YOUNG ADULTS' RECONCILIATION WITH THEIR MOURNING AFTER

PARENTAL LOSS BETWEEN THE AGES OF 11 AND 18

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Young Adults' Reconciliation with their Mourning after Parental Loss between the

Ages of 11 and 18

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Thesis Abstract

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This study aimed to examine a) the effects of adherence to mourning rituals, grief reactions, social environment, and coping strategies on adjustment to parental loss and b) to investigate the effects of gender, age of loss, sex of the lost parent and previous loss on young adults' adaptation to their lives.

25 female and 14 male native Turkish speaker undergraduate Boğaziçi University students participated in the study. The participants' attendance in grief rituals and environmental support after parental loss were measured by the Mourning Rituals Questionnaire (MRQ) and the Social Support Availability and Satisfaction Scale (SSASS), respectively. The Grief Reactions Scale (GRS) was used to evaluate grief responses, whereas the Coping with Parental Loss Scale (CPLS) investigated each participant's coping strategies during the mourning process. In order to assess each participant's adaptation to their new life, the Adjustment to Parental Loss Scale (APLS) was used.

The results suggest that grief reactions have a negative effect on eventual adjustment to parental loss. According to the findings, it appears that losing a mother has a worse effect than losing a father; similarly losing a parent at a younger age has a worse effect in terms of adjustment to parental loss. However, no gender effects on young adults' adaptation after parental loss were found.

Keywords: mourning, grief, young adults, adolescent bereavement, parental loss

Tez Özeti

Duygu Coşkun, "11-18 Yaş Arasında Anne Baba Kaybı Yaşamış Genç Yetişkinlerin

Yasla Uyum Süreci"

Bu çalışma a) yas ritüellerine katılımın, yas tepkilerinin, sosyal çevrenin ve baş etme stratejilerinin; ebeveyn kaybına yönelik uyum üzerindeki etkilerini ve b) cinsiyetin, kayıp sırasındaki yaşın, kaybedilen ebeveynin cinsiyetinin ve önceki kayıpların genç yetişkinlerin yaşamlarına uyumları üzerindeki etkilerini araştırmayı amaçlamıştır.

Ana dili türkçe olan, 25 kız 14 erkek Boğaziçi Üniversitesi lisans bölümü öğrencisi çalışmaya katılmıştır. Katılımcıların yas ritüellerine katılımı ile ebeveyn kaybı sonrasında gördükleri çevresel destek sırasıyla Yas Ritüelleri Ölçeği (YRÖ), Sosyal Destek Ulaşılabilirliği ve Yeterliliği Ölçeği (SDUYÖ) ile incelenmiştir. Yas Tepkileri Ölçeği (YTÖ) yas tepkilerini değerlendirmek; Ebeveyn Kaybı ile Baş Etme Ölçeği ise katılımcıların yas süreci boyunca kullandıkları baş etme stratejilerini incelemek için kullanılmıştır. Katılımcıların yeni yaşantılarına uyumlarını ölçmek için, Ebeveyn Kaybı ile Uyum Ölçeği (EKUÖ) 'nden faydalanılmıştır.

Sonuçlar; yas tepkilerinin, ebeveyn kaybına şuanki uyum üzerinde negatif etkisi olduğunu önermektedir. Bulgulara göre, uyum süreci üzerinde anneyi kaybetmenin babayı kaybetmeye göre daha kötü etkisi olduğu gözlenmiştir. Benzer şekilde, ebeveyn kaybına uyum sürecinde, erken yaşta ebeveyni kaybetmenin daha olumsuz etkileri olduğu gözlenmektedir. Bununla beraber, genç yetişkinlerin ebeveyn kaybı sonrasındaki uyum süreçleri üzerinde cinsiyet farkının etkisi gözlenmemiştir.

Anahtar sözcükler: yas, kayıp, genç yetişkinler, ergenlikte yas, ebeveyn kaybı

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CHAPTER I: INTRODUCTION

The purpose of this thesis is to explore the factors that help young adults who have lost one parent between the ages of 11 and 18, in their adaptation to their lives. This section presents a review of the relevant literature, which includes theoretical background and previous research that has been completed on the topic of bereavement, followed by bereavement theories, children's reactions following the death of a parent, the growing child and mourning and bereavement in cross-cultural perspective and mourning rituals.

Definitions of Grief, Bereavement, Mourning and Theoretical Models

According to Goldman (1946), grief is defined "as a normal, internalized reaction to the loss of a person, thing, or idea", which includes emotional responses to the loss of a beloved one. Bereavement is "the state of having lost something, whether it be significant others, significant things, our sense of self." Mourning means "taking the internal experience of grief and expressing it outside of ourselves. It is the cultural expression of grief, as seen in traditional such as funerals or creative rituals such as writing a letter to the deceased person" (p.21).

In Western culture, theories of bereavement continue to change and develop. The beginning of a modern theory of the process of grief and mourning is ascribed to Freud. He focused on process of hypercathecting and then decathecting the mental image of the deceased person in his theory (Rothaupt & Becker, 2007). According to Freud, the goal of bereavement is appropriate emotional detachment from the loved one.

Later, Bowlby (1980) described a four-step process of mourning: "(1) numbing (2) yearning and searching for the lost figure (3) disorganization and despair (4) greater or less degree of reorganization." (p.85). In the numbing step, the grieving person has a sense of unreality, disbelief and is almost empty of feelings. The certainty of death has not completely registered. During the yearning stage, the bereaved person feels more agony, panic, and physical aches. He or she suffers from sleep disturbances, lack of attention and preoccupation with thoughts of the deceased person. In the disorganization and despair phase, depression and apathy increases. The bereaved person may have difficulty managing his life or taking any interest in activities. At the last step, the grieving person pulls himself together again and begins to feel ready to enjoy activities. Bowlby (1980) applied his theory of infant attachment to grief and loss. He spoke of the need to reorganize representations of the deceased that allow the bereaved to return to normal activities and reengage in social relationships. (Rothaupt & Becker, 2007)

There is also some literature on the process of dying, similar in some ways do the mourning by those left behind. Kübler-Ross's model progresses in a linear way. People have to complete one task before enter into the next one (Rothaupt & Becker, 2007). According to Kübler- Ross (1969) the mourning process includes five tasks: (1) "Denial & Isolation" (p.34), in which the person denies that death is really going to take place. (2) "Anger" (p.44), in which the dying person recognizes that denial, can no longer be maintained. Denial often gives way to anger, resentment, rage and envy (3) "Bargaining" (p.72), in which the person develops the hope that death can somehow be postponed or delayed. (4) "Depression" (p.75), in which the person comes to accept the certainty of death (5) "Acceptance" (p.99), in which the person develops a sense of peace, an acceptance of one's fate and a desire to be left alone. The parallel process between the stages of dying and grieving was made in 1963 by

Aldrith, in an article titled *The Dying Patient's Grief* (Parkes, 1993; cited in Rothaupt & Becker, 2007).

More recently, Worden (2002) describes four tasks of the mourning process: (1) "to accept the reality of the loss" (p.23). In the first task the person has to overcome the temptation to deny the certainty of death. (2) "To work through the pain of grief" (p.30). During this task, the bereaved person searches for effective ways to confront and reveal his feelings after the loss of the loved one. (3) "To adjust to an environment in which the deceased is missing" (p.32). In this task, the grieving person accepts the new patterns of living. (4) "To emotionally relocate the deceased and move on with life" (p.35). Finally, the bereaved person has to loosen ties to the deceased appropriately and begin to socialize. Worden (1991) explained that mourning is a process that bereaved people experience, and he clearly prefers a task model to a stage model of bereavement. He said that one of the concerns of stage models of mourning is that novice clinicians and bereaved families take the stages too literally (Rothaupt & Becker, 2007). Worden (1996) stated that "the use of a task model is superior to a stage or phase model because of its dynamic fluidity and because it is a useful model for the clinician who may be intervening with bereaved individuals and families" (p. 12).

The above cited theorists were referring to the general phenomenon of loss and mourning. The literature cited below refers to how children and adolescents experience this phenomenon.

Children's Reactions Following the Death of a Parent

The person who died, the child's age, gender, the deceased parent's gender, the nature of the attachment with the deceased parent, time since death, mode of death

(e.g. suddenness, traumatic, ambiguous death), historical antecedents, personality variables (e.g. cognitive style, ego strength), social variables (e.g. presence of siblings, support availability, religious resources, ethnic expectations), concurrent stresses (e.g. economic reversals) and parental communication patterns are listed among the mediators of mourning (Worden, 2002). It can be assumed that all these mediators interact with each other and can be associated with the person's response to parental loss. According to the duration and the intensity of the responses, it can be called as complicated grief. It should be noted that the distinguishing complicated grief from normative mourning process is important (Gray, Prigerson & Litz, 2004).

Age of Child

In terms of the child's age at the time of the loss, the first 5 years of life and early adolescence are widely believed by loss researchers to be critical periods (Saler and Skolnick, 1992). Moreover, in terms of a developmental perspective, bereavement is handled differently by adolescents depending on whether they are in the stage of early, middle or late adolescence. The developmental tasks of early, middle and late adolescence differ, as do the quality and focus of primary relationships (Marwit & Carusa, 1998).

According to Raveis, Siegel and Karus (1998) older children rated lower levels of state anxiety than younger children. An interesting finding of the study was that the child's perception of the surviving parent's level of openness in parental communication was found to be significantly correlated with lower levels of depressive symptoms and state anxiety.

