PSYCHOLOGICAL SENSE OF COMMUNITY AND SOCIAL SUPPORT AMONG COLLEGE STUDENTS WHO EXPERIENCE GRIEF

By

RACHEL DIANE SMITH MCNALLY

Bachelor of Arts in Psychology Pepperdine University Malibu, CA 2007

Master of Science in Clinical Psychology Abilene Christian University Abilene, TX 2009

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Dissertation Approved: Carrie L. Winterowd, PhD Dissertation Adviser Julie Koch, PhD Committee Member Hugh Crethar, PhD Committee Member John Romans, PhD Committee Member John Foubert, PhD Outside Committee Member

DEDICATION

I would like to dedicate this work in loving memory to my grandfather, John D. Bruton, Jr. I am so fortunate to have been able to spend the time I had with you and to call you my Granddaddy. Your life and love continue to inspire me daily. I appreciate the times that we were able to spend together and the relationship we had. I have carried your love of learning throughout my education and have felt your encouragement, especially throughout this project. Thank you for being such an important part of my life, sharing your love for God with me, and letting me know how much you love me. Your love is with me always.

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Name: RACHEL D. S. MCNALLY

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Abstract: Researchers have found that 22 to 30 percent of students have experienced a death loss of a friend or close friend (Balk, 1997). Due to the unique environment of a university, further research is needed to understand how perceived social support, emotional closeness, and psychological sense of community are related to past and present grief in a college student population. The purposes of the present study were to explore the correlates and predictors of current and past grief behaviors in a sample of undergraduate college students. The relationships between and among perceived social support from friends and family, the duration (in months) since college students' death loss, their emotional closeness to the deceased person, and psychological sense of community, and their experiences of current grief and past grief behaviors were explored. One hundred and thirty-one undergraduate college students completed an online questionnaire. Results indicated a correlation between perceived social support with friends and family and psychological sense of community. Additionally, results showed a predictive relationship between emotional closeness, and past and present grief, and psychological sense of community being related to past grief. Follow up analyses indicated statistically significant group differences for White college students and college students of Color, with variables in White college students being predictors of grief and not in college students of Color. Study limitations, implications for theory and practice, and considerations for future research are discussed

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CHAPTER 1

INTRODUCTION

Grief

Grief has been defined as a strong reaction to a death loss that is often seen through intense feelings, behaviors, or emotional suffering that is dictated by traditions, customs, rituals, and values of society (Freud, 1917; Burnell & Burnell, 1989). When a death loss occurs the individual begins to explore ramifications of the loss including the impact the death has caused and the various emotions experienced. This process is known as the grief process. The grief process can be impacted by the various stages of grief, the symptoms that accompany grief, and presenting psychosocial factors. Due to the complexity of the variability seen in grief, it is beneficial to fully explore and understand the facets of grief.

There are various stages in which grief is experienced when an individual suffers the death loss of a family member or close friend (Bowlby, 1980; Burnell & Burnell, 1989; Prigerson & Jacobs, 2001; Kubler-Ross & Kessler, 2005). Progressing through the stages help the individual accept the reality of the loss, acknowledge that grieving is painful, adjust to the changed environment without the help or companionship of the deceased, and be able to withdraw much of the energy that has been invested in the

deceased and reinvest into new relationships (Burnell & Burnell, 1989; Worden, 2002). Bowlby (1980) and Kubler-Ross and Kessler (2005) identify the stages of grief as 1) phase of numbing or denial, 2) phase of anger, 3) phase of yearning or bargaining, 4) phase of disorganization or depression, and 5) phase of reorganization or acceptance. Each defined stage has specific characteristics, symptoms, and signs.

The first identified stage of the grief process is the phase of numbing or denial. During this stage, the emotions of shock or numbness are present due to the realization that the deceased individual is actually gone. The individual might also feel very tense and apprehensive about the future during this stage (Bowlby, 1980). It is during this stage that an individual often finds the ability to survive and cope with the intense emotions associated with the initial loss (Bowlby, 1980; Kubler-Ross & Kessler, 2005).

The next identified stage of the grieving process is phase of anger. The anger that is present during this stage is normally directed towards friends, family members, God, the deceased, or self (Worden, 2002; Kubler-Ross & Kessler, 2005). While the anger in this stage is often the most visible emotion, there are often other suppressed feelings that are experienced during this stage that are often too difficult to process for an individual such as sadness, panic, hurt, guilt, or loneliness (Bowlby, 1980; Kubler-Ross & Kessler, 2005).

The phase of yearning or bargaining allows the individual a way to get reprieve from the pain of the loss (Bowlby, 1980; Kubler-Ross & Kessler, 2005). During the bargaining stage, the grieving individual focuses on issues of the past may or may not have been resolved. When there is a shift of focus to the future, an individual often

recognizes that the past experiences with the deceased cannot be changed and the feeling of sadness is now present.

The phase of disorganization or depression stage is important because it allows an individual to process the loss in its entirety and explore the feelings of sadness, loneliness, and emptiness (Bowlby, 1980; Kubler-Ross & Kessler, 2005). The stage is the most commonly recognized stage of the grieving process. An individual might commonly feel as though life is not worth living, daily tasks are meaningless, or maintaining a social life is not important without the deceased.

The final stage of the grief process is reorganization or acceptance in which an individual realizes the deceased is physically gone and the death is final. This stage can take many years to achieve. The successful outcome is a reorganization of roles, a change in identity, and renewing of relationships with friends and oneself (Bowlby, 1980; Kubler-Ross & Kessler, 2005).

It is important to note while these stages are clearly defined and organized, the term "stages" indicates that the one will experience and process grief in a particular order or linear way. In actuality, the stages that are experienced could occur in any order, intensity, or length of time (Bowlby, 1980; Kubler-Ross & Kessler, 2005). Other research has found that the emotions related to the loss experienced in intrusive, time-limited, intense waves of yearning for the deceased (Prigerson & Jacobs, 2001). Similar to the progression of the grief stages, the emotions are reduced in both intensity and frequency and become more sentimental than painful (Prigerson & Jacobs, 2001). Due to the variability in the order, intensity, or length of time of the stages or painful emotions, the grief process is a highly individualized experience.

The grief process is highly personalized due to how the individual copes with the physical, mental, emotional, and behavioral aspects of their grief. Similar to the stages of grief, these aspects or symptoms are not experienced in just a linear way but rather are occasionally repeated and in various stages. The physical symptoms can include sensations of somatic distress, a feeling of tightness in the throat, choking with shortness of breath, the need for sighing, an empty feeling in the abdomen, muscle weakness, an intense subjective distress, insomnia, anorexia, appetite disturbances, and lack of energy (Shuchter, 1986; Burnell & Burnell, 1989; Hensley & Clayton, 2008). Grief has also been found to be related to physical illness, aggravate existing medical conditions, generate new physical symptoms and complaints, and increase the utilization of medical services (Osterweis, Solomon, & Green, 1987; Burnell & Burnell, 1989). Mental symptoms of grief can include confusion or disbelief regarding the death, seeing or hearing the deceased, having disturbances in cognitive functioning, and having the presence of dreams or nightmares (Osterweis et al., 1987; Burnell & Burnell, 1989; Kubler-Ross & Kessler, 2005). Several emotional symptoms, similar to the previously described stages of grief, include denial, sadness and depression, guilt and anger, and relief (Osterweis et al., 1987; Zisook, 1987; Burnell & Burnell, 1989). Behavioral symptoms experienced by an individual are widely varied. These symptoms can include self-harming behaviors, social withdrawal, and an increase in social interactions (Burnell & Burnell, 1989; Kubler-Ross & Kessler, 2005).

Additionally, various psychosocial factors have been identified as affecting the process and symptoms of grief. These factors include the nature of the relationship to the deceased, the individual's coping behaviors and mental health, emotional closeness to the

deceased, basic beliefs and attitudes towards death, a level of intelligence and maturity, the individual's past history of losses, the individual's ethnic, cultural, and religious background, the lack of any "unfinished business" with the deceased, and the presence of a social support system (Shanfield, 1987; Burnell & Burnell, 1989; Ginzburg, Geron, & Solomon, 2002; Servaty-Seib & Pistole, 2006; Ring, 2009). The presence of these factors has the ability to help or hinder an individual through the grief process towards the stage of acceptance.

Many researchers have explored current grief experiences as well as past grief behaviors shortly following the death of their loved ones (Field, Thompson, & Gallagher-Thompson, 2006). It is common in the research literature for grief to be explored within the first two years following the death loss. For the purposes of the present study, both current grief experiences as well as past grief behaviors were explored in relation to emotional closeness, psychological sense of community, time since death loss, and perceived social support from friends and family in a sample of college students whose loved ones died within two years before the time of their participation in the study.

Time Since Death Loss and Emotional Closeness to the Deceased

Time Since Death Loss refers to the time, in months, since individuals' loved ones died. Most researchers have explored grief experiences among individuals for whom their loved one died within 24 months prior to participation in their studies. Time since death loss related to the experience of grief has been associated with a number of variables including severity of grief symptoms (McCarthy, Clarke, Ting, Conroy, Anderson, & Heath, 2010)

In addition to time since death loss, the nature and quality of one's relationship to the deceased has also been explored in the research literature. This construct is referred to as Emotional Closeness.

Emotional Closeness as defined by Servaty-Seib and Pistole (2006) as the "subjectively reported level of emotional openness, awareness, and understanding in the relationship" (pg. 152). In a couple of studies, those who feel more emotionally close to their deceased loved one also tend to present with more intense grief experiences (Servaty-Seib & Pistole, 2006; Ring 2009). This was found in high school and college student samples (Servaty-Seib & Pistole, 2006; Ring 2009). Emotional closeness has been associated with several variables including past and present grief (Servaty-Seib & Pistole, 2006).

Psychological Sense of Community

When individuals experience death losses of close friends or family members, their communities are often impacted. Community can be identified either geographically or relationally (Gusfield, 1975). Geographical communities are defined by territorial boundaries that include neighborhoods, towns, and cities (Gusfield, 1975). Relational communities are defined by the quality of relationships between individuals without consideration of location (Gusfield, 1975). This type of community can include ethnic or interest groups. Both geographical and relational communities can provide a psychological sense of community.

Psychological Sense of Community is defined as "the perception of similarity with others, an acknowledged interdependence with others, a willingness to maintain this interdependence by giving to or doing for others what one expects from them, the feeling

that one is part of a larger dependable and stable structure" (Sarason, 1977, p. 157). Psychological sense of community has been studied in relation to a variety of emotions, but has not been studied in relation to grief. This construct has been theorized to include five underlying dimensions which will be defined next: membership, influence, integration and fulfillment of needs, shared emotional connection and conscious identification (McMillan & Chavis, 1986; Fisher & Sonn, 1999; Obst, Smith, & Zinkiewicz, 2002). Membership is the sense of belonging, identification, and a personal investment with the community of interest (McMillan & Chavis, 1986; Obst et al., 2002). Influence is defined as members feeling as though they have some influence over their group as well as the group having some influence over them (Obst et al., 2002). Integration and fulfillment of needs refers to the members of the community being rewarded as seen in the status of the membership, the success of the community, and the perceived competence of the other members in the community (Obst et al., 2002). Having a shared emotional connection within the community is when closer relationships are formed and as a result, the bond within the community grows stronger (Obst et al., 2002). Conscious identification creates a deeper understanding of community identification by evaluating the attachment to the community by exploring individuals' cognitive centrality (i.e., the amount of time people think about being in their communities), in-group affect (i.e., positive feelings associated with community membership), and in-group ties (i.e., bonds and belongingness in that community; Cameron, 2004). These five dimensions of psychological sense of community have been validated in various geographical areas and in communities of similar interests (Obst, Smith, & Zinkiewicz, 2002a; Obst et al., 2002b; Obst et al., 2002c). Despite this, most researchers still use the overall score to

measure psychological sense of community rather than using these dimensions or subscale scores in their studies.

This is the first study of its kind to explore the relationship of psychological sense of community with current grief and past grief behaviors in college students. In addition to psychological sense of community, perceived social support from family and friends will also be explored in relation to current and past grief experiences of college students.

Perceived Social Support from Family and Friends

Membership in a community and the presence of a social support network can provide a bond and a sense of belonging that is important when processing a significant event such as a death loss. Cobb (1976) stated that social support is feeling as though an individual is cared for and loved, has esteem and is valued, and belongs to a network of communication and mutual obligation. Having social support networks, including partners/spouses, family members, friends, colleagues, and the other social or community networks, does help people cope with a variety of stressors (Pearson, 1986; Breen & O'Conner, 2011). Providing social support can be demonstrated through having emotionally sustaining behaviors which include being caring toward others, respecting, knowing, believing in, sharing information and doing for others, having problem-solving behaviors, indirect personal influence, and intervening in the environment to reduce sources of stress (Coffman & Ray, 1999; Gottlieb, 1978).

There are three types of social support that are defined within the literature. These types include social embeddedness, perceived social support, and enacted support (Barrera, 1986). The construct of social embeddedness is the connection that individuals have to significant others within their environment (Barrera, 1986). Perceived social

support is the cognitive appraisal of being reliably connected to others (Barrera, 1986). Enacted support refers to the actions that others engage in when they are providing assistance to individuals faced with adversity (Barrera, 1986).

Strong social support has been a great buffer for stressful life events in people's lives (Gore, 1978). Decreases in stress levels could occur due to large social networks because these social support networks provide opportunities for individuals to experience regular positive experiences with a sense of security and stability in their environments (Cohen & Wills, 1985). Social support from family members and close friends has been found to be particularly beneficial when processing the death loss of a spouse (Kaunonen, Tarkka, Paunonen, & Laippala, 1999) or partner and that receiving support, helping others in their grief and loss, as well as the reciprocal nature of social support all appear to be very important in dealing with such death loss. This finding demonstrates the importance of social support and community in the coping process when having experienced a death loss, such as the loss of a partner or spouse.

Impact of Grief on College Students

Approximately 22 to 30 percent of college students have lost a family member or close friend to a death loss (Balk, 1997; Balk, Walker, & Baker, 2010). College students can experience symptoms of grief that can result in impairment of personal, social, and academic functioning (Taub & Servaty-Seiv, 2008). These symptoms can include insomnia, decreased academic performance, and significantly lower grade point averages (Hardison, Neimeyer, & Lichstein, 2005; Servaty-Seib & Hamilton, 2006). Also, there is a small portion of college students who report symptoms consistent with complicated grief such as agitated depression, chronic illness, enduring and intense clinical reactions

such as guilt, suicidal ideation, serious sleep difficulties, significant disturbances in self-esteem, job and school performances, and interpersonal relationships (Balk et al., 2010). Research has also shown that grief establishes boundaries, highlights the separateness of individuality, and possibly hinders resolutions of bereavement (Balk, Tyson-Rawson, & Colletti-Wetzel; 1993). This demonstrates that college students are not immune to the debilitating symptoms of grief.

