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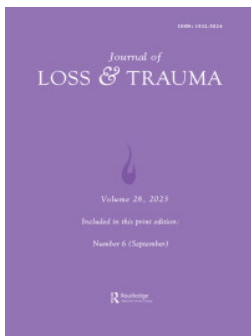
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Bereaved Military Families: Relationships and Identity

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ABSTRACT

An untimely sudden or violent death is a risk for those serving in the armed forces and can result in unique challenges for surviving military family members. This research considered how bereavement affects a range of relationships for military bereaved families in the UK and how they impact the reconstruction of a new identity in civilian life. A two-phase exploratory sequential design, involving semi-structured interviews ($n = 15$) and a mixed methods survey ($n = 264$) of military family members, was conducted. Findings revealed changing relationships with friends and family over time, reconstruction of identity, long-term impact on children, and loneliness.

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Introduction

Due to the nature of service in the armed forces, there is an increased risk of personnel being exposed to serious and often unsafe situations that may result in an untimely, sudden or violent death (Cawkill, 2009; Roberts et al., 2021). In addition, serving military personnel are young and the average age of armed forces personnel in the UK is 31 years (Harding & Dempsey, 2021). Thus, both the nature of service and average age of those serving means that untimely, traumatic (i.e., sudden, or violent) death has far reaching consequences for surviving family members including the partner or spouse, dependent children and parents, and can impact them throughout their life course. Understanding and identifying the needs of surviving bereaved military families has the potential to help raise awareness among organizations that offer assistance and better inform policy to address bereaved families' support needs and wellbeing.

Prior research suggests that sudden or violent deaths can lead to traumatic bereavement and this can have disruptive effects on family relationships as well as a long term impact on children (Cozza et al., 2017; Matthews et al., 2012). The trauma manifests as symptoms of disturbing

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and intrusive thoughts and disbelief and, because of the way death occurred, the impact is intensely painful for the bereaved compounded by trying to make sense of what happened (Pearlman et al., 2014, pp. 4–5). A study conducted by Breen and O'Connor (2011) focused on the role of family and social networks to support the bereaved following traumatic death, and highlighted that surviving family members mainly relied upon the support of family, friends, and colleagues during the initial phase of bereavement. This support provided surviving family members with the practical and emotional support they needed to navigate a path between the stressors, as outlined by Stroebe and Schut's dual model of bereavement (Breen & O'Connor, 2011; Stroebe & Schut, 1999, 2016).

Stroebe and Schut's (1999, 2016) dual model of bereavement describes how the bereaved alternate between two stressors or states: loss orientated (e.g., grief work, the breaking of bonds or ties, relocation); and restoration orientated (e.g., attending to life changes, developing new roles and identities, and forming new relationships). According to Stroebe and Schut (2016), both stressors need to be addressed to help the bereaved to develop a meaningful life without the deceased. Alongside the importance of acknowledging both stressors outlined, it is also important to note that the sudden loss of a loved one can significantly disrupt the balance of a family unit and family dynamics can either hinder or facilitate the bereavement process (Breen & O'Connor, 2011). Moreover, as highlighted by Breen and O'Connor (2011), the level of support from family and social networks, following a traumatic death, diminished over time and relationships with some family members and friends deteriorated irrevocably, impacting on the long-term support available to the bereaved spouse/significant other (Breen & O'Connor, 2011).

Prior research has also identified the uniqueness of military bereavement, not only the risk of prolonged grief for bereaved military families, but the relationship of the bereaved with the military as an institution also contributed to a positive or negative bereavement (Kristensen et al., 2012; Lester, 2019; Wehrman, 2021). Many military families live close to, or on, a military base and, following death of the service personnel, are required to relocate from the military community resulting in the loss of support networks. Research with bereaved military families in the UK illustrated that whilst many military units provided a sense of kinship and support for the bereaved, this support was not universal and many bereaved military families expressed negative emotions toward the military as an institution (Lester, 2019).

In addition to the impact of loss on relationships and social support, bereaved military families must navigate a new identity outside of the military. There is evidence to suggest that, for some bereaved spouses, their relationships with friends and family irreversibly changed particularly as they began to be identified as a military widow (McGill et al., 2022). A

recent study of military widows in the US highlighted the challenges for widows to make sense of their new identity from military wife to military widow, including adjusting to civilian life and adapting to the role of single parent, with sole responsibility for their children (Wehrman, 2021).