Research has also been mixed in regard to whether boys or girls are more vulnerable to distress or negative consequences after a parental loss (Thompson et al., 1998). Balk et al. (1998) collected data from bereaved college students through the cards of Thematic Apperception Test (TAT) in their study. The students included 46 members of support groups for bereaved college students, 34 members of a bereavement control group and 61 nonbereaved students. The aim of this study was to gather data about the trajectory of bereavement with and without support group intervention. The results indicated that bereaved students were more likely to discuss their feelings, memories, and imaginations than nonbereaved counterparts. However, male and females did not differ in terms of engaging in the mourning process. Yet, whereas females were more occupied with emotional distress after the death, males were focused on the alteration of their life events.

In Raveis, Siegel and Karus (1998) study showed same results similar to Balt's. They obtained data from 83 families with school-age children, who had lost one parent because of cancer between the ages of 6 and 18. Through individual interviews they examined the factors in children's psychosocial adjustment to parental loss. The findings demonstrated that boys have less depressive symptoms than girls.

On the other hand, Sugawara (1991) stated that boys are more vulnerable to distress following the death of a parent. According to Sugawara (1991 cited in Özgül, 2002) several factors may lead to these differences:

(1) differences in the extent to which various risk factors impinge upon boys and girls, (2) incidence of placement of boys and girls in institutional care, (3) display of disruptive, oppositional behaviour, (4) the meaning of aggression and shyness among boys and girls, and (5) different parent-child interactions among the sexes (p.19).

Worden, Davies, Mccown (1999) compared parent loss with sibling loss and they found that boys were more affected by parental loss than girls, whereas girls responded more negatively than boys to sibling loss.

Thompson, Kaslow, Price, Williams, and Kingree (1998) investigated in their study the psychological consequences and secondary stressors related with parental loss in adolescence. In order to assess secondary stressors, participants had to fill out the Scale of General Life Events (GLE) and Bereavement-Related Events (BRE; Li, Lutzke, Sandier, & Ayers, 1995; Sandier et al, 1988; cited in Thompson et al, 1998). Whereas, the GLE includes statements such as "My family moved to a new house", "My friends criticized me for hanging out with other groups"; the BRE consists of statements like "My relatives told me to act differently than I did before my parent's death", "People at school acted uncomfortable around me after my parent's death." Regarding their findings, there were no differences on secondary stressors in terms of age of child or gender of the child.

Gender of the Lost Parent

Studies showed that the sex of the lost parent is an important variable that mediates the impact of early loss. Sugawara (1991) stated the importance of maternal absence on children's behavior and development. Especially younger adolescents are more dependent on their mothers. There is a significant amount of research in Turkey that indicates that children are more attached to their mothers than their fathers (Fişek, 2002; Halfon, 2006; Sefer, 2006; Seçkin, 1996; Sunar & Fisek, 2005). Therefore loss of the mother becomes a significant stressor. On the other hand, Hetherington (1972) and Lynn & Sawrey (1991) emphasized the significance of father absence. According to Lynn and Sawrey; the effects of losing the father on girls and boys are

different. The direct effects of father absence were assumed to be more damaging to the boy's development than to the girl's, because the girl who has lost her father has the same sex parent as a role model (Özgül, 2002). However, the father absent boy lost his same-sex parent, which makes difficult to complete the identification phase. In addition, Hetherington (1972) examined the effects of father absence on adolescent girls after parental loss or divorce. The findings showed that they had a general feeling of anxiety and manifested deviant behaviors in attempting to cope with their anxiety.

Rukhsana and Rukhsana (2004) examined the effect of parental loss on Pakistani adolescents' coping with stress. The results indicated that females and males differed in terms of coping strategies, which were used by the adolescents. Among those who had lost their father, girls used more problem-focused coping as well as avoidance-focused coping in comparison with boys. Loss of mother had an enormous effect on adolescent girls' coping compared to their male counterparts. Girls were more sensitive to stress than boys. Researchers argued that these findings could be understood as a consequence of culture. Because of Pakistan's patriarchal society, girls feel more attached to their mothers than boys. Therefore, they have to use more effort to cope with various stresses after a losing their mother compared to male adolescents. Similarly, Toksoy (2005) revealed that psychotic symptoms of adolescents who lost their mother were higher than adolescents who lost father.

Generally reactions following the death of a parent can be examined in terms of three aspects: "(1) emotions such as sadness, anger, guilt, anxiety etc. (2) behaviors such as sleep and appetite disturbances, social withdrawal, avoiding reminders of the deceased etc. (3) cognitions such as disbelief, confusion, preoccupation etc" (Worden, 2002).

To appear normal, adolescents tend to keep their mourning from both adults and peers. As a consequence, they are more likely than children to become depressed or to escape from grief through acting-out behavior (Corr & Balk, 1996).

The Growing Child's Conception of Death and Mourning

The child's age at the time of the loss, for the first 5 years of life and early adolescence are widely believed by loss researchers to be critical periods (Saler and Skolnik, 1992). Research on the development of the concepts of death focuses on five components of that concept, i.e. "irreversibility, universality, cessation, causality and inevitability" (Lazar & Purta, 1991; Speece & Brent, 1984,). Lazar & Purta (1991) stated that children first understand the sub concepts of irreversibility, and inevitability. Development of these sub concepts does not seem to be conditional on each other. However, at least one of these sub concepts must be understood before the child understands the subconsepts of cessation or causality. Speece & Brent (1984) also mentioned that the majority of healthy children in modern societies achieve an understanding of all these components between five and seven years of age.

Many studies made use of a Piagetian framework to demonstrate how children react to death according to their cognitive developmental level. Therefore, the findings of some of these studies are presented in this context.

Children in sensorimotor stage (approximately from birth to two years)

Although the infant's and toddlers cognitive abilities may be usually limited, they have emotional responses to the death of a loved one. Freud (1942, cited in Norris,

Young, & Williams, 1993) concluded that the depth of infants' grief can be life threatening. In addition, Bowlby (1960, cited in Norris, Young, & Williams, 1993) described a three-step process of grieving infants, i.e., (1) protest- the outrage and anguish over the loss- (2) despair- the realization of no hope- (3) detachment- the separation from people in general- which can cause an over-attachment to material things such as food and toys (Norris, Young, & Williams, 1993) stated that infants could feel distress and cry.

Children in the preoperational stage
(approximately from the age of two to seven years)

Due to the egocentrism and magical thinking characteristic of this stage, children are unlikely to understand the sub concept of irreversibility of death, which cause frequent questions about their parent or sibling's return. Concepts such as "heaven" or "spirit" will be hard to cognize (Dowdney, 2000). Death will be associated with sleep, separation or injury (Gordon & Schroder, 2002). They may regress to earlier age behaviors such as clinging to mother, thumb sucking and wetting pants (Norris, Young, & Williams, 1993).

Children in the concrete operational stage
(approximately from the age of seven to eleven)

Children at this age start to perceive the permanence of death and have a tendency to see death as externally caused such as the result of a disease or injury, rather than as a biological process that affects all living things. Morin and Welsh (1996) investigated 32 participants' parental and sibling loss during childhood. According their findings, the age of understanding the concept of death was 7.5 year old.

Although the concept of death is clearer at this stage, children continue to wish for the return of their sibling or parent (Dowdney, 2002). Moreover, they may also believe that only old people die (Stambrook & Parker, 1987 cited in Gordon & Schroeder, 2002).

Children in the formal operational stage
(approximately from the age of eleven to adulthood)

It is assumed that once children have attained Piaget's stage of formal operations, they can understand mortality and death as a natural process. Regarding this, Noppe and Noppe's (1997) research about the death conception during early, middle, and later adolescents; the notions about death were differed according to developmental phase of the youth.

In this stage, they can think in more abstract ways about death (Goldman, 1946). They are more comfortable talking about death with peers than with adults. With the onset of formal operational thought, death is understood completely. However, there is a gap between logic and reality. Although they can understand the permanence and nonfunctionality of death, they are attracted to alternatives. Adolescents begin to question the unfairness of death and the meaning of life (Balk, 1996, cited in Dowdney, 2000). An accompanying fascination with dramatic or romanticized death and suicide may also emerge (Gordon & Schroeder, 2002). They also formulate personal theories about life after death such as images of heaven, spiritual survival at another level (Noppe & Noppe, 1997).

The above cited studies were referring to the Piagetian framework to demonstrate how children and adolescent's react to death according to their cognitive

developmental level. On the other hand, the studies cited below refer to how children and adolescent express their feelings after a parental loss.

Expression of grief in preschool children

Children at this age might actively search for the lost parent. Their sense of loss will be compounded by major changes to their routine and the grief of those around them. They can display regression to earlier developmental stages such as increased dependency, crying, and distress. The communication with their peers can be disturbed due to unpredictable expressions of anger or aggression (Dowdney, 2005).

Although these children may not verbalize some questions in their mind such as "Why did that person die?", "Will that happen to me?", "Did I have anything to do with it?", "Who will take care of me now?" and "Why did this happen to me?", which are a part of this underlying concerns that accompany grief, they may be preoccupied with some of them (Walker & Roberts, 2001). They may also organize their play within the subject of death to protect the self against fears associated with an understanding of death (Rochlin, 1953, cited in Walker & Roberts, 2001).

If very young children are told that the deceased person has gone on a "long trip", they might expect that person to return and feel guilty. If very young children are told that the deceased person is "sleeping peacefully", they may begin to fear sleep. If very young children are told that the deceased person was old and sick and therefore died, they may create problems later sickness or doctor's appointments (Norris, Young & Williams, 1993).