During the years that an individual is in college, there are several areas of development that occur (Chickering, 1969; Chickering & Reisser, 1993; Evans, Forney, Guido, Patton, & Renn, 2010). This development has been described as "the application of human development concepts in postsecondary settings so that everyone involved can master increasingly complex developmental tasks, achieve self-direction, and become interdependent" (Miller & Prince, 1976, p. 3). The developmental areas for a college student include developing competence, managing emotions, moving through autonomy towards interdependence, developing mature interpersonal relationships, establishing identity, developing purpose, developing integrity, learning about their own personality characteristics, and understanding how these differences make up their individual identities (Sanford, 1967; Chickering, 1969; Chickering & Reisser, 1993). A crisis moment, including a death loss of a family member or friend, can change the direction of a particular area of college student development, (Coons, 1970). Due to the large amount of development that occurs during this time period, a traumatic event such as a death loss can cause a disruption in development.

When coping with death loss, college students find that the recovery process can be more difficult than expected (Balk, 1997). However, there are several factors that can

assist in the coping process. Balk (1997) found that having religious beliefs can aid in the recovery process for a college student. College students also can have difficulty in coping with a death loss due to the lack of perceived social support received from peers and the perceived underestimated length of time the grief process should take (Balk, 1997). Research has shown college students that participated in a grief support group have benefitted in the sharing and giving support to other grieving individuals, hearing other perspectives, and receiving validation for their responses (Balk et al., 1993).

Due to the availability of campus activities and closeness of peers in a college/university setting, students are able to develop their own psychological sense of their college/university community in a unique way compared to other types of communities. Research has shown college students who participated in campus activities had a higher level of psychological sense of community than those students who did not (DeNeui, 2003; Pretty, 1990). In addition, the amount of support college students perceive from others has been positively associated with and predictive of their psychological sense of community at their college/university (Pretty, 1990). Psychological sense of community and social support are important when researching grief issues among college students because of the impact each may have on their experiences of grief.

Significance of the Study

As mentioned above, a significant number of college students, 22 to 30 percent, experience a death loss while attending college (Balk, 2001). Yet, little is known in the research literature regarding the correlates and predictors of grief experiences for college students, except for grief symptoms experienced by college students, some of their coping skills associated with their grief, and perceived social support in relation to grief.

Only two studies to date have been conducted to explore how perceived social support relates to and predicts grief experiences of college students and those two studies were conducted 17-21 years ago (Balk et al., 1993; Balk, 1997). No research to date has been conducted to explore how time since death loss, the emotional closeness of college students to their loved ones, and how psychological sense of community relates to and predicts current and past grief experiences of college students. These constructs that were explored in the present study not only to address gaps in the research literature related to college students and their current and past grief experience, but also update the research literature with knowledge that hasn't been collected in almost 20 years on social support and grief in college students. The results of this study provided insight into theoretical and practical models for understanding and helping college students who have and are grieving, which will be highlighted in the discussion section.

Purposes of the Study

The purposes of the present study were to explore the correlates and predictors of current and past grief behaviors in a sample of undergraduate college students. The relationships between and among perceived social support from friends and family, psychological sense of community, the duration (in months) since college students' death loss, their emotional closeness to their deceased loved ones, and their experiences of current grief and past grief behaviors were explored. The research questions for this study were as follows: 1) What is the relationship between and among perceived social support from family and friends, psychological sense of community, duration of time since death loss, and closeness to the deceased loved one, and current and past grief experiences for college students? 2) What is the relationship of perceived social support with current and

past grief in college students? 3) How does the combination of duration of time since a death loss, emotional closeness to the deceased loved one, and psychological sense of community relate to and predict current and past grief experiences for college students?

It was hypothesized that 1) this grouping of variables would be significantly correlated to current and past grief experiences in college students, with higher levels of perceived social support, psychological sense of community, and emotional closeness and more time since the death loss being associated with less current grief and fewer past grief behaviors in college students. It was also hypothesized that 2) perceived social support from family and friends would be significantly related to and predictive of current and past grief experiences, with more social support associated with less current grief and fewer past grief behaviors. It was hypothesized that 3) the rest of the predictor variables, other than perceived social support from family and friends, would be significantly related to and predictive of current grief and past grief behaviors.

CHAPTER III

METHODOLOGY

The purposes of the present study were to explore the correlates and predictors of current and past grief behaviors in a sample of undergraduate college students. The relationships between and among perceived social support from friends and family, the duration (in months) since college students' death loss, their emotional closeness to the deceased person, their identification with a group and psychological sense of community, and their experiences of current grief and past grief behaviors were explored. In this method section, an explanation of the: 1) sample demographics, 2) the measures used to evaluate the constructs of interest in this study and their psychometric properties, and 3) the procedures of the study, including the protection of human participants was provided.

Participants

The original sample of participants included 131 undergraduate college students recruited through social media (n = 106) as well as an online active research participant pool via the College of Education at a Midwestern university (n = 25). Participants were required to be at least 18 years old and to have experienced a death loss of friend or family member within the past 24 months. They were invited to participate in a study exploring grief issues for college students. In order for participants to be entered into a drawing for prizes, participants had to complete the entire survey. Participants had to

complete the previous item before they could move on to the next item to complete the survey. Therefore, there was no missing data in the datafile and thus, all 131 participants were included in the analyses of the study.

The final sample of undergraduate college students consisted of 131 participants, with a mean age of 21.0 years (sd = 2.43) with a range of 18 to 31 years. Over 60% of the participants identified were college women (61.8%, n = 81), and close to 40% were college men (38.2 %, n = 50). The majority of the participants identified themselves as White/Caucasian (76.3%, n = 100); the remainder of the sample self-identified as Black/African-American (9.9%, n = 13); Latino/Hispanic (7.6%, n = 10); Asian/Pacific Islander (3.1%, n = 4), Biracial/Multiracial (1.5%, n = 2); Native American (.8%, n = 1); and Other (.8%, n = 1).

When asked about the loved one who died, the majority of the participants reported either losing a grandparent (39.7%, n = 52) or a friend (32.1%, n = 42). Additionally, participants reported losing an aunt/uncle (10.7%, n = 14); father (5.3%, n = 7); mother (3.8%, n = 5); cousin (3.8%, n = 5); brother (3.1%, n = 4); and sister (1.5%, n = 2).

Participants, on average, lost their loved one approximately one year ago, (m = 12.01 months, sd = 6.90), with a range from 0 months to 24 months. Additionally, the age of the loved ones who died were, on average, in their 50's, (m = 53.16, sd = 27.56), with a range from 13 to 99 years of age.

Finally, the majority of participants identified "illness" (41.2%, n = 54) or "accident" (29.8%, n = 39) as the cause of death for their loved one; other participants

identified other causes of death for their loved one including "old age" (19.1%, n = 25); "suicide" (6.1%, n = 8); and "unknown" (3.8%, n = 5).

See Table 1 for the demographics of the college student sample in this study.

Measures

Participants were asked to complete an online survey which included an informed consent agreement (see Appendix C), a demographics questionnaire, the Scale of Emotional Closeness (Servaty-Seib & Pistole, 2006), the Texas Revised Inventory of Grief (Faschingbauer, DeVaul, & Zisook, 1987), the Collegiate Psychological Sense of Community Scale (Lounsbury & DeNeui, 1996), and the Perceived Social Support – Friends and Family scale (Procidano & Heller, 1983). All measures can be found in Appendix D.

Demographics Questionnaire. Participants were asked to provide their age, sex, student classification, race, and questions related to their experience with death loss. The questions will include how long ago the death occurred, the relationship to the individual who died, age of the person who died, and cause of death. If college students had experienced multiple death losses within the two-year period, they were asked to consider one deceased individual as they completed the survey regarding their grief experiences. "Time Since Death Loss" is one of the main study variables that refers to the amount of time, in months, since their loved one died.

Scale of Emotional Closeness (SEC; Servaty-Seib & Pistole, 2006). The SEC is a seven-item, single-factor questionnaire regarding how close participants feel toward the loved one who died. Participants are asked to respond to each item using a seven-point Likert type scale (7 = very strongly agree to 1 = very strongly disagree). Examples of

items on this scale include "It was very easy to talk to this person." and "I felt close to this person." The possible score range was from 7 to 49. Higher scores indicate more emotional closeness to the person who died in their lives whereas lower scores indicated less emotional closeness to the person who died in their lives. "Emotional Closeness" is one of the main study variables and refers to the overall score on the SEC.

The SEC has been considered a reliable and valid measure of emotional closeness to the deceased loved one. The SEC has good internal consistency reliability, with a Cronbach alpha of .87 (Servaty-Seib & Pistole, 2006). The SEC has been significantly correlated with the Texas Revised Inventory of Grief – Past (r = .43, p < .01) and the Texas Revised Inventory of Grief – Present (r = .45, p < .01) (Servaty-Seib & Pistole, 2006). The internal consistency reliability estimate for this scale in this college student sample was .94.

Texas Revised Inventory of Grief (TRIG; Faschingbauer, DeVaul, & Zisook, 1987). The TRIG is a questionnaire that measures past grief behaviors and current grief experiences following a death loss. The first scale, Past Behavior, the participant respond to 8 items that reflect on the time period surrounding the death loss and answer each item using a five-point Likert type scale (1 = Completely true, 2 = Mostly true, 3 = Neutral, 4 = Mostly false, and 5 = Completely false). Examples of items on this subscale are "After this person's death I lost interest in my family, friends, and outside activities." and "I was angry that the person who died left me." "Past Grief" is one of the main outcome variables of the present study that reflects the overall TRIG Past Behavior score. Lower scores indicate more past grief behaviors whereas higher scores indicate fewer past grief behaviors. The TRIG – Past has a Cronbach alpha of .77 and a split-half reliability

estimate of .74. The internal consistency reliability estimate for this college student sample was .91 for this scale.

The Present Emotional Feeling subscale, the second portion of the TRIG, assesses the current grief experiences of participants as related to the death loss of their family member or friend. Examples of items on this subscale include "I still cry when I think of the person who died." and "I can't avoid thinking about the person who died." "Current Grief" is one of the main outcome variables of the present study and represents the overall TRIG Present Emotional Feeling score. Thirteen items in this scale reflect the current thoughts, feelings, memories, opinions, and attitudes related to participants' experiences of grief, using the same five-point Likert scale mentioned for Past Grief (Faschingbauer et al., 1987). Lower scores indicate more current grief whereas higher scores indicate less current grief. This portion of the scale also has good internal consistency reliability, with a Cronbach alpha of .86 and a split-half reliability estimate of .88. The internal consistency reliability estimate for this college student sample was .91 for this scale.

Collegiate Psychological Sense of Community Scale (CPSOCS; Lounsbury & DeNeui, 1996). The CPSOCS is a fourteen-item scale measuring the perceived psychological sense of community that is experienced by students at their college or university and is scored as an overall indicator, not in terms of dimensions as theoretically identified in the literature. Participants were instructed to respond to each statement as it relates to their experience at their college or university. Examples of the statements on this scale are "I really feel like I belong here." and "There is a strong feeling of togetherness on campus." Participants were given one point for a *strongly*

disagree response, two points for a disagree response, three points for an undecided response, four points for an agree response, and five points for a strongly agree response. The scores for each response were added together for a total score. The lowest possible score on this measure is 14 and the highest possible score is 70. Higher scores indicate a stronger psychological sense of community; lower scores indicate less belongingness, commitment, fulfillment and attachment to their college/university community. While the overall scale for psychological sense of community at their college/university was used in the current study and has been used by previous researchers, it is important to note that the key meanings associated with psychological sense of community include feelings of belongingness, commitment, fulfillment of needs, and attachment to their college/university are reflected throughout the scale.

"Psychological Sense of Community" is one of the main study variables and refers to the overall score on the CPSOS. The Cronbach alpha for the CPSOS ranges from .88 to .92 in previous research studies, demonstrating good internal consistency reliability. The internal consistency reliability estimate for the Psychological Sense of Community total score for this sample was .95.

Perceived Social Support – Friends and Family (PSS-Family and PSS-Friends; Procidano & Heller, 1983). This questionnaire includes two scales to assess the perceived social support received by both friends (PSS-Friends) and family (PSS-Family), in particular, the extent to which participants experience support, information, and feedback from their friends and family. Each of the two scales consists of 20 questions. Examples from the PSS-Friends subscale include "My friends are sensitive to my personal needs." and "I have a deep sharing relationship with a number of friends."

Examples from the PSS-Family subscale include "I rely on my family for emotional support." and "Members of my family come to me for emotional support." Individuals respond to each question with "yes", "no", or "don't know". Yes responses were coded as 1 point (unless reverse scored) and no or don't know responses were coded as zero points (unless reverse scored). The assessment has a total possible score of zero to twenty, with higher scores indicating higher levels of perceived support and lower scores indicating lower levels of perceived support.

The PSS-Family and the PSS-Friends have been found to be reliable and valid measures of perceived social support from family and friends respectively. Procidano and Heller (1983) found the test-retest reliability range for the PSS-Family to be .80 to .86 and for the PSS-Friends to be .75 to .81. Both scales have high internal consistency. The Cronbach alpha coefficients for the PSS-Friends range from .84 to .90 and the Cronbach alpha coefficients for the PSS-Fa range from .88 to .91. The PSS-Friends and the PSS-Family are both related to symptoms of distress and psychopathology in that high levels of perceived social support are related to low levels of psychopathology and high levels of social competence (Procidano & Heller, 1983). Internal consistency reliability estimates for this sample were .92 for the PSS-Friends subscale and .96 for the PSS-Family subscale.

Procedure and Protection of Human Subjects

First, college students were invited to complete the online survey through a university online active research participation system called SONA, in accordance with participating academic courses. Students were provided with directions to access a secure, online server and were presented with an informed consent page to review prior

to the beginning of the online survey. The informed consent page provided an explanation of the potential risks and benefits of participating in this study. If participants agreed to the consent, they were connected to the online questionnaire. The total time to complete the questionnaire was estimated at 30 minutes, and participants were awarded .50 credits in the SONA system.

Also, to increase the sample size, snowball sampling was utilized through social media, specifically Facebook. The primary investigator posted a script describing on her primary Facebook page the nature of the study with a link to the informed consent page, requesting participants as well as inviting others to share this study with others. If college students consented to participate, they were connected to the online questionnaire. The total time to complete the questionnaire was estimated at 30 minutes. Once the participants had completed the online survey, they had the option of entering their name to win one of two 50-dollar Amazon gift cards that would be awarded once the survey had reached 130 participants. If the Facebook or snowballing participants wanted to be entered in this drawing, they were directed to a separate, secure website wherein they entered their name and email address. All data gathered was kept on a secure, password-protected USB flash drive that was locked in a secure filing cabinet.

