion” we identified some of the following: talking to the deceased; projecting and identifying with the deceased; and memorials. These codes appear to be more positive than the word “intrusion” implies, and are perhaps more associated with the continuation of a bond with the deceased. In addition, when reading the interviews, it is clear that these experiences give the bereaved comfort rather than causing distress. Given the association between the frequency of Intrusion of Grief and good adjustment, we would suggest that intrusion be relabeled Continuing Bonds.

In contrast, Denial/Avoidance of Restoration Changes is associated with poor adjustment. The codes which reflect this type of coping behavior are: life at an end; no change; and kept-self-to-self. In previous work this last code differentiated, on its own, between good and poor adjustment (Bennett et al., 2005b). People who report these are clinging onto their previous marital state and are maintaining an isolation both from their new status and from the social world, at an emotional level.

These two contrasting findings address a hot topic in bereavement research—“to continue or relinquish bonds” (Stroebe & Schut, 2005, p. 477; also Schut, Stroebe, Boelen, & Zijerveld, 2006). In their 2005 paper, Stroebe and Schut reviewed the evidence for and against the maintenance of the bond. It suggests, they argue, that certain types of continuing bond may be helpful while others might be harmful, and similarly it may be the case for relinquishing bonds. Further, some people may need help to relinquish bonds while others might not. The current results appear to differentiate between two types of bond. Those reporting Intrusion of Grief, or as we believe more appropriately, Continuing Bonds adjust well. These participants do not deny their changed situation nor are they avoiding making necessary changes. Rather they are using their bonds

with the deceased to make those changes—to seek advice from, and talk things over with, the deceased and considering what the deceased might have done had the situation been reversed. Those who adjust less well report Denial/Avoidance of Restoration Changes. This avoidant situation might reflect what Stroebe and Schut (2005) describe as clinging to a past attachment, where there is no acceptance of the necessity for change. It is possible that the Denial/Avoidance of Restoration Changes and Intrusion of Grief are opposite ends of the same continuum. Further research is needed to explore these issues.

We found that most people Do New Things but only those who have New Roles/Identities/Relationships are found to adjust better. In contrast, those who engage in Distraction from Grief are found to adjust less well. When analyzing interviews one of the challenges we face is in deciding how to classify a particular response, especially with respect to these three stressors. The original DPM paper does not specify the characteristics of these stressors. Following our studies we believe we can look for two responses in the data, or from the participant that can enable us to classify a behavior. First, does the response primarily concern feeling or doing? If the response concerns doing then we could classify that response as Doing New Things. If, in addition, it also concerns feeling, then we could classify it as New Roles/Identity/Relationships. This distinction might explain why although many people do new things, it is only those who take on a New Role/Identity/Relationship that have better adjustment. Thus, the psychological benefit comes not from doing new things, but from feeling something new about oneself. Second, what is the motivation for a particular behavior? For example, a new activity might be undertaken simply for the fun of it, in which case we might classify that behavior as Doing New Things, on the other hand a new activity might be undertaken to keep one's mind of one's loss, in which case it might be Distraction from Grief. Although we find that Doing New Things is not associated with any psychological benefit, Distraction from Grief is associated with poor adjustment.

The value or benefit of a particular RO coping strategy may also change over time. For example, an activity that initially was undertaken as a distraction, may take on new meaning and significance. An excellent illustration comes from an earlier study of widows that recruited from a Widows Club (Bennett & Vidal-Hall, 2000). I found women had joined the club to distract themselves from the loneliness of Sunday afternoons (Distraction from Grief), who then went on holiday with the club (New Activities) and then became organizers of the club and developed "true" friendships (New Roles/Identities/Relationships). For these women, and for the women in the current studies, a single behavior may have multiple functions in relationship to the DPM, which can depend on the time course, on motivation, and on other situational factors. It is, therefore, important not to confine the analysis of the DPM to a narrow time period. This example also illustrates the value of qualitative research in capturing the multi-dimensional nature of LO and RO that might be less easily captured by quantitative methods.