There is a distinct lack in evidence-based research focusing on the multi-faceted consequences of bereavement and the resultant changing relationships between surviving military families and how these changing relationships impact the reconstruction of a new identity in civilian life. Thus, the aim of this study was to begin to explore the long-term impact of death on the relationships and identity of surviving UK military family members.

Materials and methods

The study followed a two-phase exploratory sequential mixed-method design (Creswell & Creswell, 2017). Phase one involved qualitative semi-structured interviews and phase two involved a mixed-method survey. Data from phase one informed the development of phase two. Ethical approval was gained through Northumbria University's ethical approval system.

Participants for this study were recruited from across the UK using a convenience sampling strategy. Recruitment was peer-led by a member of the research team (MM) and was supported by the War Widows' Association of Great Britain, the Royal Navy and Royal Marines (RNRM) Widows' Association, the Army Widows' Association, and the Royal Air Force (RAF) Widows' Association. Participants who had lost a family member (spouse, partner, child, or parent) or whose death was attributable through service were eligible to participate in this study. Fifteen participants were recruited in phase one and 264 participants were recruited in phase two. From the 264 participants recruited in the second phase, 223 respondents provided textual data about their experiences of bereavement and provision of support and are included in this study. Participant characteristics are presented in [Table 1](#). The number of years since time of death, for participants in both phase one and phase two, spanned from two to 93 years. Most participants from both phases of the research, who reported on the nature of the death, had experienced a traumatic or sudden loss (i.e., sudden or violent death whilst on active duty, accidental death whilst on training exercise, suicide, road traffic accident, or cardiac arrest).

Phase one

The semi-structured interview in phase one was developed through two initial open-ended "pilot" interviews with military widows. This allowed the research team to develop a schedule most suitable to bereaved military families'

Table 1. Participant characteristics from phase one and phase two.

	Phase one (n)	Phase two (n)
Gender		
Female	13	211
Male	2	6
Missing data		6
Relationship to deceased		
Spouse/partner	11	199
Child	1	13
Parent	3	3
Missing data		8

experiences. A flexible, semi-structured approach was taken to allow freedom for participants to discuss their own personal experiences and what was important to them. The interviews focused on the process of casualty notification and the impact of this process on long-term family well-being.

Within phase one, the peer-researcher (MM) shared the participant information sheet with potential participants, answered any questions they had about involvement, and acted as a bridge with the research team. Following this, a face-to-face interview was scheduled, where consent was gained. Interviews were audio recorded using a Dictaphone and the participant had the opportunity to pause or end the interview at any time. Interviews lasted between 60 and 90 minutes and were transcribed verbatim. Participants were given an anonymous participant number upon transcription and all audio files were destroyed once transcribed.

Phase two

The phase two survey was developed through evidence from existing literature, expert opinion, and the initial analysis of data from phase one. The survey employed closed questions, Likert scale responses, and open questions that allowed participants to freely express their thoughts and experiences. The open questions are the focus of this study and asked participants to detail experiences of notification and bereavement. The survey was extensively pilot tested before dissemination. This pilot testing was completed in three phases:

1. Subject matter experts reviewed the survey to assess content, wording, and structure.
2. Five one-to-one interviews were conducted online with members of the military widows' community. This allowed participants to provide detailed survey feedback.
3. The survey was then piloted with 10 participants and analyzed for internal validity and floor ceiling effect.

The survey in phase two was distributed via mail to all members of the War Widows' Association, RNRM Widows' Association, Army Widows'

Association, and the RAF Widows' Association. Participant information was provided at the beginning of the survey and individuals were reminded that their participation was entirely voluntary. Once completed, all surveys were posted back to the university. No identifying information was contained in the survey. Once digitally uploaded, participants were given a unique participant number.

Data analysis

All data was uploaded in NVivo 12 (QSR International) software and analyzed separately, across phases, using reflexive, inductive Thematic Analysis (Braun & Clarke, 2006; Braun & Clarke, 2014, 2021). The steps of Braun and Clarke's Thematic Analysis were followed with the research team immersing themselves within the transcripts before generating initial codes and subsequent themes (Braun & Clarke, 2006). Themes were defined and named before producing a narrative, using participant quotes to demonstrate specific points of interpretation and prevalence of themes.