CHAPTER IV

RESULTS

Descriptive statistics including means, standard deviations, and actual score ranges were calculated for the main study variables for the entire sample of 131 college undergraduate students. The mean score for Current Grief (TRIG-Present total score) was 37.60 with a standard deviation of 11.20, and a score range of 52 (13 to 65). The mean score for Past Grief (TRIG-Past total score) was 25.60 with a standard deviation of 7.96, with a score range of 32 (8 to 40). The mean score for Emotional Closeness (SEC total score) was 36.53 with a standard deviation of 10.74, and a score range of 42 (7 to 49). The mean score for Psychological Sense of Community (CPSOCS total score) was 55.96 with a standard deviation of 8.59, and a range of 40 (26 to 66). The mean PSS-Friends score was 16.05 with a standard deviation 4.89, and a range of 20 (0 to 20). PSS-Family had a mean score of 14.82 with a standard deviation of 6.40, and a range of 20 (0 to 20). The mean score for Time Since Death Loss (in months) was 12.01 with a standard deviation of 6.90, and a range of 24 (0 to 24). Descriptive statistics for the main study variables are presented in Table 2.

Preliminary analyses were conducted to explore how demographic variables relate to the main outcome variables of current and past grief in this college student sample. A Pearson correlation analysis was conducted to explore the relationship between age and

the grief outcome variables. Age was not correlated with Current Grief, but there was a significant but low positive correlation between age and Past Grief (r = .15, p < .05). Additionally, one-way analysis of variance (ANOVAs) procedures were conducted to assess possible sex and racial group differences in Current Grief and Past Grief. No significant sex differences were found for Current Grief, F (1, 129) = 2.26, p > .05, nor Past Grief F (1, 129) = 1.02, p > .05. However, statistically significant racial group differences were found (White college students compared to College Students of Color) for Current Grief, F (1, 129) = 10.64, p < .001, and Past Grief F(1, 129) = 16.45, p < .000. These findings demonstrate White college students report higher levels of Current Grief and Past Grief. Rather than statistically controlling for race in the main analyses, followup correlational and multiple regression analyses were performed after the original main analyses planned to explore the relationships among the main study variables (as identified in the research questions) for White college students and college students of Color separately. Given the low but statistically significant correlation between age and Past Grief, it was decided not to statistically control for age in the main analyses of the study for Current or Past Grief. Given non-significant group differences in gender, gender was included in the main study analyses.

Main Study Analyses and Findings

Research Question 1. What is the relationship between and among perceived social support from family and friends, psychological sense of community, duration of time since death loss, and closeness to the deceased loved one, and current and past grief experiences for college students?

Given that specific hypotheses were predicted among the main study variables, Pearson correlation analyses (one-tailed) were conducted to explore the bivariate relationships between and among Present Grief, Past Grief, Emotional Closeness, Psychological Sense of Community, PSS-Family, and PSS-Friends. There was a statistically significant and positive correlation between Present Grief and Past Grief for these college students (r = .74, p < .01). College students who reported higher levels of Past Grief behaviors reported experiencing more Present Grief; college students who reported lower levels of Past Grief tended to experience less Present Grief.

There were also statistically significant and negative correlations between the amount of Emotional Closeness to the deceased loved one and Present Grief (r = -.27, p < .01) as well as Past Grief (r = -.28, p < .01). For example, college students who reported lower levels of Present Grief (which reflects higher levels of current grief) and/or lower levels of Past Grief (which reflects higher levels of past grief) reported higher levels of Emotional Closeness to their deceased loved ones.

There was a statistically significant and positive correlation between Psychological Sense of Community and Past Grief (r = .21, p < .01). College students who reported lower levels of Past Grief (i.e., more past grief) tended to report higher scores on a psychological sense of community to their colleges/universities; conversely, college students with higher scores on Past Grief (i.e., less past grief) tended to report lower scores on a psychological sense of community to their colleges/universities.

Psychological Sense of Community was also significantly related to both perceived social support from friends and family, but more so with friends. There was a

statistically significant positive correlation between Psychological Sense of Community and PSS-Friends (r = .56, p < .01) and a statistically significant but low positive correlation between Psychological Sense of Community and PSS-Family (r = .19, p < .05). College students who reported more perceived social support from friends in particular and from family tended to report more of a Psychological Sense of Community and connection to their colleges or universities.

There was a statistically significant but low positive correlation between Emotional Closeness and PSS-Friends (r = .16, p < .05) meaning college students who reported higher levels of Emotional Closeness and reported higher levels of perceived social support from friends.

Also, there statistically significant positive and moderate correlation between PSS-Family and PSS-Friends (r = .32, p < .01). College students who reported more social support from family also tended to report more social support from their friends and vice versa.

It was hypothesized that higher levels of perceived social support from friends and family (PSS-Friends and PSS-Family), more Time Since Death Loss, higher levels of Emotional Closeness, and a greater amount of Psychological Sense of Community would be correlated lower levels of reported grief symptoms for college students. This hypothesis was partially confirmed in that Emotional Closeness was related to both Past Grief and Present Grief and that Psychological Sense of Community was related to Past Grief. However, perceived social support from friends and family (PSS-Friends and PSS-Family) and Time Since Death Loss were not related to Past Grief or Present Grief in the

bivariate analyses. While it could have been argued to drop these latter variables as predictor variables in the multiple regression analyses to follow given these bivariate findings, it was decided to keep them in the regressions for the purposes of answering the research questions.

Research Question 2. What is the relationship of perceived social support with current and past grief in college students?

In addition to the bivariate analyses, two multiple regression analyses were conducted to explore the linear relationship of perceived social support from family and friends (PSS-Family and PSS-Friends) with past and present grief in this sample of college students. PSS-Family and PSS-Friends were the predictor variables and Past Grief and Present Grief were the outcome variables for these regressions (Table 4 and 5). In the first regression for Past Grief as the criterion variable, the overall regression model was not statistically significant, F(2, 128) = 1.02, p > .05 (p = .37). In the second regression for Current Grief as the criterion variable, the overall regression model was not statistically significant, F(2, 128) = .573, p > .05 (p = .565).

It was originally hypothesized that higher levels of perceived social support from friends and family would be significantly and linearly related to reported grief symptoms within a college student population. This hypothesis was rejected.

Research Question 3. How does the combination of duration of time since a death loss, emotional closeness to the deceased loved one, and psychological sense of community relate to and predict current and past grief experiences for college students?

Two multiple regression analyses were conducted to explore the linear

relationship of Time Since Death Loss, Emotional Closeness, and Psychological Sense of Community with Past Grief and Present Grief (Table 6 and 7). In the first regression for Present Grief, the overall regression model was statistically significant, F(3,127) = 5.88, p < .001 (Present Grief). In the second regression for Past Grief, the overall regression model was statistically significant F(3, 127) = 6.99, p < .000 (Past Grief).

Time Since Death Loss, Emotional Closeness, and Psychological Sense of Community accounted for 14.2% of the variance of the Past Grief scores. The effect size = .17, which is considered a small, but statistically significant effect size.

Time Since Death Loss, Emotional Closeness, and Psychological Sense of Community accounted 12.2% of the variance of the Present Grief scores. The effect size = .14, which is considered a small, but statistically significant effect size.

Examination of the standardized coefficients (Beta) for each of these multiple regression analyses revealed that Emotional Closeness and Psychological Sense of Community were significant predictors of Past Grief, $\beta = -.31$, t (127) = -3.71, p < .001 (Emotional Closeness) an $\beta = .33$, t (127) = .24, p < .05 (Psychological Sense of Community. However, only Emotional Closeness was a significant predictor for Present Grief, $\beta = -.30$, t (127) = -3.54, p < .01 (See Table 6 and 7).

It was hypothesized that a greater duration of Time Since Death Loss (in months), lower levels of Emotional Closeness, and more of a Psychological Sense of Community when considered together would be related to less current and past grief symptoms for college students in this sample. This hypothesis was partially confirmed by the multiple regression findings.

Follow-Up Analyses

Exploratory analyses were performed based on the procedural analyses to assess how relationships among the main study variables and predictors of present and past grief might be similar and/or different for White college students and college students of Color. Separate Pearson correlation analyses (two-tailed) were conducted to explore the bivariate relationships among Present Grief, Past Grief, Emotional Closeness, Psychological Sense of Community, PSS-Family, and PSS-Friends for White college students and college students of Color.

White college students who reported higher levels of Past Grief reported experiencing higher levels of Present Grief (r = .72, p < .01) and vice versa. There were significant negative correlations between the amount of Emotional Closeness to the deceased and the Past Grief (r = -.21, p < .05). Also, White college students who reported lower scores of Past Grief (i.e., higher levels of grief) reported higher levels of Psychological Sense of Community (r = .22, p < .05). PSS-Friends was also related to Emotional Closeness to the deceased loved one (r = .20, p < .05) and Psychological Sense of Community (r = .54, p < .01). Also, there was a significant positive correlation between PSS-Family and PSS-Friends (r = .29, p < .01). Additionally, there was a significant positive correlation between PSS-Family and Time Since Death Loss (r = .20, p < .05). (See Table 8).

College students of Color who reported a higher level of Past Grief behaviors reported experiencing higher levels of Present Grief (r = .72, p < .01) and vice versa. There were significant negative correlations between the amount of Emotional Closeness

and Present Grief (r = -.41, p < .05). There was a positive significant correlation between Emotional Closeness and PSS-Friends (r = .37, p < .05). Additionally, there was a positive significant correlation between Psychological Sense of Community and PSS-Friends (r = .57, p < .01). Also, there was a negative significant correlation between PSS-Friends and Time Since Death Loss (r = -.38, p < .05). (See Table 9).

A series of multiple regression analyses were conducted to explore the linear relationship of Time Since Death Loss, Emotional Closeness, and Psychological Sense of Community with Past Grief and Present Grief for both White college students and college students of Color (Table 10,11, 12, and 13).

In White college students, the model was statistically significant, F(3,96) = 3.15, p < .05 (Present Grief); F(3,96) = 4.67, p < .01 (Past Grief). Time Since Death Loss, Emotional Closeness, and Psychological Sense of Community in White college students accounted for 12.7% of the variance of the Past Grief scores. The effect size = .15, which is considered a small, but statistically significant effect size.

Additionally, Time Since Death Loss, Emotional Closeness, and Psychological Sense of Community in White college students accounted 8.9% of the variance of the Present Grief scores. The effect size = .10, which is considered a small, but statistically significant effect size (See Tables 10 and 11).

When examining the standardized coefficients (Beta) for these multiple regressions in White college students, Emotional Closeness was significant for Past Grief $(\beta = -.27, t (96) = -2.76, p < .01)$ Present Grief $(\beta = -.31, t (127) = -3.71, p < .001)$ (See Tables 10 and 11).

In college students of Color, the model was not statistically significant for either Past Grief (F(3,27) = .525, p > .05) or Present Grief (F(3,27) = 2.53, p > .05). (See Tables 12 and 13).

Poc-hoc analyses were performed to explore the relationships between and among the main study variables as well as the predictors of current and past grief for both college women and college men separately. Separate Pearson correlation analyses (two-tailed) were conducted to explore the bivariate relationships among Present Grief, Past Grief, Emotional Closeness, Psychological Sense of Community, PSS-Family, and PSS-Friends for female and male college student participants.

Female college students who reported high levels of Past Grief reported experiencing higher levels of Present Grief (r = .76, p < .01). There were significant negative correlations between the amount of Emotional Closeness to the deceased and the Present Grief (r = -.36, p < .01) and the amount of Emotional Closeness to the deceased and the Past Grief (r = -.34, p < .01). Also, college students who reported lower scores of Past Grief (higher levels of grief) reported higher levels of Emotional Closeness to the deceased. PSS-Friends was also related to Psychological Sense of Community. There was a significant positive correlation between PSS-Friends and Psychological Sense of Community (r = .50, p < .01). Also, there was a significant positive correlation between PSS-Family and PSS-Friends (r = .31, p < .01) (See Table 14).

Male college students who reported a higher level of Past Grief behaviors reported experiencing higher levels of Present Grief (r = .76, p < .01). There were significant positive correlations between the amount of Psychological Sense of

Community and Past Grief (r = .37, p < .05) and Present Grief (r = .28, p < .05). Additionally, there was a positive significant correlation between Psychological Sense of Community and PSS-Friends (r = .61, p < .01). Also, there was a positive significant correlation between PSS-Friends and PSS-Family (r = .31, p < .05). (See Table 15).

A series of multiple regression analyses were conducted to explore the linear relationship of Time Since Death Loss, Emotional Closeness, and Psychological Sense of Community with Past Grief and Present Grief for both males and females.

In female college students, the model was statistically significant, F(3,77) = 5.01, p < .00 (Present Grief); F(3,77) = 4.52, p < .01 (Past Grief). Time Since Death Loss, Emotional Closeness, and Psychological Sense of Community in female college students accounted for 15.0% of the variance of the Past Grief scores. The effect size = .18, which is considered a small, but statistically significant effect size.

Additionally, Time Since Death Loss, Emotional Closeness, and Psychological Sense of Community in females accounted 16.3% of the variance of the Present Grief scores. The effect size = .19, which is considered a small, but statistically significant effect size.

When examining the standardized coefficients (Beta) for the series of multiple regressions in female college students, Emotional Closeness was significant for Past Grief (β = -.38, t (77) = -3.53, p < .001) and Present Grief (β = -.31, t (77) = -3.51, p < .001) (See Tables 16 and 17).

In male college students, the model was statistically significant, F(3,46) = 2.96, p

< .05 (Present Grief); F(3, 46) = 2.90, p < .05 (Past Grief). Time Since Death Loss, Emotional Closeness, and Psychological Sense of Community in male college students accounted for 15.9% of the variance of the Past Grief scores. The effect size = .19, which is considered a small, but statistically significant effect size. Additionally, Time Since Death Loss, Emotional Closeness, and Psychological Sense of Community in males accounted 16.2% of the variance of the Present Grief scores. The effect size = .19, which is considered a small, but statistically significant effect size.

When examining the standardized coefficients (Beta) for the series of multiple regressions, Psychological Sense of Community was significant for Past Grief (β = .39, t (46) = 2.78, p < .01) and Present Grief (β = .35, t (46) = 2.53, p < .05) for males (See Tables 18 and 19).

CHAPTER 5

DISCUSSION

The purposes of the present study were to explore the correlates and predictors of current and past grief behaviors in a sample of undergraduate college students. The relationships between and among perceived social support from friends and family, the duration (in months) since college students' death loss, their emotional closeness to the deceased person, their identification with a group and psychological sense of community, and their experiences of current grief and past grief behaviors were explored.