Expression of grief in middle childhood

Children between the ages of five to seven may be reluctant to go off to sleep, whereas older children report sleep disturbed by nightmares. From about the age of eight, children display an increase in headaches and other physical manifestations of distress. They experience concentration problems to some degree at school. (Dowdney, 2000) Children at this age have a tendency to question their "responsibility" for the death of a family member, especially following the loss of a sibling that causes a sense of guilt, which is related to depression. Idealization of the deceased child by parents can also lead to depression in the surviving child (Dowdney, 2000). If there is self-blame or guilt over the death, obsessive ruminations, or pessimistic, hopeless thinking can also be observed (Walter & Roberts, 2001). These children may also react to the sense of abandonment with anger and aggression (Norris, Young & Williams, 1993) and they may tend to deny the finality of death (Gordon &Schroeder, 2002).

Childhood mourning at these ages also includes the continued imaginary presence of the parent in the child's psychosocial life. They have a tendency to create an imaginary relationship with the deceased person (Cournos, 2001). Hallucinations of the dead person are another common feature. They may interpret them as an evidence of the deceased parent's return (Black, 1998).

Expression of grief in adolescents

Focusing on the expression of grief in adolescents, they don't want to express their grief due to a fear of seeming abnormal or losing control (Siegelman, 1999). Moreover, they may refuse to participate in family activities and/or seek support

from their peers. Some of them challenge their own mortality with acting out such as over-drinking or substance abuse (Dowdney, 2000). Beverly, Cubiss, Dunne, Lewin, and Kelly's study (1990) determined that adolescents, who experienced parental loss, have a problem about their self-concept, difficulties with emotional themes and familial issues in comparison with nonbereaved youths. This study showed that parental loss during adolescence is associated with increasing suicidal thoughts and attempts and a higher level of alcohol and substance abuse.

Longing for reunion with the deceased parent is also common and causes an increase in suicidal ideation in adolescents (Black, 1998). Furthermore, as Cournos (2001) mentioned, the adolescent's expression may match perfectly with the term of "existential despair" (p.23).

Weller E, Weller R, and Wiltsie Pugh (1996) worked with children who have lost one parent and nonbereaved but depressive children in their research in order to examine whether they showed psychiatric symptoms or not. This study claimed that 61% of children and their surviving parent have suicidal thoughts during the mourning process but none of them have attempted to suicide. In contrast, depressive children also have suicidal ideation but 41% of them have attempted suicide. Another finding of the study was the negative effect of moving the house, leaving the neighbourhuod after the parental loss on both the children's and the surviving parent's general well-being. Moreover, children could feel guilty if the surviving parent behaves in a more positive way toward his/her children than before the loss experience.

If the parental loss came at a time of rebellious independence against the deceased parent, it leads to the presence of special circumstances, which may be associated with feelings of adolescent guilt (Marwin & Carusa, 1998). Therefore,

resolving bereavement during adolescence includes interplay with the tasks and conflicts of each phase of adolescence (Balk, 1996).

Moreover, the youths who experience the unexpected death of a parent may display significantly more depressive, anxious, and disruptive behavior than their nonbereaved peers (Thompson, Kaslow, Price, Williams, & Kingree, 1998).

In addition, while adolescents are getting independent of their families, they are still dependent on them in terms of emotional support and guidance. Therefore, the teenager, who loses his/her parent wants to keep the attachment and may carry on an "internal dialogue" with the deceased parent for years (Silverman&Worden, 1993, cited in Siegelman, 1999).

In Marwit and Carusa's (1998) study, 30 young adults who had lost a parent in adolescence and 30 who had experienced parental divorce in adolescence rated the helpfulness of environmental support such as support-intended communications and supportive network members. According to their results, no differences were found between the two groups. Similarly, no gender differences were reported. On the other hand, they pointed out that the bereaved children profit from peer-support.

The research of Canetti et al (2000) examined differences in the effects of parental loss and divorce on the mental health of Israeli adolescents. Regarding the results, adolescents who had experienced divorce of their parent showed more psychiatric symptoms, had lower level of well-being and less familial support than bereaved adolescents. Moreover, no differences were found in terms of losing father or mother on the above cited variables. On the other hand, losing a parent at a younger age had a worse effect than in later years.

Ellis and Granger (2002) obtained data from 20 Afro-American participants, who have experienced parental loss in adolescence. This study was aimed to explore young adults' perception of the impact of parent death and how

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they experienced the mourning process. The findings demonstrated that most of the adolescent did not receive professional help; rather they sought social support from their close relatives and friends during the mourning process.

<center>Bereavement in cross-cultural perspective and mourning rituals</center>

Bereavement is defined as the status of having lost someone, whereas grief is viewed as the state of distress that occurs after a death. Nevertheless, mourning is seen as the cultural experience of grief (Goldman, 1946). It includes the cultural behaviors that follow such a loss (Kastenbaum&Costa, 1977, cited in Kaplan, 1993).

Mourning rituals may differ from person to person as well as from culture to culture. Some cultures have formalized periods of time during which certain prayers or rituals are performed. For instance, Orthodox Jews recite the Kaddish after the death of a close relative and cover the mirror in the house, and the men slash their ties as a symbol of loss. In Japanese culture, a deep respectful feeling toward deceased people from whom a family is descended is a significant issue in their culture (Klass, 1996, cited in Cavanaugh& Fields, 2002).

Irish Americans have a tendency to believe that the deceased person deserves a good send off with food, drink, and jokes like a party-atmosphere (McGoldrick et al., 1991, cited in Sigelman 1999), while Jewish families are likely to withdraw from social activies for a week of mourning (Cytron, 1993, cited in Sigelman 1999).

In some cultures such as Indian and Japanese, death is not seen at the end of life. They believe in the continuity of the spiritual body. Sometimes death may be viewed as a judgement of God or a punishment (Santrock, 1997).

Although there is some local variation in responses to loss and patterns of mourning in Islam, there are also some general mourning rituals among all Muslims.

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Muslims believe in the continuity of life after death in Heaven or Hell. Mourning rituals shows differences according to gender. "The burial is done only by men, who lay out the body with eyes towards Mecca and head covered with a board. They then leave and the Imam remain to pray, while the soul of the dead person is answering five questions" (Jonker, 1997; p.165). Men and women also differ in the expression of their feeling after losing a loved one. "While men rarely cry, and when they do, the deceased is usually a very close relative, women show their grief publicly through crying or baring their heads and throwing a fistful of soil on their hair or by beating on their chests with their hands once death of a beloved individual is ascertained" (Sultan, 2003; p. 653). Sometimes, women express their emotions in singing lengthy dirges (Jonker, 1997).

Although mourning rituals in Islam do not consist of excessive mourning, friends and relatives are usually around the family of the deceased person and they spend 3 to 7 nights with the dead person's family (Sultan, 2003). "Young women mourn for three months, older women for a year. On the third, seventh and fortieth days after death, men gather at the mosque and women prepare sweet dishes for visitors who pray together for the dead. The story of the prophet's birth is read aloud and tears are shed" (Jonker, 1997; p. 165). According the Muslim mourning rituals, children are not allowed to witness these rituals. They are usually discouraged from asking questions and expected to forget the death as soon as possible (Jonker 1997, Sultan 2003).

No psychological studies on bereavement, mourning rituals or eventual adjustment were found in the Turkish literature. Therefore the following description states a widely practiced custom in the country.

Focusing on Turkish culture; first of all, after the death of a person, his/her close relatives arrange a funeral in a mosque. After this ceremony, they go to the

cemetery to bury the deceased person. Following the funeral, a meeting occurs at the house of the deceased person in order to memorialize him or her. Such religious meetings are repeated for seven days, then forty days later after the funeral. Finally, the close relatives of the deceased person organize an assembly on every anniversary of day of death for remembrance.

To sum up, previous studies have shown that all cultures have different meanings of death and special rituals for celebrating the end of life.

The Present Study

The present study aimed to investigate the mourning process after parental loss by investigating its dynamics in a Turkish sample. The researcher worked with people, who experienced parental loss during adolescence between the ages of 11 and 18, because although there are few studies in the world, no findings were found about this topic with Turkish participants. It was planned to be an exploratory study.

In line with previous findings, no universal "right" grief reactions to parental loss were among all adolescents. Therefore, the general aim was to get some estimate of the responses of the subjects in this sample to their parental loss. The following elements of the subjects' responses were assessed:

1. The subjects' reports of their adherence to mourning rituals, their grief reactions, environmental support, and coping processes were measured.

2. The effects of the participants' experience of the above factors on their eventual adjustment to their parental loss were investigated.

3. The effects of the participants' gender, participants' age at the time of death, gender of the deceased parent and having a previous loss on participants' eventual adjustment to their parental loss were assessed.

Based on prior research, the following hypotheses are proposed:

1. a) More adherence to the mourning rituals leads to better adjustment to

   parental loss.

   b) More social support leads to better adjustment to parental loss.

   c) Better coping leads to better adjustment after the death of a parent.

2. a) In adolescence, losing a mother has a worse effect on adjustment to

   parental loss than losing a father.

   b) Losing a parent at a younger age has a worse effect on adjustment to the

   death of a parent than in later years.

   No hypotheses are assumed about the effects of grief reactions on adjustment
to parental loss during adolescence because of the diversity of the responses to the
death of a loved one.

CHAPTER II: METHOD

Sample of the Study

A sample of 39 (25 female and 14 male) native Turkish speaker, Muslim undergraduate Boğaziçi University students taking an introductory course in psychology (PSY 101) were called for participation in the study for extra course credit. The age range of the participants in the sample was between 18 and 25. The inclusion criteria were that: each participant must have lost either his/her mother or his/her father in the age range from 11 to 18 and this parental loss must have occurred at least 2 years before their participation in this study.