Findings from both phases were then combined to triangulate findings and enhance the analysis and interpretation of the findings. Codes relating to relationships and identity from phase one and phase two were merged and themes were generated. Seven themes were generated from merging the codes from phase one (participant interviews) and phase two (open survey responses): Family dynamics; impact on children; changing friendships; "military family"; relationship with faith; loneliness; and identity reconstruction (Table 2).

Results

The first six themes that were identified from participant interviews, *family dynamics*, *changing friendships*, *impact on children*, *"military family"*, *relationship with faith*, and *loneliness*, fall under the category of relationships. The seventh theme, *identity reconstruction*, is a category of its own. Quotes are identified as being from either phase one interviews (Phase I) or phase two survey (Phase II) throughout.

Table 2. Development of themes from phase one and phase two.

Phase one	Phase two	Emergent theme
Family dynamics/issues	Relationships with friends and family	Family dynamics
Changing friendships	Relationships with friends and family	Changing friendships
Long term impact on children/notifying children	Children	Impact on children
Cultural context	Relationship with military	"Military family"
Relationship with padre & religion/Padre	Relationship with faith	Relationship with faith
Loneliness	Loneliness	Loneliness
Widow identity/Role of mother	Identity	Identity reconstruction

Family dynamics

Following notification of the death, participants described the invaluable support they received from their family, and the importance of this support, particularly during the early stages of bereavement:

I was in dreadful suffering [my] family had to take responsibility. Immediate family close to me—who carried me through the dark days that followed. (Participant: Phase II, ID 0060)

Whilst participants expressed the importance of family support, some recalled that there were limitations with this type of support as family members struggled to know what to say, leaving them feeling ashamed and isolated.

I always felt that I was definitely an embarrassment, even within my own family because they don't know what to say to you. (Participant: Phase I, ID P003)

Moreover, some partners and spouses reported that the impact of their partner's death had a detrimental impact on relationships with family members, in particular their deceased partner's family. Whilst participants described how they tried to maintain a relationship with the deceased's family, for some, this was increasingly challenging:

I mean after [my spouse] was killed, I insisted the children see them, their grandparents. And then when they were old enough and able to make up their own minds, it was up to them whether they saw them or not. And I think the decision was made when the grandfather didn't even invite them in one Christmas when they went down to give Christmas presents. And it was just sort of... well what's the point? (Participant: Phase I, ID P001)

Changing friendships

Respondents reported relying upon friends, including military friends, for support, particularly in the early stages of bereavement. However, some reflected that they may have relied too heavily on friends and family for support, as a result of a lack of counseling or other available support networks.

I feel I relied too heavily on my friends. It was a big ask of them afterwards for around one to two years. Someone to call to help you pick up the pieces would have been useful. (Participant: Phase II ID 1557)

However, some participants reported that whilst friends initially offered help, they were left disappointed when they did not follow through with actions.

I had left work and had a baby so our circle of friends had changed and there were times I felt a social pariah. It was a year after my husband's death that I realized that all the people who had offered to do help and do things weren't going to help that I

realized that if I wanted anything done I'd have to do it myself! (Participant: Phase II, ID 0641)

While many widows relied upon, and benefited from, the support of their friends, some participants recognized that relationships with their friends began to change and felt that they were treated differently now that they were a widow, particularly among military friends and acquaintances. Some participants described how their friends did not know how to react or support them and began to avoid them. Respondents described how they had previously socialized as a couple, and with other couples, and recalled that since becoming a widow, their friendships changed.

It's amazing just how many people just don't ever contact you again and people that you considered friends. (Participant: Phase I, ID P006)

Bereaved widows have sought and developed new friendships. For some they have achieved this through peer support groups and developed friendships with other bereaved military families. However, some widows reflected on the challenge of forming new friendships.