Current Grief Emotional Feelings, Past Grief Behaviors, and Emotional Closeness

Pearson correlation analyses of Past Grief, Present Grief, and Emotional Closeness revealed significant negative correlations. These negative correlations indicated college students who reported higher levels of grief also reported higher levels of emotional closeness to the deceased both at the time when the death occurred and presently. This finding is similar to previous research when evaluating a community and college student population (Servaty-Seib & Pistole, 2006; Ring, 2009). Servaty-Seib and Pistole (2006) researched the relationship between emotional closeness and grief in adolescents. Results for this study indicated participants who reported higher levels of closeness also reported high levels of past and present grief which is similar to the findings in this study. Additionally, Ring (2009) researched the relationship between

prolonged grief symptomatology, suicidiality, and perceived emotional closeness within a college student population. Results indicated that perceived closeness to the deceased accounted for a significant amount of variance in the prolonged grief related symptoms which indicates perceived emotional closeness to the deceased predicts the severity of prolonged grief related symptoms. This finding demonstrates the importance of evaluating the emotional closeness of the deceased individuals in relation to the grief symptoms. While the variables of this study were somewhat different when looking at the severity of the grief symptoms, the results are similar to this study in that the perceived emotional closeness to the deceased impacts the amount of experienced grief symptoms in college students.

Psychological Sense of Community and Past Grief Behaviors

Pearson correlation analyses of Psychological Sense of Community and Past Grief revealed a positive significant correlation. This correlation indicated college students who reported lower levels of grief reported higher levels of psychological sense of community. Due to little research being completed evaluating psychological sense of community and grief, this is a new finding within the research. When trying to understand the reasoning for this finding, it is possible for those participants who have high level of psychological sense of community present with strong senses of integration and fulfillment of needs as well as a shared emotional connection. These psychological sense of community dimensions act as a support for individuals and, therefore, would possibly create a buffer to experience lower grief behaviors.

Psychological Sense of Community, Perceived Social Support of Friends, and Perceived Social Support of Family

Pearson correlation analyses of Psychological Sense of Community, PSS-Friends, and PSS-Family revealed positive significant correlations. A positive correlation between PSS-Friends and Psychological Sense of Community indicates college students who report higher levels of psychological sense of community also report a higher level of perceived social support of friends. Additionally, the positive correlation between PSS-Family and Psychological Sense of Community indicates college students who report higher levels of psychological sense of community also report a higher level of perceived social support of family. This finding supports previous research, which evaluates the relationship between experienced psychological sense of community and perceived social support (Pretty, 1990). Pretty (1990) reported the availability of campus activities and closeness of peers in a college setting, students are able to develop their psychological sense of community in a unique way compared to other types of communities. This connection also helps create a level of perceived support. While this study did not find how perceived social support predicts psychological sense of community, this find has been found in previous research (Pretty, 1990). This demonstrates a need for future research to further evaluate how perceived social support with friends and family are related to psychological sense of community.

Differences in White College Students and College Students of Color

There were significant differences between White college students and college students of Color when assessing the main study variables. This finding is important as

there could be cultural implications for these results including differences in relationships with the deceased, cultural norms of expressing grief symptoms, and feel connected to a university. Lopez (2011) reported racial and ethnic cultural backgrounds are important components of understanding how one completes the grieving process. Additionally, Schoulte (2011) described different preferences regarding grieving including being around family. These racial differences could make the grieving process more difficult for college students of Color attending a university where they are the minority. This demonstrates a need for future research exploring the experiences of grieving college students of Color.

Implications For Theory and Practice

There is limited research on college students, grief, and psychological sense of community. This study adds to the research literature regarding these variables. The implications of theory and practice can be seen in a wide variety of professions and academic fields. The findings of this study are very useful for those working in a college counseling center, practicing psychologists, or college student development professionals. Counseling psychologists are equipped to provide treatment and outreach regarding grief and the way to effectively move through the grief process. Using these findings, psychologists need to specifically question the emotional closeness to the deceased. When utilizing the Stages theory for treatment, questioning the emotional closeness to the deceased can decipher the possible intensity of symptoms (Kubler-Ross & Kessler, 2005).

For individuals in the field of college student development and student affairs, these findings can be useful as well. When a student death occurs on a college campus, student affairs professionals are often needed to provide assistance in discussing the death and providing resources for the grieving students. The findings of higher grief symptoms being correlated to emotional closeness and psychological sense of community can aid in the importance shown to helping those students process their grief. This could be achieved by providing referrals to the counseling center, aid in changing housing assignments, or aiding in a medical withdrawal process, should the grief symptoms be extremely high.

Understanding the importance of Psychological Sense of Community and Past Grief behaviors, it is important emphasize the importance of utilizing grief support groups. These groups whether student run, such as Actively Moving Forward, or counselor run could be a great benefit for grieving college students due to the possible sharing of experiences, giving of support, hearing others' perspective, and receiving validation for their responses. This finding is supported within the literature as well (Balk et al., 1993).

Limitations and Directions for Future Research

It is important to note the limitations of this study. First, the participation sample was not representative of a multicultural sample with regards to race. This makes it difficult to generalize the findings of this sample to all college students. Additionally, this study was a convenience sample with the majority of the sample completing the survey from social media, which could have impacted the participants of the study. Also, by the

primary investigator recruiting participants from a personal social media page hinders the generalizability of the study. This limitation could be avoided in the future by advertising the study through an anonymous advertisement. The demographic variable sexual orientation was not assessed which is a limitation as well. The lack of validity for the Texas Revised Inventory of Grief and the Collegiate Psychological Sense of Community Scale are limitations as well.

Due to the lack of research in the area of grieving college students, emotional closeness, psychological sense of community, and perceived social support, there are several areas for continued, needed research. Future research should further evaluate the variables of psychological sense of community and related grief behaviors. In the future, sexual orientation should be assessed as individuals who identify as a sexual minority might have different concepts of psychological sense of community. It would be worthwhile to examine students' involvement in their college and community, specifically looking at what organizations they are involved in and the amount of time dedicated to the organizations. Also, evaluating what role the organization plays in the grieving process as various organizations could have protocols associated with deaths. This concept would be specifically important when evaluating the psychological sense of community after a student death. Additionally, evaluating the involvement in a religious organization, psychological sense of community, and grief would be a worthwhile future study as well.

The type of death loss is an additional variable to take into consideration for future research. The Theory of Transition suggests that any event could change relationships, routines, assumptions, and roles of an individual (Schlossberg, Waters, &

Goodman, 1995). Future research evaluating if the death loss was anticipated or unanticipated could illuminate variability within the Transition Theory's Moving Through and Moving Out phase (Schlossberg et al., 1995).

Due to the different psychosocial factors that result in a variation of grieving behaviors, future research should also include evaluating psychological sense of community, emotional closeness to the deceased, and perceived social support from friends and family in participants with different ethnicities. As mentioned above, future research exploring the experiences of grieving college students of Color is necessary as well. This could be achieved by conducting a similar study at a Historic Black College or a university with a higher level of Latino/Latina population. By focusing on this population, it would illuminate how various differences in culture impacts the grief process in college students of Color. The size of the university and classification (public or private) of the university should also be a factor that is evaluated in future research.

In conclusion, the present study examined the correlates and predictors of current and past grief behaviors in a sample of undergraduate college students. Findings concluded that emotional closeness is a predictor of higher levels of past and present grief. Additionally, higher psychological sense of community is a predictor of lower levels of past grief. These findings suggest that mental health providers and those working at a college or university can aid in the grief process by understanding the emotional closeness and psychological sense of community of a grieving student. As the research is limited in this area, continued study about grief in college students would be extremely vital in helping this population.

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APPENDICES

APPENDIX A:

CHAPTER II: REVIEW OF THE LITERATURE

Grief

The emotional reactions an individual experiences after the death loss of a close friend or family member have been well documented throughout research. When a death loss occurs, the individual begins to explore the ramifications of the loss, including the impact that it has on their life and the emotions that are experienced. This exploration of impacts and emotions is known as the grief process. The grief process can be complicated by the different stages of grief, the symptoms that accompany grief, and presenting psychosocial factors. Due to the complex variability experienced in the grief process, it is important to fully explore and understand the many facets of grief (Bowlby, 1980; Kubler-Ross & Kessler, 2005).

Definitions of grief. Many researchers have evaluated the concepts in order to create a more concise understanding of the different responses associated with grief. Freud (1917) stated that mourning, an interchangeable word for grief, is "the reaction to the loss of a loved person" that can result in a serious departure from normal attitudes of life (pg. 243). Mourning and grief are also defined by the behaviors following a death loss that are dictated by traditions, customs, rituals, and values of a society (Burnell &

Burnell, 1989). In current research and for this study, grief is defined as the strong reaction to a death loss that is often seen through intense feelings, behaviors, or emotional suffering that is dictated by traditions, customs, rituals, and values of society (Freud, 1917; Burnell & Burnell, 1989; Worden, 2002).

Stages of grief. The process of grief is experienced as the sequence of emotional reactions to the death loss that occur during various stages (Bowlby, 1980; Burnell & Burnell, 1989; Prigerson & Jacobs, 2001; Kubler-Ross & Kessler, 2005). An individual's progression through the stages of grief can aid the individual in accepting the reality of the loss, accepting the fact that grieving is painful, adjusting to the changed environment without the help or companionship of the deceased, and redistributing much of the energy that had been invested in the deceased as well as reinvesting into new relationships (Burnell & Burnell, 1989; Worden, 2002). The stages have been identified as 1) phase of numbing or denial, 2) phase of anger, 3) phase of yearning or bargaining, 4) phase of disorganization or depression, and 5) phase of reorganization or acceptance (Bowlby, 1980; Prigerson & Jacobs, 2001; Kubler-Ross & Kessler, 2005). Within each identified stage, there are identified signs, symptoms, and characteristics. While these stages are clearly defined and organized, the name "stages" indicates one will experience grief in a linear order or way. In actuality, the experienced stages can occur in any order, intensity, or duration of time (Kubler-Ross & Kessler, 2005).

Denial. The stage of denial or phase of numbing presented in an individual undergoing the grieving process is often demonstrated, not by the denial that the deceased has died, but by the shock or numbness that the deceased is actually gone. This stage is often experienced when an individual has a difficult time believing that the deceased will

not walk through the door, come home at any minute, or is simply on a business trip (Kubler-Ross & Kessler, 2005). The individual might also feel very tense and apprehensive about the future during this stage (Bowlby, 1980). This first stage is often how an individual survives the initial shock of a loss (Bowlby, 1980; Kubler-Ross & Kessler, 2005). The questions such as "is this true?" or "did this really happen?" often manifest themselves during this stage of grief. These questions help an individual begin to process the death loss, cope with the overwhelming emotions that are being experienced, and accept the reality of the death loss. As the denial and numbness of the situations and emotions fade, the individual moves into other stages of grief.

Anger. The next stage of the grieving process is the phase of anger. This emotion is often directed or displaced towards friends, family members, the deceased, God, and even towards self (Kubler-Ross & Kessler, 2005). Anger related to grief can initiate from a sense of frustration that the death could not be prevented or the emotions related to being left behind (Worden, 2002). Anger can also be centered upon the belief the deceased did not take good care of themselves, the grieving individual did not take enough care of their loved one to stop the individual from dying, God disowned them or did not intervene in the death, or friends are not providing adequate support. While anger can be the most visible emotion in this stage, there are other suppressed feelings experienced during this stage that are often too difficult to process. These feelings include sadness, panic, hurt, guilt, or loneliness (Bowlby 1980; Kubler-Ross & Kessler, 2005). The presence of anger often demonstrates the individual's intensity of love and connection to the deceased. An individual may also express the feeling of unfairness of

the death during the stage of anger. Once this emotion has been voiced, the process and feelings associated with loss can again change and move forward.

Bargaining. The phase of yearning or bargaining allows the individual a way to get reprieve from the pain of the loss (Bowlby, 1980; Kubler-Ross & Kessler, 2005). Through "if only..." and "what if..." statements, a grieving individual may try to negotiate a way out of the experienced pain. Bargaining allows an individual to imagine the death did not occur and all is just a nightmare that can be awoken from (Kubler-Ross & Kessler, 2005). These experiences that allow an individual to visualize that the death loss did not occur. During the bargaining stage, the individual focuses on issues of the past; however, when there is a shift in focus to the future, an individual often recognizes the sadness that is now present. This stage is experienced multiple times during the grief process and culminates with the conclusion that the death loss occurred and the deceased is gone (Kubler-Ross & Kessler, 2005).

Depression. The phase of disorganization or depression stage is significant as it allows an individual to process the loss in its entirety and explore the feelings of sadness, loneliness, and emptiness (Bowlby, 1980; Kubler-Ross & Kessler, 2005). The feelings of sadness are the most common emotions experienced by a grieving individual (Worden, 2002). An individual might not see the purpose of getting out of bed, completing tasks, or maintaining a social life because all seems meaningless after the loss. This is an appropriate response when recently experiencing a death loss. Unfortunately, in today's society, depression after a loss is often seen as unnatural (Kubler-Ross & Kessler, 2005). It is common for individuals to move on from this stage only to have it reappear periodically.

Acceptance. The final stage of the grief process is reorganization or acceptance in which an individual realizes that the deceased is physically gone and their absence from life is a permanent reality (Bowlby, 1980; Kubler-Ross & Kessler, 2005). The transition into acceptance is not easy however it is a new norm, as the grieving individual must learn to live without their loved one. This stage of the grief process can occur over many years as the individual begins to understand that it was the deceased's time to die and the individual's time to keep living. When this stage is achieved, there is a reorganization of roles, a change in identity, and the renewing of relationships with friends and oneself (Bowlby, 1980; Kubler-Ross & Kessler, 2005).

Symptoms of grief. Due to the variability in the order, intensity, or length of time of the stages and emotions, the grief process is a highly individualized experience, complete with various symptoms. These symptoms often fall into four categories: physical, mental, emotional, and behavioral. Similar to the stages of grief, the symptoms are not experienced in just a linear way but rather are occasionally repeated and in various stages.

Physical. There are various physical symptoms that are often present in individuals who have recently experienced a death loss. These symptoms include sensations of somatic distress, a feeling of tightness in the throat, choking with shortness of breath, the need for sighing, an empty feeling in the abdomen, muscle weakness, dry mouth, oversensitivity to noise, and an intense subjective distress (Burnell & Burnell, 1989; Worden, 2002). Other physical symptoms are similar to those seen in depressive episodes such as insomnia, anorexia, appetite disturbances either weight loss or weight gain, and anhedonia (Shuchter, 1986; Burnell & Burnell, 1989; Hensley & Clayton,

2008). Various studies have also found that grief can lead to physical illness, aggravate existing medical conditions, generate new physical symptoms and complaints, and increase the utilization of medical services (Osterweis, Solomon, & Green, 1987; Burnell & Burnell, 1989). At times, the physical symptoms related to grief can cause an individual to see a physician due to the distress being experienced (Worden, 2002).