A pilot study of the reliability of the scales used could not be conducted due to the limited number of subjects who could be recruited for the study. As a consequence, the reliability results were obtained from the same subjects who participated in the present study.

Instruments

Demographic Information Form

Demographic data about participant's gender, age, sex of the lost parent, age of loss, previous loss and the cause of death were obtained through a demographic questionnaire. A copy of the form is provided in Appendix A.

Mourning Rituals Questionnaire (MRQ)

Each subject's participation in mourning rituals was measured with the Mourning Rituals Questionnaire (MRQ), which was especially developed for this study by the researcher. In the construction of this scale, firstly, 39 participants were given a 7-item scale. Following the analysis of the collected data, items having the highest corrected item-total correlation (all above .4) were chosen. This scale yielded a solid internal consistency reliability of .51 and the scores ranged from 0 to 4 (Mean=3.08, Median=3, SD=1.01). After completion of the reliability test, this scale includes 4 questions such as "did you attend the funeral ceremony in the mosque after the death of your mother/father?" This scales includes binary measure (0= *I did not attend to,* 1= *I attended to*). Higher scores on this scale indicate that the participant's more adherence to the mourning rituals. A copy of the scale is provided in Appendix B.

Additionally, it is also asked the question of "how do you describe your religious belief?" was asked. This question contains a Likert-type measure represented on a 4-point continuum (1= *I do not believe in religion*, 2= *my religious belief is weak,* 3= *my religious belief is strong*, 4= *my religious belief is very strong*).

Social Support Availability and Satisfaction Scale (SSASS)

Participants were given a Social Support Availability and Satisfaction Scale
 (SSASS) in order to gain a measure of the environment after the parental loss. It was developed by the researcher for this study. Two different types of subscales were constructed mainly depending on the nature of social support.

In the first subscale (SSASS-1), external social support availability was more dominant; whereas in the later (SSASS-2), subjective values and feelings of the participant were more determinant. In the construction of this scale, firstly, 39 participants were given a 34-item scale. Following the analysis of the collected data, items having the highest corrected item-total correlation (all above .5) were chosen and the total number of items was decreased to 20. The total scale yielded a solid internal consistency reliability of .78 and scores ranged from 31 to 79 (Mean=53.79, Median=52, SD=10.39).

The first subscale consists of 8 statements such as "I received material support from my close relatives after the death of my mother/father." This subscale yielded a solid internal consistency reliability of .53 and scores ranged from 16 to 35 (Mean=27.74, Median=29, SD=4.66) On the other hand, the second subscale includes 12 statements such as "within a year after I lost my mother/my father, I talked with my surviving parent about my feelings." This subscale yielded a solid internal consistency reliability of .85 and scores ranged from 12 to 45 (Mean=26.05, Median=26, SD=8.48) in these scales higher scores are viewed as indicating a more satisfying social environment. A copy of the scale is provided in Appendix C.

Grief Reaction Scale (GRS)

This scale was designed by the researcher to measure grief responses after the parental loss. While this scale was constructed, some items were chosen from the Grief Experience Questionnaire (Barret & Scott, 1989), and some items were chosen from the Post Traumatic Stress Disorder Scale (PTSD; Blake, 1990) in the construction of this scale, firstly, 39 participants were given a 27-item scale. Following the analysis of the collected data, items having the highest corrected item-

total correlation (all above .6) were chosen and the total number of items was decreased to 25. This scale yielded a solid internal consistency reliability of .92 and scores ranged from 38 to 110 (Mean=73.56, Median=75, SD=20.52).This scale contains a 25-item Likert-type measure represented on a 5-point continuum. (1= *I've never experienced it*, 2= *I've experienced it occasionally,* 3= *I've experienced it sometimes*, 4= *I've experienced it frequently*, 5= *I experienced it all the time*) In this scale, a higher score indicates that a person has experienced a more deep and complicated grief process. A copy of the scale is provided in Appendix D.

Coping with Parental Loss Scale (CPLS)

This scale was created by the researcher to investigate each participant total coping approaches during the grief process. In the construction of this scale, firstly, 39 participants were given a 14-item scale. Following the analysis of the collected data, items having the highest corrected item-total correlation (all above .4) were chosen and the total number of items was decreased to 10 (reverse-scoring 4 items). This scale yielded a solid internal consistency reliability of .72 and scores ranged from 19 to 45 (Mean=34.18, Median= 36, SD=7.28). This scale consist of statements such as "the feeling to see my mother/my father after I die, makes me relaxed" and "I was not in the environment, where people talk about my mother/my father". This scale includes a 10-item Likert-type measure represented on a 5-point continuum. (1= *strongly disagree*, 5=*strongly agree*). A copy of the scale is provided in the Appendix E.

Adjustment to Parental Loss Scale (APLS)

This scale was developed for this study by the researcher to assess each participant's adjustment to their new life. While this scale was constructed, some items were chosen from the Texas Revised Inventory of Grief (Faschingbauer, 1981) and this scale yielded an internal consistency reliability of .87 in the original study of Faschingbauer (1981). In the construction of this scale, firstly, 39 participants were given a 23-item scale. Following the analysis of the collected data, items having the highest corrected item-total correlation (all above .5) were chosen and the total number of items was decreased to 18 (reverse-scoring 9 items). This scale yielded a solid internal consistency reliability of .88 and scores ranged from 30 to 88 (Mean=66.59, Median=67, SD=13.71). The Adjustment Scale of Parental Loss (ASPL) consists of 18 Likert-type items such as "I avoid to talk about the death of my mother/my father." and "The idea of longing for reunion with my deceased parent, I preoccupy with my own death." In this scale, participants have to rate the items on a 5- point scale ranging from 1 (*strongly disagree*) to 5 (*strongly agree*). A copy of the scale is provided in Appendix F.

Procedure

Participants were approached via advertisement, which was posted on the bulletin board in the Psychology Department at Boğaziçi University. Participants were informed that this experiment would be conducted within the context of grief process research and that they would be given course credit in return for attending the experiment. Participants wrote down only their mobile phone number and the researcher called all participants to make an appointment. Because of ethical

concerns, they did not have to write their name or any other demographical information on the advertisement during the application.

The questionnaires were administrated individually in the Psychology Department at Boğaziçi University. Before starting the experiment, the participants were asked to fill out an informed consent form (see Appendix G) containing general information about the research and contact information of the researcher. Then the participants were given a package containing the scales used in the present study. The participants were asked not to put their names on these questionnaires and instead they were given a one digit code for identification. It took about 30 minutes for each subject to complete the questionnaire set.

After completion of all the scales, the researcher conversed with each participant approximately 10 minutes about their feelings and thoughts on remembering old memories of their parental loss. Finally, they were thanked for their participation.

CHAPTER III: RESULTS

Descriptive Characteristics of the Sample

 In this study, there were 39 participants, of which 61.5 percent were female, whereas male were 38.5%. The ages of the participants ranged from 18 to 25. Only 1 subject was 18-years old. Most of the participants' were 20 and 21 year old. Frequencies in terms of ages are presented in Table 1.

Table 1

Frequency Distributions according to Age and Gender

		Gender		
		Female	Male	Total
	18	1	0	1
	19	3	1	4
	20	5	3	8
	21	2	6	8
Age	22	2	1	3
	23	6	1	7
	24	1	1	2
	25	4	2	6
	Total	24	15	39

The participants, who have lost either their father or mother between the ages of 11 and 18, were divided into two groups regarding their gender. Also, they were categorized into two groups according to the age at which they lost their parent. In this context, the first group includes participants who were between 11 and 14 years old at the time of loss. The second group consists of those who were between 15 and 18 years old. Frequencies in terms of participant gender, age of parent loss and parent gender are given in Table 2.

Table 2

Frequency Distributions according to Participant Gender, Age of Parent Loss and Parent Gender

			Gender		
			Female	Male	Total
Age of Loss & Gender of Parent	11-14-year-old	Mother	7	3	10
		Father	6	5	11
	15-18-year-old	Mother	4	4	8
		Father	7	3	10
	Total		24	15	39

The information regarding the cause of death and participants' previous losses was obtained from the Demographic Information Form (DIF). Frequencies are given in Table 3 and Table 4, respectively.

Table 3

Frequency Distributions according to the Cause of Death

Cause of Death	
Accident	11
Illness	22
Suicide	1
Murder	4
Senility	1
Total	39

Table 4

Frequency Distributions according to the Previous Loss

Previous Loss	Yes	No
Grandparents	14	25

Descriptive Statistics

The means, standard deviations, minimum, and maximum values of the scores on the questionnaires [Mourning Rituals Questionnaire (MRQ), Social Support Availability and Satisfaction Scale (SSASS), Grief Reactions Scale (GRS), Coping with Parental Loss Scale (CPLS) and Adjustment to Parental Loss Scale (APLS)] are displayed in Table 5.

Table 5

Descriptive Statistics: Means, Standard Deviations, Minimum and Maximum Values

The scores	M	SD	Min	Max	N
MRQ	3.08	1.01	0	4	39
SSASS	53.79	10.39	31	79	39
SSASS-1	27.74	4.66	16	35	39
SSASS-2	26.05	8.48	12	45	39
GRS	73.56	20.52	38	110	39
CPLS	34.18	7.28	19	45	39
APLS	66.59	13.71	30	88	39

Note. MRQ: The Score of Mourning Ritual Questionnaire, SSASS: The Score of Social Support Availability and Satisfaction Scale, SSASS-1:The score of first subscale of Social Support Availability and Satisfaction Scale, SSASS-2:The second subscale of Social Support Availability and Satisfaction Scale GRS: The Score of Grief Reactions Scale, CPLS: The Score of Coping with Parental Loss, APLS: The score of Adjustment to Parental Loss Scale

Analyses

All the data analyses of this study were conducted by the use of the Statistical Package for Social Sciences (SPSS) program. First of all, a series of independent samples t tests were conducted in order to investigate for different categories of gender, age of loss, gender of lost parent and previous loss on each of the dependent (APLS) and independent variables (MRQ, SSASS-1, SSASS-2, GRS, CPLS).