Alongside Doing New Things there are also other behaviors that are undertaken by most people. Almost everyone begins to break bonds. Most people discuss the decision to dispose of their spouses' possessions and this is a task that must be tackled to some degree. The majority of people discard most things at some point (sometimes early on, sometimes later) although many keep hold of one or two significant things. Thus, people are simultaneously continuing and breaking bonds. It is not a case of one or the other. In addition, the majority of people also discuss times when they experienced Denial/Avoidance of Grief. People often talk of not wanting to be in the house, or of the distress they feel at returning to an empty house, or sleeping in an empty bed. They talk about the numbness and the lack of memories concerning the days immediately after the death. These appear to be common, and are part of the normal pattern of grief. Thus, some periods of avoidance may be necessary in order to survive the pain of bereavement. Finally, although most people have to Attend to Life Changes, it is important to consider what the components of Attending to Life Changes might be. At first glance the focus is on practical tasks and illustrated by our participants. The ease to which some of these tasks were attended was influenced by at least two factors. Those widows who had prior experience, either as a consequence of an independent personality or lifestyle, or those women who as a consequence of prior caregiving, were more able to attend to these changes (and this has been found elsewhere; Bennett, Hughes, & Smith, 2003). In addition, there is some evidence that there is also a psychological component to Attending to Life Changes, and this illustrated by Widow 4 who changed the way her bills were managed to exercise control. It would be interesting to explore the psychological components of this type stressor, since this may have an impact on psychological adjustment. Thus, as with the other RO stressors, it may be important to consider the underlying meaning of a particular activity—does it represent simply a functional change or does it represent a psychological change?

Richardson and Balaswamy (2001) found that LO coping was associated more often with negative affect and restoration with positive. Although positive and negative affect cannot be directly mapped onto good and poor adjustment there may be similarities. If that is the case the current results are different from theirs. However, these results do reflect another literature, that of the traditional stress' literature (Carver et al., 1989; Folkman & Lazarus, 1980). Those behaviors associated with poor adjustment, Denial/Avoidance of Change and Distraction from Grief, may be seen as avoidant coping strategies. On the other hand, those associated with good adjustment, Intrusion of Grief and New Roles/Identities/Relationships, may be seen as confrontative coping strategies.

There were some interesting attitudes toward new relationships. Many men in the first study discussed the question of whether they would remarry and considered the idea positively, whereas the women in that study were unenthusiastic about remarriage or repartnering. However, relatively few men or women had embarked on new relationships, although this may have been because the

study was explicitly for people who remained widowed. In that study the participants mean age was 74 and all were 55 years of age and older. In the second study the participants' mean age was 70 and the youngest was 51. Here there were mixed views from the women with respect to new relationships. There is evidence that the attitude toward new relationships is age dependent: younger widows would like to re-partner; older widows would not. This effect may also be cohort-dependent. Attitudes toward re-partnering and sexual relationships changed greatly during the 20th century, and that may also explain the range of views the widows had about re-partnering.

That both people with good and poor adjustment share some coping experiences suggests that the model is doing what it is supposed to be doing, describing and explaining the everyday experiences of bereaved people. At the same time some of those coping experiences/behaviors could be placed in the integrated risk-factor model proposed by Stroebe et al. (2005). The reporting of Denial/Avoidance of Change and Distraction from Grief might be useful in identifying those who are at risk of complicated grief, while those who report Intrusion of Grief or New Roles/Identities/Relationships might be selected out of interventions.

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Direct reprint requests to:

Dr. Kate M. Bennett  
School of Psychology  
University of Liverpool  
Eleanor Rathbone Building  
Bedford Street South  
Liverpool L69 7ZA UK  
e-mail: [kmb@liv.ac.uk](mailto:kmb@liv.ac.uk)