Mental. For an individual who has just experienced a death loss, it is common to experience various mental symptoms. The individual may believe to have seen the deceased or heard the voice of the deceased (Osterweis, et al., 1987; Burnell & Burnell, 1989). Also, an individual could experience some disturbance in cognitive functioning as manifested in the inability to concentrate or having a constant stream of thoughts that are related to the deceased. This impairment in the individual could result in a lack of daily functioning seen in not being able to remember appointments, misplace money, or getting lost while driving (Burnell & Burnell, 1989). Other mental symptoms that are often present after a death loss are dreams or nightmares that are often present after a death loss as a way for an individual to make sense of the death (Burnell & Burnell, 1989; Kubler-Ross & Kessler, 2005).

Emotional. There are several emotional symptoms that are similar to the previously described stages of grief that include denial, sadness and depression, guilt and anger, and relief (Osterweis et al., 1987; Zisook, 1987; Burnell & Burnell, 1989). Denial is often experienced in varying intensities and is seen in individuals who express disbelief that the death has occurred however are able to accept the reality that it has occurred. Sadness and depression are emotions that are the most common during the grieving period (Worden, 2002). These emotions enable the individual to process the loss and

emptiness that an individual can feel after a death loss. The emotion of guilt is often present when the individual feels as though there was something that could have been done to save the deceased. This emotion is common and usually an irrational belief that will diminish through self-exploration (Worden, 2002). Anger is often seen when the individual feels as though the deceased has left them or there is "unfinished business" within the relationship (Burnell & Burnell, 1989). It is important to evaluate where the anger is being directed as anger towards self can develop into severe depression or suicidal behavior (Worden, 2002). After a lingering illness, the emotion of relief is commonly seen after the ending of pain and suffering. However, this emotion can be coupled with the feeling of guilt (Worden, 2002). There is often a renewed sense of freedom for the caretaker of the deceased in this situation (Burnell & Burnell, 1989). Research has found that the emotions related to a death loss occur in intrusive, timelimited, and intense waves leaving the individual yearning for the deceased (Prigerson & Jacobs, 2001). Similar to the progression of the grief stages, the emotions are reduced in both intensity and frequency and become more sentimental than painful (Prigerson & Jacobs, 2001).

Behavioral. Behavioral symptoms are widely varying within grieving individuals. In some individuals, the symptoms can be self-harming such as the start or increase of smoking, drinking, and drug abuse. Often crying and uncontrolled tearfulness experienced in the early grief process can result in an individual socially withdrawing from others. The symptom of social withdrawal is usually the most prominent change seen in the earlier stages of grief (Burnell & Burnell, 1989). As the individual processes their grief, social interactions will increase and possible new relationships will form

(Kubler-Ross & Kessler, 2005). Some individuals will try to avoid reminders of the deceased in order to avoid possible triggers of painful feelings (Worden, 2002).

Psychosocial factors of variants of grief. There have been various psychosocial factors identified that impact the process and symptoms of grief. These factors include the nature of the relationship to the deceased, emotional closeness to the deceased, the individual's coping behaviors and mental health, basic beliefs and attitudes towards death, a level of intelligence and maturity, the individual's past history of losses, the individual's ethnic, cultural, and religious backgrounds, the presence of any "unfinished business" with the deceased, and an established social support system (Shanfield, 1987; Burnell & Burnell, 1989; Servaty-Seib & Pistole, 2006). The presence of these factors has the ability to help or hinder an individual through the grief process towards the stage of acceptance.

Ginzburg, Geron, and Solomon (2002) researched different variants of grief in bereaved parents who had lost an adult child by assessing the prevalence of the variants of complicated grief reactions, validating these reactions as reflecting complicated reactions, and studying the risk-related factors that are differentially associated with the various grief reactions. The 85 participants (mean age of 51 and 46% were males and 54% were females) included parents who had lost a child during military service. They completed a battery of assessments including the Texas Revised Inventory of Grief (Faschingbauer, Devaul & Zisook, 1977), Symptom Checklist 90 (Derogatis & Cleary, 1977), and psychosocial functioning questionnaire. The results categorized the participants into one of four groups of grief reaction: absence of grief (33%), delayed grief (17%), prolonged grief (36%), and resolved grief (14%). The participants in the

absent and delayed grief groups were found to have lower levels of psychosocial adjustment compared to those in the prolonged grief group. Also, the level of education, religious attitudes, and the circumstances of the loss were associated with the type of grief reaction. Those subjects with less education were classified in the absence of grief group and 50 percent of the subjects with some education were classified as the prolonged reaction group. Fifty-six percent of the participants who identified themselves as religiously traditional were classified into the absence of grief reaction group.

Emotional Closeness.

Emotional closeness as defined by Servaty-Seib and Pistole (2006) is the "subjectively reported level of emotional openness, awareness, and understanding in the relationship" (pg. 152). Servaty-Seib and Pistole (2006) researched the relationship between emotional closeness and grief in adolescents in high school. Ninety adolescents (mean age of 15.8 and 77.8% were females) completed the Texas Revised Inventory of Grief (Faschingbauer, et al., 1977) and the Emotional Closeness Scale and Continuum in order to assess the level of grief and emotional closeness with deceased friends, grandparents, or aunts/uncles. A one-way MANOVA was used to evaluate the relationship between the level of grief and emotional closeness. Results indicated participants who reported higher levels of closeness also reported high levels of past and present grief.

Ring (2009) researched the relationship between prolonged grief symptomatology, suicidiality, and perceived emotional closeness in a college students population. The study assessed the variables utilizing the Grief and Loss Demographic Questionnaire, the Personal Acquaintance Measure, The Prolonged Grief Disorder-13,

and The Yale Evaluation of Suicidality. Two thousand and forty-five participants completed the survey reporting on a death-loss from the previous two years. Hierarchical regression analyses were used to evaluate the relationship between the variables. Results indicated that perceived closeness to the deceased accounted for a significant amount of variance in the prolonged grief related symptoms which indicates perceived emotional closeness to the deceased predicts the severity of prolonged grief related symptoms. This finding demonstrates the importance of evaluating the emotional closeness of the deceased individuals in relation to the grief symptoms.

Effective grief and the ending processes. The grief process refers to the change of feelings and emotions that occur over time (Burnell & Burnell, 1989). In order to effectively process the death loss, one must be able to get to a point of resolution and begin to reinvest in the previous interests of life. There are various steps that help the individual achieve this change that include accepting the reality of the loss, accepting the grieving as painful, adjusting to the changed environment without the help or companionship of the deceased, and being able to withdraw much of the energy that has been invested in the deceased and reinvest into new relationships (Burnell & Burnell, 1989; Worden, 2002).

Psychological Sense of Community

When an individual experiences the death loss of a close friend or family member, a deceased's community is often impacted. Community can be measured in two realms: geographically or relationally (Gusfield, 1975). A community identified by geographical or territorial boundaries can include neighborhoods, towns, and cities (Gusfield, 1975). The other type community is "relational" and is concerned with the quality of

relationships between individuals without reference to a location (Gusfield, 1975). Either type of population can provide a psychological sense of community. Psychological sense of community (PSOC) is defined as "the perception of similarity with others, an acknowledged interdependence with others, a willingness to maintain this interdependence by giving to or doing for others what one expects from them, the feeling that one is part of a larger dependable and stable structure" (Sarason, 1977, p. 157).

In 1986, McMillian and Chavis developed the first theory associated with PSOC which identified four dimensions: 1) membership, 2) influence, 3) integration and fulfillment of needs, and 4) shared emotional connection. The first element, membership, is the feeling of belonging or having a sense of personal relatedness to the community. The second element, influence, is defined as having a sense of mattering in the community. The third element, integration and fulfillment of needs, is characterized by the members within the community having their needs met by the resources that are available by their involvement within the community. The fourth element of shared emotional connection is defined by the commitment and belief that the members of the community have shared and will share a common history, common places, time spent together, and common experiences.

Identification. In recent research, the fifth dimension of conscious identification has been identified as an important additional dimension of PSOC (Fisher & Sonn, 1999; Obst, Smith, & Zinkiewicz, 2002). Having a conscious identification with a group is defined as an individual having a strong awareness of the community membership and the value that it has to an individual (Fisher & Sonn, 1999; Obst, et al., 2002). Researching identification provides a greater sense of understanding about the members'

attachment to their community. A three-factor model of social identification developed by Cameron (2004) provides a more in-depth evaluation of the identification dimension factors. The three factors associated with identification are cognitive centrality, in-group affect, and in-group ties. Cameron (2004) defines cognitive centrality as the time the group member spends thinking about being a group member. In-group affect is described as the positive feelings that are associated by having a membership to the group. Having perceptions of similarity, bond, and belongingness with other group members is described as in-group ties.

Overall, the five dimensions of psychological sense of community have been validated in various geographical areas and in communities of similar interests (Obst, et al., 2002a; Obst et al., 2002b; Obst et al., 2002c). The underlying PSOC dimensions have been evaluated to assess their validity across various geographical areas (Obst et al., 2002c). The 669 participants (55% females, 45% males) aged 18 to 69 years from urban, regional, and rural areas were given a battery of assessments which included a demographics sheet, the Sense of Community Index, the Psychological Sense of Community Scale, the Neighborhood Cohesion Instrument, the Community Satisfaction Scale, the Urban Identity Scale, the Multidimensional Measure of Neighboring, the Three Dimensional Strength of Group Identification Scale, and the Strength of In-group Identification Scale. The results indicate the previous identified dimensions of psychological sense of community were valid when assessing PSOC in geographical differences. The dimensions of PSOC have also been found to be consistent with communities of interest. Obst et al. (2002a) assessed members of a science fiction fandom (SF fandom) community of interest, specifically evaluating if dimensions of

PSOC were seen in a group that was not bound by geographical constraints. Participants of the study included 359 members (52% male, 48% female) of SF fandom with an age range of 18 to 79 (M = 39.5). The battery of assessments given included the Sense of Community Index, the Psychological Sense of Community Scale, the Neighborhood Cohesion Instrument, the Community Satisfaction Scale, the Urban Identity Scale, and the Multidimensional Measure of Neighboring. The results showed the presence of factors including belonging, cooperative behavior, friendship and support, conscious identification, and leadership and influence. These findings indicated the previously determined factors of PSOC in geographical communities were also seen in communities of interest (Obst et al., 2002a; Obst et al., 2002b).

Social Support

Cobb (1976) defined social support as demonstrated information given for an individual to belong to one or more of the following factors: information leading the subject to believe that one is cared for and loved, information leading the subject to believe that one is esteemed and valued, and information leading the subject to believe one belongs to a network of communication and mutual obligation. Williams, Barclay, and Schmied (2004) reviewed over 30 studies regarding social support in order to identify a definition which would be concise and accurate for future research. Various definitions proved to lack contextual sensitivity and consistency. Defining social support as a contextualized approach with various groups of individuals proved to be most applicable. Coffman and Ray (1999) researched the support given to low-income African American woman who had been diagnosed with one or more complications of pregnancy. Support, in this study, was defined as "the willingness to be available to provide help,

caring, respecting, knowing, believing in, sharing information and doing for others" (pg. 486). Williams et al. (2004) also identified the 1978 Gottlieb study as having an accurate definition of social support. This definition identified social support as having emotionally sustaining behaviors, having problem-solving behaviors, having indirect personal influence, and intervening in the environment to reduce the source of stress (Gottlieb, 1978).

The membership in a community and the presence of a social support network can provide a bond and a sense of belongingness which is important when processing a significant event such as a death loss. The presence of a social support network has been demonstrated as being a meaningful coping strategy for both physical illness and psychological disorders (Pearson, 1986). The social support network has been demonstrated as being a meaningful coping strategy given by partners, family members, friends, colleagues, and the other social or community networks (Pearson, 1986; Breen & O'Conner, 2011).

Types of social support. There are three types of social support defined within the literature: social embeddedness, perceived social support, and enacted support (Barrera, 1986). The construct of social embeddedness refers to the connection an individual has to significant others within their environment (Barrera, 1986). This construct is also seen in psychological sense of community (Sarason, 1977; Barrera, 1986). The second approach of perceived social support is the cognitive appraisal of being reliably connected to others (Barrera, 1986). Enacted support refers to the actions others perform when providing assistance to an individual (Barrera, 1986). This construct is essential when evaluating what actions or helping behaviors are used to provide

support in the coping and adjustment processes, specifically when an individual faces adversity (Barrera, 1986).

Social support and stress. There have been significant findings which demonstrate that a decrease in stress occurs when a strong social support is present when dealing with a job loss and health concerns (Gore, 1978). This outcome may be attributed to the presence of large social networks providing regular positive experiences in a stable environment to an individual (Cohen & Wills, 1985).

The social support offered by family members and close friends has been found to be beneficial when processing the death loss of a spouse (Kaunonen, Tarkka, Paunonen, & Laippala, 1999). Kaunonen et al. (1999) identified three points regarding the benefits of social support when processing the death loss. These include the benefit of receiving support, offering support, and the nature of reciprocal social support (Kaunonen et al., 1999). These factors demonstrate the importance of social support and community in the coping process when having experienced a death loss.

Impact On College Students

College Students and Grief. Approximately 22 to 30 percent of college students have experienced a death loss of a family member or close friend (Balk, 1997; Balk, Walker, & Baker, 2010). Balk (1997) conducted a study to gather information regarding death and bereavement from a college student population. The participants in Balk's (1997) were comprised of 994 college student (79.4% female, 20.6% male) of whom 94 percent were Caucasian. Participants were asked to complete a survey regarding their experience of a death loss with family member or friend, the relationship to the deceased, duration of time since death, cause of death, attendance of the funeral or memorial

service, if the death was discussed, and if the participant deemed the discussion helpful. The second part of the Balk (1997) study included a focus group comprised of 18 participants (78% female, 22% male) who had initially completed the survey. The Grant Foundation Bereavement Inventory was used to collect data. The results indicated a large amount of bereaved college students identified religion as an important coping strategy. Additionally, this bereaved population indicated dissatisfaction with professional help in the coping of the grieving process. The findings also indicated the participants had a more difficult experience with grief recovery than was expected. Additionally, study participants noted their peers' expectations for the bereavement period to be much shorter than what was experienced.

Utilizing the Balk (1997) study, Balk, Walker, and Baker (2010) further explored the prevalence and severity of bereavement in the undergraduate college population. Balk et al. (2010) study included 118 participants (59% female, 41% male; 69% Caucasian). The majority of the participants identified themselves as Protestant (94%). A demographics questionnaire and background questionnaire were given to assess the participant's experience with a death loss a close friend or family member. The participants were asked to identify their relationship with the deceased, the age and gender of the deceased, duration of time since the death, and the cause of death.