Regarding these results, males and females did not differ in terms of having a supportive environment, grief reactions, coping approaches, and adjustment to parental loss. However, a gender difference was found on the scores of adherence to mourning rituals. According this finding, males attended to mourning rituals more than females $t(38) = -2.77$; $p < .01$. T test results are presented in Table 6.

Table 6.

T Test Results According to Child's Gender

The Score	M		SD		N		t	p
	m	f	m	f	m	f		
MRQ	3.60	2.75	.63	1.07	14	25	-2.77	.009*
Note. *p < .01 (two tailed). APLS: The score of Adjustment to Parental Loss Scale; m: Male, f: Female								

Secondly, no difference was found on the scores of the Mourning Ritual Questionnaire, the Social Support Availability and Satisfaction Scale, the Grief Reactions Scale and the Coping with Parental Loss Scale in terms of previous loss.

The findings also demonstrated that adjustment to parental loss differed in terms of parent gender. t (38) -2.93; *p* < .01. According to these findings, if the participant has lost his/her father, adjustment to parental loss is easier than if the lost parent is the mother. However, no difference was found on the scores of the Mourning Ritual Questionnaire, the Social Support Availability and Satisfaction Scale, the Grief Reactions Scale and the Coping with Parental Loss Scale in terms of parent gender. T test results are given in Table 7.

Table.7

T Test Results According to Gender of the Deceased Parent

	M		SD		N		t	p
	mt	ft	Mt	Ft	Mt	Ft		
APLS	60.06	72.19	14.90	10.09	18	21	-2.93	.006*
Note. *p < .01 (two tailed). APLS: The score of Adjustment to Parental Loss Scale, mt: Mother; ft: Father								

Moreover, the results indicated that the scores of the Adjustment to Parental Loss Scale differed in terms of age of loss. Regarding these results, if a participant has lost his/her parent between the ages of 11 and 14, adjustment to parental loss is more difficult than if the loss occurred between the ages of 15-18. t (38)=-.2.42; $p <$ .05. Otherwise, age of loss did not differ in terms of mourning ritual adherence, social support and coping strategies. The T test results are presented in Table 8.

Table 8

T Test Results According to Child's Age at the Time of Death

The Score	M		SD		N		t	p
	11-14	15-18	11-14	15-18	11-14	15-18		
APLS	61.95	72	14.97	9.97	21	18	-2.42	.020*
Note. *p < .05 (two tailed). APLS: The score of Adjustment to Parental Loss Scale								

Correlations:

Secondly, in order to test the relations among the variables Pearson product-moment correlation coefficients were calculated. The results showed that the scores on the Grief Reaction Scale were found to be significantly and negatively correlated with the scores on the Adjustment to Parental Loss Scale. r (38) = -.800, $p < .01$. These results indicated that lesser grief reactions are associated with better adjustment to parental loss.

The findings also demonstrated that the scores of the Mourning Ritual Questinnaire were found to be significantly and positively correlated with the scores on the Adjustment to Parental Loss Scale. r (38) = .323, $p < .05$. This finding

indicated that more adherence to mourning rituals is associated with better adjustment to parental loss.

Moreover, the scores of the Coping with Parental Loss Scale were found to be significantly and positively correlated with the scores of both subscales of the Social Support Availability and Satisfaction Scale r (38) = .595, $p < .01$; r (38) = .897, $p < .01$. and also with the total score of the Social Support Availability and Satisfaction Scale r (38) = .532, $p < .01$. These findings indicated that more social support in terms of both external social support availability and participants' subjective feelings about environmental support is related to better coping. The correlation coefficients are illustrated in Table 9

Table 9

Correlation Matrix for the Measures of the Study

	1	2	3	4	5	6	7
1. MRQ	1						
2. SSASS	.150	1					
3. SSASS-1	.140	.595**	1				
4. SSASS-2	.107	.897**	.178	1			
5. GRS	-.279	-.244	-.214	-.183	1		
6. CPLS	.106	.532**	.456**	.404*	45	1	
7. APLS	.323*	.142	.142	.096	-.800**	-.310	1

Note. *p < .05, **p < .01 (two tailed). MRQ: The Score of Mourning Ritual Questionnaire, SSASS: The Score of Social Support Availability and Satisfaction Scale, SSASS-1:The score of first subscale of Social Support Availability and Satisfaction Scale, SSASS-2:The second subscale of Social Support Availability and Satisfaction Scale GRS: The Score of Grief Reactions Scale, CPLS: The Score of Coping with Parental Loss, APLS: The score of Adjustment Scale of Parental Loss

Regression Analyses:

One of the aims of this study was to investigate the determinants of adjustment to parental loss. For this purpose, a stepwise linear regression analysis was performed. In the regression estimation the dependent variable was the scores of

the Adjustment to Parental Loss Scale and the independent variables were the scores of the Mourning Ritual Questionnaire, Social Support Availability and Satisfaction, Grief Reaction and Coping with Parental Loss Scales.

In the regression analyses each independent variable was used as a predictor. Moreover; the gender of the deceased parent, the participant's age at the time of loss, participant's gender, previous loss, cause of death and the participant's religious belief were added into the model as structural factors.

The results indicated that the effect of the Grief Reaction Scale scores on the Adjustment to Parental Loss Scale was significant in a negative way t (38) =-.697; p=.000. These results suggest that as the score of Grief Reaction Scale decreases, the score of Adjustment to Parental Loss increases.

However, the findings also demonstrated that the effect of the Mourning Ritual Scale scores, the total score of Social Support Availability and Satisfaction Scale, the effect of the first subscale of Social Support Availability and Satisfaction Scale, the effect of the second subscale of Social Support Availability and Satisfaction Scale and Coping with Parental Loss Scale on the score of Adjustment to Parental Loss Scale were not significant. Therefore, they were excluded from the model.

Furthermore, the results indicated that gender of the lost parent [t(38)=.305; p=.001] and the participant's age at the time of loss, [t(38)=.213; p=.016] have a positive effect on the score of Adjustment to Parental Loss. These results suggest that as the age at the time of loss increases, the score of adjustment increases. Secondly, if the lost parent is a father, adjustment to loss is easier.

On the other hand, the effects of participant's gender, previous loss, the cause of death and participants' religious belief on adjustment to parental loss were not significant. These findings indicated that young men and women do not differ in

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terms of their adjustment to parental loss. Also, experiencing a previous loss or the cause of the death and the intensity of religious belief has no effect on adjustment to the parental loss. Therefore, they were also excluded from the model. The regression results are given in Table 10.

Table 10

Regression Results

Independent Variables	β	t	p
GRS	-.697	-8.11	.000***
Gender of Parent	.305	3.62	.001**
Age of Loss	.213	2.52	.016*
Note. *p < .05, **p < .01, ***p < .001 GRS: The Score of Grief Reactions Scale			

Summary of the Results:

To sum up, grief reactions have a negative effect on adjustment to parental loss. These results suggest that as the scores of the Grief Reaction Scale decreases the score of the Adjustment to Parental Loss Scale increases. It means that less grief reactions, the more adjustment to parental loss.

Furthermore, regarding these results, if a participant has lost his/her parent between the ages of 11 and 14, adjustment to parental loss is more difficult than between the ages of 15-18.

Concomitantly, the findings also demonstrated that the scores of the Adjustment to Parental Loss Scale differed in terms of parent gender. If a participant has lost his/her father, adjustment to parental loss is easier than if the lost parent is mother. According to these findings, it appears that losing a mother has a worse

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effect than losing a father; similarly losing a parent at a younger age has a worse effect than in later years.

Finally, no significant effects of adherence to mourning rituals, environmental support, and coping approaches on adjustment to parental loss were found.

CHAPTER IV: DISCUSSION

This study highlighted the factors that help young adults who have lost one parent between the ages of 11 and 18, in their adaptation to their lives. The present study focused on two issues, (a) the effects of adolescents' grief reactions, adherence to mourning rituals, social environment, coping strategies on the adjustment to parental loss and (b) the effects of gender, age of loss, sex of the lost parent, previous loss on young adults' adaptation to their lives.

The first hypothesis stated that more adherence to mourning rituals, more social support and more coping approaches leads to better adjustment to parental loss were not supported. The second hypothesis which stated that losing a mother has a worse effect than losing a father and losing a parent at a younger age has a worse effect on adjustment to the death of a parent than in later years were supported. These findings are discussed below.

The Effects of Grief Reactions on Adjustment to Parental Loss

The present study indicates that less intense grief reactions lead to better adjustment at least two years after the loss. This finding is consistent with research that hints at a link between the extent of grief reactions and later adjustment. However, it is also possible that those participants, who currently have better adjustment, retrospectively underestimate their previous grief. Which explanation is more accurate is not clear and awaits prospective studies.

The literature reveals that grief reactions have significant effects on to parental loss, which seems to be compatible with the expectation that the long-term

consequences only of intense grief reactions become manifest in adolescents later in life. According to Siegel, Karus and Raveis (1996), these long-term consequences may include depression, difficulty with intimate relationships, personality disturbances, or ongoing somatization, which makes it difficult to adapt to a new life after the death of a parent. Dowdney (2000) pointed out that losing a parent during the adolescence phase has some short-term effects such as depression, dysphoria, anxiety, guilt, despair, suicidal ideation, aggression, or anger. Moreover, the distal effects of the experience of losing a parent in adolescence might include adult depression, psychiatric disorder, problems with intimate relationships, problems with self-image and confidence, impaired emotional development (Balk 1991; Balk, 1998; Dowdney, 2000). In a prospective study, bereaved children were found to be more likely to be depressed, anxious, and disruptive behavior than their nonbereaved peers (Kranzler, Shaffer, Wasserman, & Davies, 1989).

Also, it should be noted that the distinguishing complicated grief from normative mourning process plays a significant role in terms of eventual adjustment following the death of a loved one (Gray, Prigerson & Litz, 2004). With respect to this explanation, it is important to emphasize that the grief reactions of the participants in this sample were measured through the self- report about their responses within a year after the parental loss. To understand the long-terms effects of the grief reactions on adjustment process completely, prospective studies could help getting more accurate results.

The Effects of Mourning Rituals Adherence and Religious Belief on

Adjustment to Parental Loss

One interesting and unexpected finding to emerge was that the score of the Mourning Ritual Questionnaire has no effect on the Adjustment to Parental Loss Scale. This finding is hard to explain because considering bereavement theories (Bowlby, 1980; Worden, 1991), the bereaved person has to accept the reality of loss and the irreversibility of death during the mourning process. In this context, attending mourning rituals should mediate acceptance of the certainty of death, thereby adjustment to parental loss could be easier. However, according to the regression results adherence to mourning rituals had no effect on adjustment to parental loss. Still it is important to note that the score of Mourning Ritual Questionnaire were found to be significantly and positively correlated with the scores on the Adjustment to Parental Loss Scale. Some tentative explanations can be made regarding this finding but this point clearly warrants further research. One reason accounting for this finding may be the lack of variance among the scores of the Mourning Ritual Questionnaire. 30 participants out of the whole sample claimed that they attended at least three rituals out of the four mentioned, whereas only one participant attended none of them. Similarly, considering participants' religious belief, the same problem related with variance occurred. Participants, who described their belief as "strong" and "very strong" were two thirds of the sample. Therefore it can be assumed that the measure of religious beliefs and rituals do not distinguish the participants in this sample.

Furthermore, regarding the t test results in terms of child's gender, it was found that males attended mourning rituals more than females. This finding may be associated with the cultural differences in mourning rituals, because mourning may

vary from person to person as well as one culture to the next. Goldman (1946) claimed that mourning is seen as the cultural experience of grief. In this perspective, according the Muslim mourning rituals, women are not expected to attend these rituals such as going to the cemetery. (Jonker 1997, Sultan 2003). Since there is no other Turkish literature on this topic, further research is necessary.

The Effects of the Age of Child on Adjustment to Parental Loss

Another focus of interest in the current study was to investigate the effects of the age of child at the time of loss on adjustment to parental loss. In the literature, there is a growing body of theoretical background and previous research that has been completed on the topic of the importance of the child's age at the time of the parental loss. For the first five years of life and early adolescence are widely believed by loss researchers to be critical periods (Saler and Skolnick, 1992).

Lots of studies on this issue referred to the Piagetian framework to demonstrate how children and adolescent's react to death according to their cognitive developmental level. According to Freud (1914) and Bowlby (1960), although the infants and toddler's cognitive abilities are limited, they have emotional responses to the death of loved one such as crying or over-attachment to material things. It is assumed that once children achieved concrete operational stage, they begin to perceive the permanence of death and once they have attained formal operational stage in adolescent, death is understood completely. Moreover, they question the unfairness of death and the meaning of life (Balk, 1996, cited in Dowdney, 2000). Regarding to Black (1998), suicidal ideation in adolescents after parental loss begin to increase because of longing for reunion with the deceased parent.

A glance at previous studies that focused on this issue reveals that parental loss in adolescents is associated with increasing suicidal thoughts (Beverly, Cubiss, Dunne, Lewin and Kelly 1990; Weller E, Weller R, and Wiltsie Pugh 1996).

In the light of the explanation above, the worse effect of losing a parent at a younger age on adjustment to parental loss can be explained by the fact of the uncompleted concept of death during early adolescence.

In the current study; as expected, the results indicated that losing a parent at a younger age has a worse effect on adjustment to parental loss than in later years. Adolescents, who lost his/her, parent between the ages of 11-14 have more difficulty than between the ages of 15-18 in their adjustment to parental loss.

Presumably early adolescents (11-14) have not yet completed their achievement of formal operations and can not think in a more abstract manner about death and their loss. Middle adolescents (15-18) however are possibly better able to rationally understand death, as well as having more of an ability to regulate their emotions. Further young adolescents are obviously more dependent on their parents and possibly suffered a more traumatic experience as a result of their loss.

Morever, in the present study, adolescents who lost their parent at a younger age reported more distress and anxiety. This pattern can be explained by a similar results of the research of Canetti et al (2000), which showed that losing a parent at a younger age associated with lower level of well-being and by the finding of Raveis, Siegel and Karus (1998) study, which claimed that the younger children rated higher levels of state anxiety than older children. These results support the explanation offered above.

Overall, the findings are in agreement with research that has found that the younger age of child at the time of loss causes to more vulnerability to distress following the parental loss in comparison with losing a parent at an older age.

The Effects of the Gender of Child on Adjustment to Parental Loss

Inconsistent with the previous findings regarding the effects of gender of child on the adjustment to parental loss, the current study does not reveal sex difference on the Adjustment to Parental Loss scores. Previous research on gender differences in engaging in the mourning process has shown mixed findings in regard to whether boys or girls are more vulnerable to distress or negative consequences after a parental loss (Thompson et al., 1998).

Concerning gender differences in adjustment to parental loss, On the one hand, Sugawara (1991) found that boys are more vulnerable to distress following the death of a parent. Similarly; the findings of Worden, Davies, Mccown (1999)' study are seem to be consistent the above cited study. Regarding to comparison between parent loss and sibling loss, they found that boys were more affected by parental loss than girls, whereas girls responded more negative than boys to sibling loss.

To the contrary, Raveis, Siegel, and Karus (1998) reported that girls have more depressive symptoms than boys after a parental loss due to cancer. Some similar results were found by Rukhsana and Rukhsana (2004)'s study in which the effect of parental loss on Pakistani adolescents' coping with stress were examined. The results suggest that girls are more sensitive to distress following parent death than boys. Furthermore, Toksoy (2005) indicated that the psychosocial consequences of parental loss on adolescent girls have a worse effect than on boys in Turkish population. It may be speculated that this variability in findings might stem from that different tests that were used in different samples as well as in different cultures and countries.

In the current study, on the other hand, males and females did not differ from each other in terms of the adjustment to parental loss. This seems to be parallel to

Balt et all's (1998) findings which demonstrated no sex difference in terms of engaging the mourning process. They found that, whereas females are more occupied with emotional distress after the death, males are focused on the alteration of their life events. Consistent with this finding, Thompson et all (1998) also did not discover gender difference on the psychological consequences associated with parental loss in adolescence.

It is also possible that parental loss is such a major trauma that its effect in adolescence appears to wipe out any differences in the possible reactions of boys and girls. Presumably adolescents view death similarly regardless of their gender.

It is also important to note that the sample size of the study was restricted to thirty-nine subject and the numbers of male and female participants were not equal to each other (25 female and 14 male). Thereby, future studies should involve larger sample sizes to investigate this finding much better.

The Effects of the Gender of the Lost Parent on Adjustment to Parental Loss

Another interesting finding to emerge was that regardless of the gender of the child, losing a mother has a worse effect than losing a father during adolescence on their later adaptation to the new form of their life. These results converge in part with the prior studies of Rukhsana and Rukhsana (2004) and Toksoy (2005). Namely, it was demonstrated that losing a mother had enormous effect on Pakistani adolescents, but effect on the females' coping process after parental loss was worse compared to their male counterparts. (Rukhsana and Rukhsana 2004). In addition, Toksoy (2005) revealed that psychotic symptoms in adolescents who lost their mother were higher than adolescents who lost their father in a Turkish sample.

On the other hand, the literature also provides some evidence on the significance of father absence (Hetherington, 1972; Lynn and Sawrey, 1991). The direct effects of father absence were assumed to be more damaging to the boy's development than to the girl's, because the girl who had lost her father has the same sex parent as an identification figure. However, following the death of a father, the socioeconomic status of the family could be changed. Therefore, children can be affected regardless of their gender.

The worse effect of maternal loss tends to support the idea that, especially younger adolescents are more dependent on their mothers. There is a significant amount of research in Turkey that indicates that children are more attached to their mothers than their fathers (Fişek, 2002; Halfon, 2006; Seçkin, 1996; Sefer, 2006; Sunar & Fisek, 2005). These results are in line with a stronger attachment to the lost mother.

The Effects of Coping on Adjustment to Parental Loss

As unexpected, finding was that there were no effects of the total amount of coping approaches on adjustment to parental loss. In the literature, Rukhsana & Rukhsana (2007) and Balk et al. (1998) pointed out the relationship between the adolescents' coping process with their mourning and the negative consequences of losing a parent.

However, this inconsistency with the previous studies can be explained by the fact that the focus of the previous research was the link between the type of coping strategies and distress after the parental loss, whereas the present study highlighted the effects of the total amount of coping approaches of adolescents. To the author's

knowledge, there is no previous research about this topic in a Turkish sample, therefore further investigation is needed.