Participants having experienced a recent death loss were given the Prigerson,

Vanderwerker, and Maciejewski's (2008) Prolonged Grief-13 assessment was given as part of the assessment battery. The results revealed that 30 percent of the participants were in the first year of bereavement and 39 percent were in the second year of bereavement with two participants (1.7%) identified as experiencing with Prolonged

Grief Disorder. Study results validate a high prevalence of grief within a college student population as well as the presence of students experiencing a deeper level of distress due to the grief.

College students can experience symptoms of grief that result in the impairment of personal, social, and academic functioning (Taub & Servaty-Seiv, 2008). These symptoms can include insomnia, decreased academic performance, and significantly lower grade point averages (Hardison, Neimeyer, & Lichstein, 2005; Servaty-Seib & Hamilton, 2006). Hardison, Neimeyer, and Lichstein (2005) explored the relationship between bereavement and sleep problems in a sample of college students, hypothesizing the bereaved college students would report more insomnia compared to the non-bereaved college students. The participants in the study included 508 bereaved participants and 307 non-bereaved participants (76% female, 24% male) who identified as predominantly Caucasian (58%) and African American (37%) while other racial groups included 2% Asian American, 2% Hispanic, and 1% other. The participants took the Inventory of Complicated Grief (Prigerson & Jacobs, 2001), a sleep questionnaire, and a demographics questionnaire. The results revealed bereaved participants reported significantly more insomnia than those who were not bereaved. Also, insomnia proved to be a statistically significant predictor of complicated grief. Additionally, other predictors of insomnia were identified as a higher frequency of previous contact with the deceased, nature of the death (violent or nonviolent), younger age of the deceased, level of closeness with the deceased, recency of the loss, relationship to the deceased, and sex of the bereaved.

Balk et al. (2010) found a small portion of college students who report symptoms consistent with complicated grief. These symptoms included agitated depression, chronic illness, enduring and intense clinical reactions such as guilt, suicidal ideation, serious sleep difficulties, significant disturbances in self-esteem, decreased job and school performances, and strained interpersonal relationships. Additionally, grief establishes boundaries, highlights the separateness of individuality, and possibly hinders resolutions of bereavement (Balk, Tyson-Rawson, & Colletti-Wetzel, 1993). These findings indicate college students are not immune to the symptoms of grief, including the increased severity symptoms of complicated grief.

Student Development Theory and Grief. Various college student development theories including the psychosocial theory (Chickering, 1969; Chickering & Reisser, 1993) and cognitive-structural theory (Perry, 1968) are often used to explain the development of individuals for age 18 to 23. Psychosocial theorist postulate (Chickering, 1969; Chickering & Reisser, 1993), several developmental stages believed to be experienced. Erikson (1959) first proposed the development stages of growth and identified the establishment of identity as one of the central developmental tasks completed during age 18 to 23. Chickering (1969) used this theory to expand on the development of college students. Seven vectors were identified to clearly define how the college student's identity can be emotionally, socially, physically, and intellectually impacted. These vectors are: developing competence, managing emotions, moving through autonomy towards interdependence, developing mature interpersonal relationships, establishing identity, developing purpose, and developing integrity (Sanford 1967; Chickering, 1969; Chickering & Reisser, 1993; Evans, Forney, Guido,

Patton, & Renn, 2010). The development that occurs during this time has been described as "the application of human development concepts in postsecondary settings so that everyone involved can master increasingly complex developmental tasks, achieve self-direction, and become interdependent" (Miller & Prince, 1976, p. 3). Due to the large amount of development that occurs during this time period, a traumatic event such as a death loss can cause a disruption in the development.

A college student's response and ability to cope with a death loss often depends on their achieved developmental stage. Depending on the college student's developmental stage, personal, social, and academic functioning can be impaired by a death loss (Taub & Servaty-Seib, 2008). If a student is trying to achieve intellectual competence and experiences a death loss, they may see a decrease in their academic performance (Servaty-Seib & Hamilton, 2006). Students that have experienced a death loss and are working to develop interpersonal competence may lack the skills to be able to communicate their situation and needs to others making it difficult to effectively cope (Servaty-Seib & Hamilton, 2006). The development of interpersonal competence could also be negatively impacted should a college student experience a death loss during this stage as it could result in the students negatively changing their liking or trust in others (Catlin, 1993; Servaty-Seib & Hamilton, 2006). The students can cling to those close to them or completely withdraw from others should the death loss impact the development of mature interpersonal relationships. Chickering and Reisser (1993) found that during the college years, there is a shift in students' dependence on parents to dependence on peers and non-parental adults to independence. During the time of bereavement, if a student is reliant on the adult who passes, the college student might experience grief

related symptoms completing any function or tasks previous completed by the deceased such as filling out financial aid papers (Servaty-Seib & Hamilton, 2006).

When a college student is coping with a death loss, they are often surprised the recovery process can be more difficult than expected. There are several factors to assist in this coping process. Balk (1997) found having religious beliefs can aid in the recovery process for a college student. Schlossberg et al. (1995) found individuals with more coping strategies are more effective in processing the death loss and transition than those that do not. Counseling can be used as a coping strategy, however, it has been found college students rarely utilize counseling services after a death loss (Balk, 1997).

Research has shown college students who participated in a grief support group found the group helpful through the sharing, giving of support, hearing others' perspectives, and receiving validation for their responses (Balk et al., 1993).

College Students and Psychological Sense of Community. Due to the unique availability of campus activities and closeness of peers in a college setting, students are able to develop their psychological sense of community in a unique way compared to other types of communities as universities can be considered a location-based and interest-based setting (Mahan, Garrard, Lewis, & Newbrough, 2002). The construct of psychological sense of community in a university setting can be seen in research in several constructs including campus involvement (Pretty, 1990; Royal & Rossi, 1996; DeNeui, 2003), level of extroversion (DeNeui, 2003), and perceived support (Pretty, 1990).

DeNeui (2003) studied how students' personality traits and participation in campus organizations and activities moderated the development of psychological sense of

community in a longitudinal study. During the initial study, 364 first year college students (64% females, 36% males) took the first battery of assessments with only 120 college students (79% females, 21% males) participating in the follow-up survey. The initial assessment battery included the Campus Atmosphere Scale (Lounsbury & DeNeui, 1995), the NEO-PI-R (Costa & McCrae, 1992) and a demographic questionnaire. The Campus Atmosphere Scale was given at the end of the semester with a checklist of various campus organizations and activities. The results revealed a significant positive correlation between extroversion and psychological sense of community. Additionally, it was found extroverts showed a higher level of psychological sense of community than introverts. DeNeui (2003) found students who had participated in campus activities experienced a higher level of psychological sense of community than those that did not participate. The research also indicated the quality of participation was important in determining an individual's psychological sense of community. These findings indicated participation in campus events and having a higher quality of participation can increase a college student's psychological sense of community. These findings support the earlier study completed by Royal and Rossi (1996). This study researched psychological sense of community within workplaces and schools. Research indicated students involved in an extracurricular activity at the school presented with a higher level of psychological sense of community (Royal & Rossi; 1996).

Pretty (1990) researched the relationship between psychological sense of community and social climate factors in a university setting. One hundred and two college students completed a survey which included a demographics questionnaire, the University Residence Environment Scale (URES), and the Sense of Community Index.

The results found involvement, academic achievement, and perceived support predicted psychological sense of community. These results indicated the psychological sense of community factors are related to the perceptions of environmental performance demands, interpersonal networks, and support. These findings demonstrated how the participation in campus activities and the quality of participation impact the level of experienced psychological sense of community. Furthermore, this study indicated the amount of perceived support predicts the level of experienced psychological sense of community (Pretty, 1990).

Summary

The experience of grief after a death loss can be extremely difficult. Due to the level of development in college students, the ability to process a death loss can result in unforeseen challenges. Social support has been an effective coping skill to help process a death loss. Psychological sense of community has been shown to provide a sense of identification membership to a community and perceived support within a college student population. The purpose of this study is to evaluate the perceived social support and psychological sense of community of college students who have experienced a death loss.

APPENDIX B

TABLES

Table 1 $Demographics \ of \ the \ Sample \ (N=131)$

Age	m=21.0	sd=2.43	
	n	%	
18	11	(8.4)	
19	21	(16)	
20	31	(23.7)	
21	31	(23.7)	
22	19	(14.5)	
23	5	(3.8)	
24	5	(3.8)	
27	3	(2.3)	
28	2	(1.5)	
29	1	(.8)	
31	2	(1.5)	

Sex	n	0/0
Male	50	(38.2)
Female	81	(61.8)

Race	n	%
T /TT	10	(7. C)
Latino/Hispanic	10	(7.6)
Black/African-American	13	(9.9)
White/Caucasian	100	(76.3)
Asian/Pacific Islander	4	(3.1)
Native American	1	(.8)
Biracial/Multiracial	2	(1.5)
Other	1	(.8)

Table 1 Demographics of the Sample (N = 131) (Continued)

Year in College	n	%
First Year	20	(15.3)
Sophomore	35	(26.7)
Junior	33	(25.2)
Senior	43	(32.8)

Relationship to Deceased	n	%
Relationship to Deceased	11	70
Mother	5	(3.8)
Father	7	(5.3)
Brother	4	(3.1)
Sister	2	(1.5)
Grandparent	52	(39.7)
Aunt/Uncle	14	(10.7)
Cousin	5	(3.8)
Friend	42	(32.1)
Cause of Death	n	%
*11	- 4	(41.0)
Illness	54	(41.2)
"Old Age"	25	(19.1)
Accident	39	(29.8)
Suicide	8	(6.1)
Unknown	5	(3.8)

Table 1 Demographics of the Sample (N =131) (Continued)

Months Since Death	m=12.01	sd=6.90
	n	%
0	3	(2.3)
1	7	(5.3)
2	1	(.8)
3	4	(3.1)
4 5	7	(5.3)
5	4	(3.1)
6	10	(7.6)
7	4	(3.1)
8 9	3	(2.3)
9	4	(3.1)
10	9	(6.9)
11	7	(5.3)
12	12	(9.2)
13	5	(3.8)
14	4	(3.1)
15	8	(6.1)
16	3	(2.3)
17	1	(.8)
18	7	(5.3)
19	3	(2.3)
20	7	(5.3)
21	3	(2.3)
22	3	(2.3)
23	1	(.8)
24	11	(8.4)

Table 2

Means, Standard Deviations, and Score Ranges for the Main Study Variables (N =131)

Variable	Means	SD	Actual Store Ranges
TRIG- Present	37.60	11.20	52 (13 – 65)
1 Teschi			
TRIG- Past	25.60	7.96	32 (8 – 40)
SEC	36.53	10.74	42 (7 – 49)
CPSOCS	55.96	8.59	40 (26 – 66)
PSSFr	16.05	4.89	20 (0 – 20)
DCCE-	14.02	(40	20 (0 20)
PSSFa	14.82	6.40	20 (0 – 20)
Months	12.01	6.90	24 (0 – 24)

TRIG-Present = Texas Revised Inventory of Grief – Present Emotional Feelings

TRIG-Past = Texas Revised Inventory of Grief – Past Behavior

SEC = Scale of Emotional Closeness

CPSOCS = Collegiate Psychological Sense of Community Scale

PSSFr = Perceived Social Support – Friends

PSSFa = Perceived Social Support – Family

Table 3

Correlation Matrix of Main Study Variables (N = 131)

TRIG- Present	TRIG- Present 1.0	TRIG- Past .74**	SEC 27**	CPSOCS .14	PSSFr .09	PSSFa	Months .13
TRIG- Past		1.0	28**	.22**	.10	.10	.06
SEC			1.0	.11	.16*	.00	.09
CPSOCS				1.0	.57**	.20*	.06
PSSFr					1.0	.32**	.04
PSSFa						1.0	07
Months						*p < .05	1.0 **p < .01

TRIG-Present = Texas Revised Inventory of Grief – Present Emotional Feelings

TRIG-Past = Texas Revised Inventory of Grief – Past Behavior

SEC = Scale of Emotional Closeness

CPSOCS = Collegiate Psychological Sense of Community Scale

PSSFr = Perceived Social Support – Friends

PSSFa = Perceived Social Support – Family

Table 4 $\label{eq:multiple Regression Findings for Perceived Social Support with Family and Perceived}$ Social Support with Friends as Predictors of Past Grief Behavior (N=131)

Predictors	R	R squared	F	β	Т	Sig
Model 1	.13	.01	1.02			
PSS- Family				.08	.85	.41
PSS- Friends				.08	.82	.40

PSSFr = Perceived Social Support – Friends

PSSFa = Perceived Social Support – Family

Table 5

Multiple Regression Findings for Perceived Social Support with Family and Perceived Social Support with Friends as Predictors of Present Emotional Grief Feelings (N=131)

Predictors	R	R squared	F	β	Т	Sig
Model 1	.09	.01	.57			
PSS- Family				03	34	.74
PSS- Friends				.10	1.07	.29

PSSFr = Perceived Social Support – Friends

PSSFa = Perceived Social Support – Family

Table 6

Multiple Regression Findings for Collegiate Psychological Sense of Community,

Duration of Months since Death Loss, and Emotional Closeness as Predictors of Past

Grief Behavior (N = 131)

Predictors	R	R squared	F	β	T	Sig
Model 1	.38	.14	7.09			
SEC				31	-3.71	.00
CPSOCS				.24	2.93	.04
Months				.07	.89	.37

CPSOCS = Collegiate Psychological Sense of Community Scale

Table 7

Multiple Regression Findings for Collegiate Psychological Sense of Community,

Duration of Months since Death Loss, and Emotional Closeness as Predictors of Present

Emotional Grief Feelings (N = 131)

Predictors	R	R squared	F	β	T	Sig
Model 1	.35	.12	5.87			
SEC				30	-3.54	.01
CPSOCS				.16	1.60	.06
Months				.15	1.79	.08

CPSOCS = Collegiate Psychological Sense of Community Scale

TRIG-	TRIG- Present	TRIG- Past .72**	SEC 21**	CPSOCS .22*	PSSFr .05	PSSFa	Months .13
Present							
TRIG- Past		1.0	18	.16	.13	.05	.14
SEC			1.0	.18	.20*	.02	.10
CPSOCS				1.0	.54**	.18	.15
PSSFr					1.0	.29**	.20**
PSSFa						1.0	05
Months						* < 0 <i>5</i>	1.0
Wionins						*p < .05	

TRIG-Present = Texas Revised Inventory of Grief – Present Emotional Feelings

TRIG-Past = Texas Revised Inventory of Grief – Past Behavior

SEC = Scale of Emotional Closeness

CPSOCS = Collegiate Psychological Sense of Community Scale

PSSFr = Perceived Social Support – Friends

PSSFa = Perceived Social Support – Family

Table 9

Correlation Matrix of Main Study Variables for Students of Color (N = 31)