The Effects of Social Support on Adjustment to Parental Loss

Contrary to expectations, social support has no effect on the participants' adjustment to parental loss. On the one hand, previous studies indicated that the level of openness in surviving parent-child communication (Raveis, Siegel & Karus, 1998), having supportive network members (Marwit & Carusa, 1998) and getting the benefit of peer-support (Ellis & Granger, 2002) play an important role for a healthy mourning process during adolescence. On the other hand, the literature provides some evidence that adolescents do not want to express their feelings due to a fear of seeming abnormal or losing control (Siegelman, 1999) and tend to keep their mourning from both adults and peers (Corr & Balk, 1996). Moreover, social withdrawal is listed among general reactions following the death of a parent (Worden, 2002) and adolescents may refuse to participate in family activities or seek support from their peers (Dowdney, 2000).

In the light of these findings, it can be assumed that although adolescents are still dependent on their families in terms of emotional support and guidance, it is also possible to show social-withdrawal and to avoid expressing their feelings to some degree. In this context, social support availability and satisfaction scale assessed the participant's environmental support and their willingness in talking about their feelings with this network only during the year following the death. Further these adolescents may have been unwilling to attribute their adjustment to others' support, a fairly typical adolescent claim of independence. Since which explanation is more accurate is not clear, it awaits longitudinal studies.

Limitations and Further Research

There are some shortcomings of this study. First of all, the sample size was restricted to thirty-nine subjects, which limits the generalization of the results. A larger sample size will also allow both for the establishment of further reliability of all the scales in Turkish samples and enough variance to get more clear results on the effects of the scales. The construct validity of the scales should also be tested with other participant groups and other indicators of adjustment to life after loss. A measure of general well being in addition to the current adjustment scale would have measured the validity of the results.

Another study weakness was the reliance on self-report data. No clinical interviews were conducted and no diagnostic information was available regarding the adolescents in this sample. A qualitative research format may also be informative.

The study limitations notwithstanding, there are several implications based on the findings that can inform directions for further research and guide the design of preventive interventions for bereaved adolescents. Although a number of studies have examined the psychosocial mood of the children, less attention has been given to understanding the facilitating factors of children's –especially adolescents- adjustment to loss. To the author's knowledge, this is the first retrospective study about adolescent bereavement in a Turkish sample to date that examines the effects of adherence to mourning rituals, grief reactions, environmental support and coping processes in young adults' eventual adaptation to their life. Both for extending the findings of this study and developing interventions programs for bereaved adolescents to longitudinal studies could be useful.

APPENDICES

APPENDIX A

Demographic Information Form

DEMOGRAFIK BILGI FORMU

1. Cinsiyetiniz: Kız ( ) Erkek ( )

2. Yaşınız:

3. Ölen ebeveyniniz: Anne ( ) Baba ( )   Her ikisi de ( )

4. Anneniz/babanız öldüğünde kaç yaşındaydınız?

5. Annenizin/babanızın ölümünden daha evvel sizin için önemli olan birini
   kaybettiniz mi?
   Evet ( )   Kim? (   )
   Hayır ( )

6. Annenizin/babanızın ölüm sebebi nedir?
   Kaza ( )
   Hastalık ( ) …. Ismini belirtiniz (   )
   Intihar ( )
   Cinayet ( )
   Yaşlılık ( )
   Doğal Afet ( )…. Türünü belirtiniz (   )

APPENDIX B

Mourning Rituals Questionnaire

Aşağıda yer alan sorular ölüm sonrasındaki yas ritüelleri hakkında ifadeler içermektedir. Kimileri bu ritüellere katılmış olabileceği gibi, kimileri de katılmamış olabilir. Sizden istediğimiz verilen ölçek üzerinden size en uygun olduğunu düşündüğünüz seçeneği yuvarlak içine alarak belirtmeniz.

1. Annenizin/babanızın ölümünden sonra camiideki/kilisedeki cenaze törenine katıldınız mı?

   0 Katılmadım 1 Katıldım

2. Annenizin/babanızın ölümünden sonra kabristandaki defin işlemine katıldınız mı?

   0 Katılmadım 1 Katıldım

3. Annenizin/babanızın ölümünden sonra, definden sonra evde düzenlenen toplantıya katıldınız mı?

   0 Katılmadım 1 Katıldım

4. Cenaze töreninden sonraki bir tarihte ölen kişiyi anmak için herhangi bir dini yada bir diğer tören/toplantı yapıldıysa siz de katıldınız mı?

   0 Böyle bir toplantı yapılmadı   0 Katılmadım   1 Katıldım

1. Dini inancınızı nasıl tanımlarsınız?

   1 Hiç yok   2 Biraz   3 Kuvvetli   4 Çok kuvvetli

APPENDIX C

Social Support Availability and Satisfaction Scale

Aşağıda, 1'den 8'e kadar yer alan cümleler, anneniz ve babanızla geçmişteki ve şimdiki ilişkileriniz hakkında bir takım ifadeler içermektedir. Lütfen aşağıdaki ifadelerin sizin için ne derece geçerli olduğunu verilen ölçek üzerinden size en uygun olduğunu düşündüğünüz rakamı yuvarlak içine alarak belirtiniz.

1. Sağ kalan ebeveynimle ölümden önceki ilişkimiz yakındı.

1 Hiç geçerli değil   2 az derece geçerli   3 biraz geçerli   4 oldukça geçerli   5 tamamen geçerli

2. Sağ kalan ebeveynimle ölümden önceki ilişkimizde anlaşmazlıklar yaşanırdı.

1 Hiç geçerli değil   2 az derece geçerli   3 biraz geçerli   4 oldukça geçerli   5 tamamen geçerli

3. Annemin/babamın ölümünden sonra aile içinde bana gösterilen ilgi arttı.

1 Hiç geçerli değil   2 az derece geçerli   3 biraz geçerli   4 oldukça geçerli   5 tamamen geçerli

4. Annemin/babamın ölümünden sonra sağ kalan ebeveynimden manevi destek gördüm.

1 Hiç geçerli değil   2 az derece geçerli   3 biraz geçerli   4 oldukça geçerli   5 tamamen geçerli

5. Annemin/babamın ölümünden sonra yakın akrabalarımdan (teyze,amca,dede vb.) manevi destek gördüm.

1 Hiç geçerli değil   2 az derece geçerli   3 biraz geçerli   4 oldukça geçerli   5 tamamen geçerli

6. Annemin/babamın ölümünden sonra arkadaşlarımdan manevi destek gördüm

1 Hiç geçerli değil   2 az derece geçerli   3 biraz geçerli   4 oldukça geçerli   5 tamamen geçerli

7. Annemin/babamın ölümünden sonra komşularımdan manevi destek gördüm

1 Hiç geçerli değil   2 az derece geçerli   3 biraz geçerli   4 oldukça geçerli   5 tamamen geçerli

8. Annemin/babamın ölümünden sonra yakın akrabalarımdan maddi destek gördüm

1 Hiç geçerli değil   2 az derece geçerli   3 biraz geçerli   4 oldukça geçerli   5 tamamen geçerli

Anne/babanızın ölümü sizi çok üzmüş, endişelendirmiş veya sarsmış olabilir. Bu, üstünde sürekli düşünmüş olabileceğiniz gibi, uzun zaman düşünmekten kaçındığınız bir konu da olabilir. Lütfen aşağıda 9'dan 13'e kadar yer alan soruları annenizi/babanızı kaybettikten sonraki yılınızı düşünerek, verilen ölçek üzerinden size en uygun olduğunu düşündüğünüz seçeneği yuvarlak içine alarak belirtiniz.

9. Annemi/babamı kaybettikten sonraki yıl içerisinde hislerim hakkında sağ kalan ebeveynimle konuştum.

1 Hiç geçerli değil   2 az derece geçerli   3 biraz geçerli   4 oldukça geçerli   5 tamamen geçerli

10. Annemi/babamı kaybettikten sonraki yıl içerisinde hislerim hakkında yakın akrabalarımla konuştum.

1 Hiç geçerli değil   2 az derece geçerli   3 biraz geçerli   4 oldukça geçerli   5 tamamen geçerli

11. Annemi/babamı kaybettikten sonraki yıl içerisinde hislerim hakkında en yakın arkadaşlarımla konuştum.

1 Hiç geçerli değil   2 az derece geçerli   3 biraz geçerli   4 oldukça geçerli   5 tamamen geçerli

12. Annemi/babamı kaybettikten sonraki yıl içerisinde hislerim hakkında psikiyatrist / psikolog ile konuştum.

1 Hiç geçerli değil   2 az derece geçerli   3 biraz geçerli   4 oldukça geçerli   5 tamamen geçerli

13. Annemi/babamı kaybettikten sonraki yıl içerisinde hislerim hakkında kimseyle konuşmak istemedim.

1 Hiç geçerli değil   2 az derece geçerli   3 biraz geçerli   4 oldukça geçerli   5 tamamen geçerli

Lütfen aşağıda 14'den 20'ye kadar yer alan soruları bu olay hakkında en sık konuştuğunuz kişileri düşünerek cevaplayınız.

14. Yaşadıklarımla ilgili duygularımı çevremdekilerle paylaşabildim.

1 Hiç geçerli değil   2 az derece geçerli   3 biraz geçerli   4 oldukça geçerli   5 tamamen geçerli

15. Bu konu ile ilgili konuşma ihtiyacımı giderdim.

1 Hiç geçerli değil   2 az derece geçerli   3 biraz geçerli   4 oldukça geçerli   5 tamamen geçerli

16. Yaşadıklarımı/hissettiklerimi paylaşmak kolaydı.

1 Hiç geçerli değil   2 az derece geçerli   3 biraz geçerli   4 oldukça geçerli   5 tamamen geçerli

17. Hissettiklerimi paylaşmanın bu kişileri rahatsız ettiğini ve/veya onlar tarafından anlaşılmayacağımı düşündüm.

1 Hiç geçerli değil   2 az derece geçerli   3 biraz geçerli   4 oldukça geçerli   5 tamamen geçerli

18. Bu kişilerin rahatsız olabileceğini ve/veya onlar tarafından anlaşılmayacağımı düşünmek beni hislerimi paylaşmaktan alıkoydu.