TRIG-	TRIG- Present	TRIG- Past	SEC 22	CPSOCS 05	PSSFr .04	PSSFa 08	Months
Present	1.0	.,,_	.22	.02	.01	.00	.00
TRIG- Past		1.0	41*	19	20	32	.24
SEC			1.0	.09	.37*	.21	12
CPSOCS				1.0	.57**	.14	19
PSSFr					1.0	.32	38*
PSSFa						1.0	07
Months						*p < .05	1.0 **p < .01

TRIG-Present = Texas Revised Inventory of Grief – Present Emotional Feelings

TRIG-Past = Texas Revised Inventory of Grief – Past Behavior

SEC = Scale of Emotional Closeness

CPSOCS = Collegiate Psychological Sense of Community Scale

PSSFr = Perceived Social Support – Friends

PSSFa = Perceived Social Support – Family

Table 10

Multiple Regression Findings for Collegiate Psychological Sense of Community,

Duration of Months since Death Loss, and Emotional Closeness as Predictors of Past

Grief Behavior for White College Students (N = 100)

Predictors	R	R squared	F	β	t	Sig
Model 1	.36	.127	4.67			
SEC				27	-2.76	.01
CPSOCS				.25	2.57	.01
Months				.12	1.21	.23

CPSOCS = Collegiate Psychological Sense of Community Scale

Table 11

Multiple Regression Findings for Collegiate Psychological Sense of Community,

Duration of Months since Death Loss, and Emotional Closeness as Predictors of Present

Grief Behavior for White College Students (N = 100)

Predictors	R	R squared	F	β	t	Sig
Model 1	.30	.089	3.15			
SEC				23	-2.31	.02
CPSOCS				.18	1.78	.09
Months				.14	1.39	.17

CPSOCS = Collegiate Psychological Sense of Community Scale

Table 12

Multiple Regression Findings for Collegiate Psychological Sense of Community,

Duration of Months since Death Loss, and Emotional Closeness as Predictors of Past

Grief Behavior for College Students of Color (N = 31)

Predictors	R	R squared	F	β	t	Sig
Model 1	.24	.055	.525			
SEC				23	-1.19	24
CPSOCS				04	21	.84
Months				08	42	.68

CPSOCS = Collegiate Psychological Sense of Community Scale

Table 13

Multiple Regression Findings for Collegiate Psychological Sense of Community,

Duration of Months since Death Loss, and Emotional Closeness as Predictors of Present

Grief Behavior for College Students of Color (N = 31)

Predictors	R	R squared	F	β	t	Sig
Model 1	.47	.22	2.53			
SEC				38	-2.21	.04
CPSOCS				12	69	.49
Months				.17	1.00	.32

CPSOCS = Collegiate Psychological Sense of Community Scale

Table 14

Correlation Matrix of Main Study Variables for Females (n = 81)

TRIG- Present	TRIG- Present 1.0	TRIG- Past .76**	SEC 36**	CPSOCS .10	PSSFr .01	PSSFa .05	Months .05
TRIG- Past		1.0	34**	.10	.15	.02	.15
SEC			1.0	.06	.13	05	.15
CPSOCS				1.0	.49**	.19*	.17
PSSFr					1.0	.31**	.09
PSSFa						1.0	.00
Months						*p < 05	1.0 **p < .01

TRIG-Present = Texas Revised Inventory of Grief – Present Emotional Feelings

TRIG-Past = Texas Revised Inventory of Grief – Past Behavior

SEC = Scale of Emotional Closeness

CPSOCS = Collegiate Psychological Sense of Community Scale

PSSFr = Perceived Social Support – Friends

PSSFa = Perceived Social Support – Family

Table 15

Correlation Matrix of Main Study Variables for Males (n = 50)

TRIG- Present	TRIG- Present 1.0	TRIG- Past .76**	SEC 11	CPSOCS .34**	PSSFr .18	PSSFa	Months .07
TRIG- Past		1.0	19	.28*	.07	.02	.17
SEC			1.0	.21	.26*	.14	01
CPSOCS				1.0	.61**	.17*	11
PSSFr					1.0	.32**	02
PSSFa						1.0	18
Months						*n < 05	1.0 5 **p < .01

TRIG-Present = Texas Revised Inventory of Grief – Present Emotional Feelings

TRIG-Past = Texas Revised Inventory of Grief – Past Behavior

SEC = Scale of Emotional Closeness

CPSOCS = Collegiate Psychological Sense of Community Scale

PSSFr = Perceived Social Support – Friends

PSSFa = Perceived Social Support – Family

Table 16

Multiple Regression Findings for Collegiate Psychological Sense of Community,

Duration of Months since Death Loss, and Emotional Closeness as Predictors of Past

Grief Behavior for Female College Students (N = 81)

Predictors	R	R squared	F	β	t	Sig
Model 1	.39	.15	4.52			
SEC				38	-3.53	.01
CPSOCS				.11	1.05	.30
Months				.09	.09	.81

CPSOCS = Collegiate Psychological Sense of Community Scale

Table 17

Multiple Regression Findings for Collegiate Psychological Sense of Community,

Duration of Months since Death Loss, and Emotional Closeness as Predictors of Present

Grief Behavior for Female College Students (N = 81)

Predictors	R	R squared	F	β	t	Sig
Model 1	.40	.16	5.01			
SEC				37	-3.51	.001
CPSOCS				.09	.85	.40
Months				.19	1.80	.08

CPSOCS = Collegiate Psychological Sense of Community Scale

Table 18

Multiple Regression Findings for Collegiate Psychological Sense of Community,

Duration of Months since Death Loss, and Emotional Closeness as Predictors of Past

Grief Behavior for Male College Students (N = 50)

Predictors	R	R squared	F	β	t	Sig
Model 1	.40	.159	2.90			
SEC				19	-1.39	.17
CPSOCS				.39	2.78	.01
Months				.11	.79	.44

CPSOCS = Collegiate Psychological Sense of Community Scale

Table 19

Multiple Regression Findings for Collegiate Psychological Sense of Community,

Duration of Months since Death Loss, and Emotional Closeness as Predictors of Present

Grief Behavior for Male College Students (N = 50)

Predictors	R	R squared	F	β	t	Sig
Model 1	.40	.162	2.96			
SEC				26	-1.86	.07
CPSOCS				.35	2.53	.02
Months				.14	1.03	.31

CPSOCS = Collegiate Psychological Sense of Community Scale

APPENDIX C

CONSENT FORMS & SOCIAL MEDIA SOLICITATION

Consent Form

(Oklahoma State University SONA Pool)

PARTICIPATION INFORMATION SHEET- ON-LINE SURVEY SONA Solicitation

Project Title: Psychological Sense of Community and Social Support Among College Students Who Experience Grief

Investigator(s): Rachel D.S. McNally, M.S., Oklahoma State University Donald L. Boswell, Ph.D., Oklahoma State University

Purpose: This is a web-based study to evaluate the relationship between the perceived level of social support and psychological sense of community experienced by a college student who has experienced a death loss. You are being asked to participate in the survey because you are a college student, over the age of 18 years old, and have experienced a death loss within the past two years. If you choose to participate, you will be asked to answer questions about your relationship with the deceased family member or friend, grief related symptoms, perceived social support, and psychological sense of community. The results of this research will expand our knowledge how college students perceive social support and psychological sense of community while grieving.

Procedures: Proceeding with the web-based survey will imply your consent to participate in this study. If you decide to participate you will be asked to provide some demographic information such as your age, classification in school, ethnicity, relationship to the deceased, time since death, age of deceased, and cause of death. You will then be asked to complete five self-report instruments. Some of the instruments will take no more than five minutes to fill out, while others may take approximately fifteen minutes. The survey should take approximately 25-30 minutes to complete.

Risks of Participation: There are minimal foreseeable risks with this

project, including stress, psychological, social, physical, or legal risks which are greater than those encountered in daily life. It is possible that some of the questions on the survey may be difficult to answer as they could possibly bring up strong memories related to the deceased. However, any discomfort that may be experienced will be minimal and there are no costs in your decision to participate in this survey. If you begin to experience discomfort or stress you may discontinue your participation at any time. Also, if you may also seek out services from your university counseling center should you continue to experience discomfort.

Benefits of Participation: While it is unlikely that you will derive personal benefits from your participation, your completion of the survey will be helpful in gaining a better understanding of the relationship between a perceived level of social support and psychological sense of community experienced by a college student who has experienced a death loss. If you decide to participate, you will be helping in to increase awareness and research support in this area, and in turn assist in the field of psychology.

Compensation: Participants will be offered .5 credit equivalent to the 30 minutes of time to complete the survey. Upon completion of the survey, participants will be redirected to a separate website to receive SONA credit.

Confidentiality: All information collected in this study is anonymous and will not be released, except as group data. Research records will be stored securely on a secure web server (Qualtrics) to then be transferred on a password-protected flash drive; only the primary researcher will have the password. Individuals responsible for research oversight will have access to the records through the primary investigator.

Your participation in the survey is **completely voluntary**. Digital questionnaires and record forms will have identification numbers, rather than names, on them. Any written results will include group findings and will NOT include individual information that would identify you. As a consequence, your confidentiality will be maintained and you will be able to complete the survey in an open and conscientious manner.

Participant Rights: Your decision to participate or not participate in this study is completely voluntary and you may decide to withdraw your consent to participate at any time. There will be no penalty for withdrawing or not participating in this study.

This study is part of a requirement for the primary researcher's completion of her Ph.D. as a doctoral student at Oklahoma State University. Your participation in this study is greatly appreciated.

If you have any questions concerning this study, please feel free to contact the primary researcher,

Rachel D.S. McNally, M.S., rachel.d.smith@okstate.edu or her advisor, Donald L. Boswell, Ph.D., at don.boswell@okstate.edu

If you have questions about your rights as a research volunteer, you may contact Dr. Shelia Kennison, IRB Chair, 219 Cordell North, Stillwater, OK 74078, (405) 744-3377 or irb@okstate.edu.

Consent: I have read and fully understand the consent form. I understand that my participation is voluntary. By clicking below, I am indicating that I freely and voluntarily agree to participate in this study and I also acknowledge that I am at least 18 years of age.

Consent Form

(Facebook Social Media)

PARTICIPATION INFORMATION SHEET- ON-LINE SURVEY Facebook Solicitation

Project Title: Psychological Sense of Community and Social Support Among College Students Who Experience Grief

Investigator(s): Rachel D.S. McNally, M.S., Oklahoma State University Donald L. Boswell, Ph.D., Oklahoma State University

Purpose: This is a web-based study to evaluate the relationship between the perceived level of social support and psychological sense of community experienced by a college student who has experienced a death loss. You are being asked to participate in the survey because you are a college student, over the age of 18 years old, and have experienced a death loss within the past two years. If you choose to participate, you will be asked to answer questions about your relationship with the deceased family member or friend, grief related symptoms, perceived social support, and psychological sense of community. The results of this research will expand our knowledge how college students perceive social support and psychological sense of community while grieving.

Procedures: Proceeding with the web-based survey will imply your consent to participate in this study. If you decide to participate you will be asked to provide some demographic information such as your age, classification in school, ethnicity, relationship to the deceased, time since death, age of deceased, and cause of death. You will then be asked to complete five self-report instruments. Some of the instruments will take no more than five minutes to fill out, while others may take approximately fifteen minutes. The survey should take approximately 25-30 minutes to complete.

Risks of Participation: There are minimal foreseeable risks with this project, including stress, psychological, social, physical, or legal risks which are greater than those encountered in daily life. It is possible that some of the questions on the survey may be difficult to answer as they

could possibly bring up strong memories related to the deceased. However, any discomfort that may be experienced will be minimal and there are no costs in your decision to participate in this survey. If you begin to experience discomfort or stress you may discontinue your participation at any time. Also, if you may also seek out services from your university counseling center should you continue to experience discomfort.

Benefits of Participation: While it is unlikely that you will derive personal benefits from your participation, your completion of the survey will be helpful in gaining a better understanding of the relationship between a perceived level of social support and psychological sense of community experienced by a college student who has experienced a death loss. If you decide to participate, you will be helping in to increase awareness and research support in this area, and in turn assist in the field of psychology.

Compensation: Once 130 participants have been reached, you will get a chance to win one of two \$50.00 Amazon gift cards. Upon completion of the study, you will be redirected to another webpage where you must type in your name and email address. This information is separate from the information you provide in the survey. If you win, your confidentiality will be ensured as you will get a link sent to the email you provided that will access you to your gift card.

Confidentiality: All information collected in this study is anonymous and will not be released, except as group data. Research records will be stored securely on a secure web server (Qualtrics) to then be transferred on a password-protected flash drive; only the primary researcher will have the password. Individuals responsible for research oversight will have access to the records through the primary investigator.

Your participation in the survey is **completely voluntary**. Digital questionnaires and record forms will have identification numbers, rather than names, on them. Any written results will include group findings and will NOT include individual information that would identify you. As a consequence, your confidentiality will be maintained and you will be able to complete the survey in an open and conscientious manner.

Participant Rights: Your decision to participate or not participate in this study is completely voluntary and you may decide to withdraw your consent to participate at any time. There will be no penalty for withdrawing or not participating in this study.

This study is part of a requirement for the primary researcher's completion of her Ph.D. as a doctoral student at Oklahoma State University. Your participation in this study is greatly appreciated.

If you have any questions concerning this study, please feel free to contact the primary researcher,

Rachel D.S. McNally, M.S., rachel.d.smith@okstate.edu or her advisor, Donald L. Boswell, Ph.D., at don.boswell@okstate.edu

If you have questions about your rights as a research volunteer, you may contact Dr. Shelia Kennison, IRB Chair, 219 Cordell North, Stillwater, OK 74078, (405) 744-3377 or irb@okstate.edu.

Consent: I have read and fully understand the consent form. I understand that my participation is voluntary. By clicking below, I am indicating that I freely and voluntarily agree to participate in this study and I also acknowledge that I am at least 18 years of age.

Facebook Solicitation

Hello!

My name is Rachel McNally and I am a student in the Counseling Psychology doctoral program. I am working on my dissertation that looks at the relationship between grief and the perceived level of social support and psychological sense of community within a college student population. The overall goal of this project is to increase the knowledge of those in the mental health profession working with college students who has experienced a death loss. This is important in my field, counseling psychology, because the aim of counseling is to assist clients in improving their well-being on emotional, mental, and physical levels.

Participating in this study will require about 30 minutes of your time. Your participation is completely voluntary and anonymous; you are also free to withdraw your consent and participation at any time. The records of this study will be kept private and secured. Written results will primarily be discussed as group findings.

Once 130 participants have been reached, you will get a chance to win one of two \$50.00 Amazon gift cards! Upon completion of the study, you will be redirected to another webpage where you must type in your name and email address. This information is separate from the information you provide in the survey. If you win, your confidentiality will be further be ensured as you will get a link sent to the email you provided that will access you to your gift card.

Please spread the word about this study by sharing it on your own Facebook profile and by asking your friends to do the same!

To participate in this study, you must be an undergraduate college student, over age 18, and have experienced a death loss within the past two years.

Thank you for participating!

Rachel D.S. McNally, M.S. Oklahoma State University 512-963-8572 Rachel.D.Smith@okstate.edu

Sona Solicitation

Hello!

My name is Rachel McNally and I am a student in the Counseling Psychology doctoral program. I am working on my dissertation that looks at the relationship between grief and the perceived level of social support and psychological sense of community within a college student population. The overall goal of this project is to increase the knowledge of those in the mental health profession working with college students who has experienced a death loss. This is important in my field, counseling psychology, because the aim of counseling is to assist clients in improving their well-being on emotional, mental, and physical levels.

Participating in this study will require about 30 minutes of your time. Your participation is completely voluntary and anonymous; you are also free to withdraw your consent and participation at any time. The records of this study will be kept private and secured. Written results will primarily be discussed as group findings.

As compensation for your time, you will receive .5 credits. To take the survey, you will be directed from SONA to an outside website. Once you complete the survey, you will be directed to SONA to receive your credit.

To participate in this study, you must be an undergraduate college student, over age 18, and have experienced a death loss within the past two years.

Thank you for participating!

Rachel D.S. McNally, M.S. Oklahoma State University 512-963-8572
Rachel D.Smith@okstate.edu

APPENDIX C

INSTRUMENTS

Demographic Questionnaire

Please answer the following questions by placing an "X" or requested information in the space provided.

1.	Are yo	Are you currently enrolled in a college or university?								
	a.	Yes	b.	No						
2.	What	year classification are you?								
	a.	First Year	_							
	b.	Sophomore	Sophomore							
	c.	Junior								
	d.	Senior								
3.	Do yo	u identify yourself as?								
	a.	Male	b.	Female	c. Transgendered					
4.	What	is your age?								
5.	How o	do you identify your ethnicity?								
	a.	. Latino/Hispanic								
	b.	Black/African-Amer	ican							
	c.	White/Caucasian		<u></u>						
	d.	Asian/Pacific Islande	er							
	e.	Native American								
	f.	f. Biracial/Multiracial								

g.	Other
What	was your relationship to the individual who died?
a.	Mother
b.	Father
c.	Brother
d.	Sister
e.	Grandparent
f.	Aunt/Uncle
g.	Cousin
h.	Friend
How 1	many months has it been since the death of the individual?
How o	old was the individual who died?
How	old was the individual who died?
	old was the individual who died? was the cause of death?
What	
What	was the cause of death?
What	was the cause of death? Illness
What a. b.	was the cause of death? Illness "Old Age"
	What a. b. c. d. e. f. g. h.

f. Unknown _____

The level of closeness we feel to others differs from person to person and over time. Please think about your relationship with the important person who died while answering the following questions. Using the following scale, select the number that corresponds to how much you agree with each statement.

7 /ery Strong Agree	ly	(6	5	j	Nei	-	3	2	1 Very Strongly Disagree
1.	I felt	I coul	d share	my m	ost int	imate 1	feelings v	vith this p	erson.	
	□ 7	□ 6	□ 5	□ 4	□ 3	\Box 2	□ 1			
2.	I kept	t my d	istance	emoti	onally	from t	his perso	n.		
	□ 7	□ 6	□ 5	□ 4	$\square 3$	\Box 2	□ 1			
3.	It was	s very	easy to	o talk v	vith th	is perso	on.			
			□ 5							
4.	I felt	close	to this	person						
			□ 5	-		□ 2	□ 1			
5	It was	s diffic	cult to	talk wi	th this	persor	า			
٥.			□ 5			•				
6	This	nerson	under	stood 1	ne					
o.	-	-				□ 2	□ 1			
7.	-	-	share			-	_	ghts with 1	me.	

Texas Revised Inventory of Grief

Part I: Past Behavior

Think back to the time this person died and answer all these items about your feelings and actions at that time by indicating whether each items is Completely True, Mostly True, Both True, and False, Mostly False, or Completely False as it applied to you after this person died. Check the best answer.

1.	After this person died I found it hard to get along with certain people. □ Completely true □ Mostly true □ Neutral □ Mostly false □ Completely false
2.	I found it hard to work well after this person died. □ Completely true □ Mostly true □ Neutral □ Mostly false □ Completely false
3.	After this person's death I lost interest in my family, friends, and outside activities.
	\square Completely true \square Mostly true \square Neutral \square Mostly false \square Completely false
4.	I felt a need to do things that the deceased had wanted to do. □ Completely true □ Mostly true □ Neutral □ Mostly false □ Completely false
5.	I was unusually irritable after this person died. □ Completely true □ Mostly true □ Neutral □ Mostly false □ Completely false
6.	I couldn't keep up with my normal activities for the first 3 months after this person died.
	\Box Completely true \Box Mostly true \Box Neutral \Box Mostly false \Box Completely false
7.	I was angry that the person who died left me. □ Completely true □ Mostly true □ Neutral □ Mostly false □ Completely false
8.	I found it hard to sleep after this person died. □ Completely true □ Mostly true □ Neutral □ Mostly false □ Completely false

Part II: Present Emotional Feelings

Now answer all of the following items by checking how you presently feel about this person's death. Do not look back at Part I.

1.	I still cry when I think of the person who died. □ Completely true □ Mostly true □ Neutral □ Mostly false □ Completely false
2.	I still get upset when I think about the person who died. \Box Completely true \Box Mostly true \Box Mostly false \Box Completely false
3.	I cannot accept this person's death. □ Completely true □ Mostly true □ Neutral □ Mostly false □ Completely false
4.	Sometimes I very much miss the person who died. \Box Completely true \Box Mostly true \Box Mostly false \Box Completely false
5.	Even now it's painful to recall memories of the person who died. □ Completely true □ Mostly true □ Mostly false □ Completely false
6.	I am preoccupied with thoughts (often think) about the person who died. □ Completely true □ Mostly true □ Mostly false □ Completely false
7.	I hide my tears when I think about the person who died. \Box Completely true \Box Mostly true \Box Mostly false \Box Completely false
8.	No one will ever take the place in my life of the person who died. □ Completely true □ Mostly true □ Mostly false □ Completely false
9.	I can't avoid thinking about the person who died. □ Completely true □ Mostly true □ Mostly false □ Completely false
10.	I feel it's unfair that this person died. \Box Completely true \Box Mostly true \Box Mostly false \Box Completely false
11.	Things and people around me still remind me of the person who died. □ Completely true □ Mostly true □ Neutral □ Mostly false □ Completely false
12.	I am unable to accept the death of the person who died. \Box Completely true \Box Mostly true \Box Mostly false \Box Completely false
13.	At times I still feel the need to cry for the person who died. □ Completely true □ Mostly true □ Neutral □ Mostly false □ Completely false

Collegiate Psychological Sense of Community Scale

Regarding your college/university:

1.	I really feel like I belong the strongly disagree	ong here. □ disagree	□ undecided	□ agree	□ strongly agree
2.	There is a sociable at □ strongly disagree	mosphere on ca □ disagree	ampus. □ undecided	□ agree	□ strongly agree
3.	I wish I had gone to a □ strongly disagree	nother college □ disagree		e. □ agree	□ strongly agree
4.	Students feel they can strongly disagree	n get help if the □ disagree	•	□ agree	□ strongly agree
5.	I would recommend t □ strongly disagree	his college to s	tudents in my hig undecided	sh school.	□ strongly agree
6.	My parents like this o □ strongly disagree	eollege. □ disagree	□ undecided	□ agree	□ strongly agree
7.	There is a strong feel □ strongly disagree		-	□ agree	□ strongly agree
8.	I someday plan to giv ☐ strongly disagree	e alumni contr □ disagree	ibutions to this co □ undecided	ollege. □ agree	□ strongly agree
9.	I really enjoy going to ☐ strongly disagree		□ undecided	□ agree	□ strongly agree
10.	Students here really of strongly disagree	are about what □ disagree		ollege. □ agree	□ strongly agree
11.	I feel very attached to □ strongly disagree	_	□ undecided	□ agree	□ strongly agree
12.	Campus life is very s □ strongly disagree		□ undecided	□ agree	□ strongly agree
13.	If I am/were going to □ strongly disagree		ear, I would go he □ undecided		□ strongly agree
14.	There is a real sense of strongly disagree	of community l ☐ disagree	nere. □ undecided	□ agree	□ strongly agree

Perceived Social Support – Friends

Directions: The statements which follow refer to feelings and experiences which occur to most people at one time or another in their relationships with friends. For each statement there are three possible answers: Yes, No, Don't know. Please select the answer you choose for each item.

1.	I. My friends give me the moral support I need.□ Yes □ No □ Don't know	
2.	2. Most other people are closer to their friends than ☐ Yes ☐ No ☐ Don't know	I am.
3.	3. My friends enjoy hearing about what I think. □ Yes □ No □ Don't know	
4.	4. Certain friends come to me when they have proble □ Yes □ No □ Don't know	lems or need advice.
5.	5. I rely on my friends for emotional support. □ Yes □ No □ Don't know	
6.	6. If I felt that one or more of my friends were upse myself.□ Yes □ No □ Don't know	t with me, I'd just keep it to
7.	7. I feel that I'm on the fringe in my circle of friend ☐ Yes ☐ No ☐ Don't know	S.
8.	8. There is a friend I could go to if I were just feeling about it later. □ Yes □ No □ Don't know	g down, without feeling funny
9.	9. My friends and I are very open about what we the □ Yes □ No □ Don't know	ink about things.
10.	10. My friends are sensitive to my personal needs. □ Yes □ No □ Don't know	
11.	11. My friends come to me for emotional support. □ Yes □ No □ Don't know	
12.	12. My friends are good at helping me solve problem ☐ Yes ☐ No ☐ Don't know	IS.

13.			aring relationship with a number of friends. □ Don't know
14.			good ideas about how to do things or make things from me. □ Don't know
15.			in friends, it makes me feel uncomfortable. □ Don't know
16.	-		me out for companionship. □ Don't know
17.		•	ds feel that I'm good at helping them solve problems. □ Don't know
18.	relations	hips wit	lationship with a friend that is as intimate as other people's th friends. □ Don't know
19.			ten a good idea about how to do something from a friend. □ Don't know
20.		-	ls were much different. □ Don't know

Perceived Social Support – Family

Directions: The statements which follow refer to feelings and experiences which occur to most people at one time or another in their relationships with their families. For each statement there are three possible answers: Yes, No, Don't know. Please select the answer you choose for each item.

1.	-		me the moral support I need. □ Don't know
2.			about how to do things or make things from my family. □ Don't know
3.			le are closer to their family than I am. □ Don't know
4.	that it m	akes the	in the members of my family who are closest to me, I get the idea m uncomfortable. □ Don't know
5.			vs hearing about what I think □ Don't know
6.		-	family share many of my interests □ Don't know
7.	advice.		s of my family come to me when they have problems or need □ Don't know
8.			nily for emotional support. □ Don't know
9.	feeling t	funny ab	per of my family I could go to if I were just feeling down, without out it later. □ Don't know
10.	-	•	are very open about what we think about things. □ Don't know
11.			nsitive to my personal needs. □ Don't know
12.		-	family come to me for emotional support.

13.		-	family are good at helping me solve problems. □ Don't know
14.			aring relationship with a number of members of my family. □ Don't know
15.	Member from me	-	family get good ideas about how to do things or make things
	\square Yes	□ No	□ Don't know
16.			in members of my family, it make me uncomfortable. □ Don't know
17.		-	family seek me out for companionship. □ Don't know
18.		-	amily feels that I'm good at helping them solve problems. □ Don't know
19.	people's	relation	lationship with a member of my family that is as close as other aships with family members. □ Don't know
20.			y were much different. □ Don't know

APPENDIX E

Institutional Review Board Approval

Oklahoma State University Institutional Review Board

Date:

Monday, February 17, 2014

IRB Application No

Proposal Title:

Psychological Sense of Community and Social Support Among College

Students Who Experience Grief

Reviewed and Processed as: Exempt

ED149

Status Recommended by Reviewer(s): Approved Protocol Expires: 2/16/2017

Principal Investigator(s):

Rachel McNally 549 Azar Rd Donald Boswell 406 Willard

Seneca, SC 29672

Stillwater, OK 74078

The IRB application referenced above has been approved. It is the judgment of the reviewers that the rights and welfare of individuals who may be asked to participate in this study will be respected, and that the research will be conducted in a manner consistent with the IRB requirements as outlined in section 45 CFR 46.

The final versions of any printed recruitment, consent and assent documents bearing the IRB approval stamp are attached to this letter. These are the versions that must be used during the study.

As Principal Investigator, it is your responsibility to do the following:

1.Conduct this study exactly as it has been approved. Any modifications to the research protocol must be submitted with the appropriate signatures for IRB approval. Protocol modifications requiring approval may include changes to the title, PI advisor, funding status or sponsor, subject population composition or size, recruitment, inclusion/exclusion criteria, research site, research procedures and consent/assent process or forms 2.Submit a request for continuation if the study extends beyond the approval period. This continuation must receive IRB review and approval before the research can continue.

Report any adverse events to the IRB Chair promptly. Adverse events are those which are unanticipated and impact the subjects during the course of the research; and

Notify the IRB office in writing when your research project is complete.

Please note that approved protocols are subject to monitoring by the IRB and that the IRB office has the authority to inspect research records associated with this protocol at any time. If you have questions about the IRB procedures or need any assistance from the Board, please contact Dawnett Watkins 219 Cordell North (phone: 405-744-5700, dawnett.watkins@okstate.edu).

Sincerely.

Institutional Review Board

VITA

Rachel Diane Smith McNally

Candidate for the Degree of

Doctor of Philosophy

Dissertation: PSYCHOLOGICAL SENSE OF COMMUNITY AND SOCIAL SUPPORT AMONG COLLEGE STUDENTS WHO EXPERIENCE GRIEF

Major Field: Educational Psychology, Option in Counseling Psychology

Biographical:

Education:

Completed the requirements for the Doctor of Philosophy in Educational Psychology (Option: Counseling Psychology) at Oklahoma State University, Stillwater, Oklahoma in July, 2014.

Completed the requirements for the Master of Science in Clinical Psychology at Abilene Christian University, Abilene, TX, in May, 2009.

Completed the requirements for the Bachelor of Arts in Psychology at Pepperdine University, Malibu, CA, in April, 2007.

Experience:

Predoctoral Intern, Clemson University, Clemson, SC, August 2013 – July 2014

Practicum Counselor, University of Central Oklahoma, Edmond, OK, August 2010 – May 2012

Practicum Counselor, Payne County Youth Services, Stillwater, OK, August 2009 – July 2010

Professional Memberships:

American Psychological Association; Society of Counseling Psychology, APA Division 17; Southwestern Psychological Association