1 Hiç geçerli değil   2 az derece geçerli   3 biraz geçerli   4 oldukça geçerli   5 tamamen geçerli

19. Bu kişilerin verdiğim tepkileri ve hissettiklerimi önemsemediğini ve/veya küçümsediğini düşündüm.

1 Hiç geçerli değil   2 az derece geçerli   3 biraz geçerli   4 oldukça geçerli   5 tamamen geçerli

20. Hissettiklerim hakkında konuşmaya çalıştığımda bu kişiler beni daha fazla anlatmaya, konuşmaya teşvik etti.

1 Hiç geçerli değil   2 az derece geçerli   3 biraz geçerli   4 oldukça geçerli   5 tamamen geçerli

APPENDIX D

Grief Reaction Scale

Aşağıda, sevilen birinin kaybından sonra yaşanabilecek çeşitli fiziksel ve duygusal tepkiler sıralanmıştır. Sizden istediğimiz annenizi/babanızı kaybettikten sonraki 1 yıl içinde aşağıda belirtilen durumları ne sıklıkta yaşadığınızı verilen ölçek üzerinde size uygun olduğunu düşündüğünüz seçeneği yuvarlak içine alarak belirtiniz.

1 Hiç   2 Nadiren   3 Biraz   4 Oldukça   5 Çok fazla

1. Uyku düzeninde değişiklik

   1   2   3   4   5

2. Iştah durumunda değişiklik

   1   2   3   4   5

3. Baş, mide, sırt ağrısı gibi fiziksel rahatsızlıklar

   1   2   3   4   5

4. Aşırı tepkisellik ve hareketlilik

   1   2   3   4   5

5. Yalnızlık hissi

   1   2   3   4   5

6. Çaresizlik hissi

   1   2   3   4   5

7. Umutsuzluk hissi

   1   2   3   4   5

8. Cezalandırılmışlık hissi

   1   2   3   4   5

9. Hayal kurma

   1   2   3   4   5

10. Ölümle ilgili kabuslar görmek

   1   2   3   4   5

11. Tepkisizlik, donukluk ve hissizlik hali

   1   2   3   4   5

12. Aşırı sinirlilik

   1   2   3   4   5

13. Sık sık ağlama

   1   2   3   4   5

14. Gizlice ağlama

   1   2   3   4   5

15. Ölen ebeveyninizi hatırlatacak nesnelerden uzak durma

   1   2   3   4   5

16. Ölen ebeveyninizi hatırlatacak mekan ve aktivitelerden kaçınma

   1   2   3   4   5

17. Kendinize yönelik kızgınlık

   1   2   3   4   5

18. Kendinize yönelik suçluluk

   1   2   3   4   5

19. Ölen ebeveyninize yönelik kızgınlık

   1   2   3   4   5

20. Kendinize zarar verecek davranışlarda bulunma

   1   2   3   4   5

21. Intihar düşüncesi

   1   2   3   4   5

22. Yapmanız gereken işlere konsantre olmada güçlük

   1   2   3   4   5

23. Kendi geleceğiniz hakkında kaygı ve endişenin artması

   1   2   3   4   5

24. Kendinizi anne/babası sağ olan akranlarınızdan daha geride hissetme

   1   2   3   4   5

25. Başkalarını önemseme yetisini kaybetme

   1   2   3   4   5

APPENDIX E

Coping with Parental Loss Scale

Annenizi/babanızı kaybettikten sonraki yıl içinde duygularınızla baş etmek için neler yaptınız? Lütfen aşağıdaki cümlelerin sizin için ne ölçüde geçerli olup olmadığını verilen ölçek üzerinde size uygun olduğunu düşündüğünüz rakamı yuvarlak içine alarak belirtiniz.

1 Hiç geçerli değil   2 az derece geçerli   3 biraz geçerli 4 oldukça geçerli   5 tamamen geçerli

1. Ölümü iyi bir sebebe bağlamaya çalıştım

   1   2   3   4   5

2. Anne/babamın şuan cennette/iyi bir yerde olduğuna inandım

   1   2   3   4   5

3. Annemin/babamın fotoğraflarına bakmak istemedim.

   1   2   3   4   5

4. Hayatımda hiçbir şey değişmemiş gibi davrandım

   1   2   3   4   5

5. Öldükten sonra annemi/babamı yeniden göreceğimi bilmek beni rahatlattı

   1   2   3   4   5

6. Çevremdekilerle bu konu üzerine konuşup, rahatlamak istedim.

   1   2   3   4   5

7. Hislerimi bastırıp, görmezden geldim.

   1   2   3   4   5

8. Annemin/babamın fotoğrafını odama yerleştirdim.

   1   2   3   4   5

9. Annemin/babamın hakkında konuşulan ortamlarda bulunmadım

   1   2   3   4   5

10. Her an benim yanımda olup, yaptıklarımı görebildiğine inandım.

   1   2   3   4   5

APPENDIX F

Adjustment to Parental Loss Scale

Son 6 ayınızı düşünerek, lütfen aşağıdaki ifadelere ne ölçüde katılıp katılmadığınızı verilen ölçek üzerinde size uygun olduğunu düşündüğünüz rakamı yuvarlak içine alarak belirtiniz.

1 Hiç geçerli değil   2 az derece geçerli   3 biraz geçerli   4 oldukça geçerli   5 tamamen geçerli

1. Annemin/babamın ölümü hakkında konuşmaktan kaçınıyorum.

    1   2   3   4   5

2. Annemin/babamın ölümünü bilen biriyle karşılaşmaktan rahatsızlık duymuyorum.

    1   2   3   4   5

3. Annemin/babamın neden öldüğünü halen kendi içimde sorguluyorum.

    1   2   3   4   5

4. Ölen anne/babama karşı yeterince iyi davrandığımı düşünüyorum.

    1   2   3   4   5

5. Ölen anne/babama yeniden kavuşabileceğim düşüncesiyle kafamı kendi ölümümle ilgili düşüncelerle meşgul ediyorum.

    1   2   3   4   5

6. Ölen annemi/babamı mutsuz etmiş olduğumu düşünüyorum.

    1   2   3   4   5

7. Ölen anneme/babama karşı kızgınlık duymuyorum.

    1   2   3   4   5

8. Annemin/babamın ölümünden beri kendimi donuklaşmış gibi hissediyorum.

    1   2   3   4   5

9. Annemin/babamın ölümü yüzünden suçluluk hissetmiyorum.

    1   2   3   4   5

10. Kendimden bir parçanın da onlarla beraber öldüğüne inanıyorum.

    1   2   3   4   5

11. Annem/babam öldüğü için kendimi insanlardan uzaklaşmış hissediyorum.

    1   2   3   4   5

12. Böyle bir kayıp yaşamak dünyaya bakışımı olumlu yönde değiştirdi.

    1   2   3   4   5

13. Kendimi akranlarıma göre daha çok olgunlaşmış hissediyorum.

    1   2   3   4   5

14. Annem/babam öldüğü için kendime yabancılaştığımı hissediyorum.

    1   2   3   4   5

15. Annem/babam öldüğü için kendimi anne babası sağ olan kişilerden daha geride hissediyorum.

    1   2   3   4   5

16. Annemin/babamın ölümünü kabul etmekte güçlük çekmiyorum.

    1   2   3   4   5

17. Ölen annemi/babamı hatırlatacak mekanlarda bulunmak beni rahatsız etmiyor.

    1   2   3   4   5

18. Çevremdeki insanların beni anlayabileceklerini düşünüyorum.

    1   2   3   4   5

APPENDIX G

Informed Consent Form

Araştırmayı destekleyen kurum: Boğaziçi Üniversitesi Psikoloji Bölümü
Araştırmanın Adı: Anne/Baba Kaybı Yaşamış Genç Yetişkinlerin Yasa Uyum Süreci
Araştırmacının Adı: Duygu Coşkun
Adres: Kazım Karabekir Sokak. Kaya apt. No:7/2 34738 Erenköy/Istanbul
Telefon: 0535 521 13 81

Bu çalışma anket doldurulmasını gerektiren yaklaşık 30 dakika süren bir çalışmadır. Araştırma esnasında herhangi bir rahatsızlık duyduğunuz anda çalışmayı bırakabilirsiniz.

Araştırma süresince elde edilen tüm kişisel bilgiler gizli tutulacaktır. Her katılımcı için bir numara belirlenecek ve toplanan bilgiler bu numarayla kaydedilecektir. Araştırma süresince herhangi bir ses ya da görüntü kaydı yapılmayacaktır.

Çalışma ile ilgili sorunuz olduğunda yardım isteyebilirsiniz. Araştırmaya katılımınızla ilgili herhangi bir sorun yaşarsanız ya da çalışmayla ilgili bilgi almak isterseniz, Boğaziçi Üniversitesi Psikoloji Bölümü'nden Duygu Coşkun (duyguucoskun@yahoo.com) ile iletişime geçebilirsiniz.

Bu bilgilendirme ve izin formunu okudum ve Boğaziçi Üniversitesi Psikoloji Bölümü tarafından yürütülen tez araştırmasında kullanmak üzere yapılan bu çalışmaya katılmayı kabul ediyorum.

Formun bir örneğini aldım/almak istemiyorum.

    Ad- Soyad: **Tarih:**

    İmza:

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