The initial impact was one of devastation but how this would affect me in the long term could not have been envisaged at that stage. I still find it difficult to connect with people. I made no new best friends, only acquaintances. I know a lot of people, but I don't really "know" them. I tend to keep myself to myself. I don't open up easily. (Participant: Phase II, ID1083)

Whilst many participants in this study were widows, other bereaved family members, such as parents, reflected on support and friendships during early stages of bereavement:

I received most of my support from my family and friends and a military death mothers group. At first the group was okay but I soon left as it seemed a lot were in competition with each other, as in their child's death was worse or more important than the others etc. which I found unbelievable. We had all lost our children! (Participant: Phase II, ID1399)

Impact on children

Widows reflected on the difficulty of notifying their children of their father's death. In particular, mothers of young children struggled to explain that their father was not coming home. For some participants, this recollection was still vivid:

At that point I wanted to be with my children, the pain of being told my husband had been killed was bad enough, but to tell two very young children that their beloved daddy wouldn't be coming home was so much worse. Neither of them had experienced the death of a family member. The elder, into Transformers at that time, couldn't believe that his daddy couldn't be mended. The younger, was into care bears, and well, they had magic powers to fix things. (Participant: Phase II, ID 0135)

In order to try and protect their child, one mother described how she tried to hide her grief and pain:

I wondered if I didn't grieve outwardly long enough, not wanting to share that with her in case it caused more upset. I felt I needed to maintain normality for her so hid/ignored grief. (Participant: Phase II, ID 1132)

With the benefit of time and reflection, some participants regretted not providing more support for their children to help them with their bereavement:

In retrospect my children's lives turned upside down and I wish that I had spent more time with them, to help them grieve (Participant: Phase II, ID 1145).

The impact of the loss and experiences varied among families. Whilst some widows reported that their children coped well with the loss, most participants reported that their children had suffered long-term mental health issues (e.g., anxiety, depression) which continued into adulthood, and were exacerbated by a lack of services and support:

The long-term impact and damage to the children of families such as ours cannot be understated—in addition to the normal trauma experienced by bereaved children such as separation anxiety, depression, anger etc., they are also left to feel ashamed. Despite numerous attempts to find help and support for my children, they are still suffering enormously and one self-harming. (Participant: Phase II, ID1124)

The loss of a parent during childhood is profound. Widows reflected on the difficulty faced by their children growing up without a father, particularly when they were unable to share and celebrate important milestones throughout their life course (e.g., passing exams, getting married). These milestones were a constant reminder of the significance of their loss. One respondent highlighted the loss of growing up without a father:

I feel deprived of not having my dad, and all my sisters do (Participant: Phase I, ID P004).

“Military family”

Some respondents have received ongoing support from their military friends and units. The special relationships they had forged with military friends continue to provide ongoing support and comfort.

The military friends are different. Yeah. Completely different. Any... anyone of them if I found myself homeless tomorrow, I know there's a million people I could phone. (Participant: Phase I, ID P002)

The whole of my husband's squadron were amazing after the crash and couldn't have been more supportive. He has been in the Navy prior to the RAF and his friends for the Navy were brilliant too. The [name of association] in particular have been amazing and invite me to their social events and reunions. It was important to

me to feel included for as long as I wanted to be and I have to say that was the case. (Participant: Phase II, P009)

Nevertheless, many participants felt abandoned by their military family, particularly following the funeral, and experienced a further “loss” of no longer being part of a military family. Participants reflected that other military families began to distance themselves as they did not want to be reminded of what could happen to their families:

Nobody really spoke to me. I didn’t get involved with anything because I could feel... and it was understandable because nobody wants to think that maybe their husband won’t come home. (Participant: Phase I, ID P006)

The findings illustrate that both widows and children felt abandoned by the “military family”:

However, the extended support from the military has been limited. Colleagues did not contact and very soon I and my children received very little contact. This affected my children a great deal. They felt a “loss” of the service more than I expected. Nine years later they both still suffer from mental health issues following their father’s death. (Participant: Phase II, ID 1170).

Relationship with faith

Several participants reflected on the importance of their faith in providing support and comfort during bereavement and helping them to make sense of their loss:

My Christian faith was a big support. Days were hard but I felt great comfort through the Holy Spirit the comforter, and still do (Participant: Phase II, ID0088).

Many participants recalled that a padre was either present at the time of notification or offered support to the family in the early stages of bereavement. Some respondents reflected that they found the padre a source of comfort even if they were not religious. Whereas other participants viewed the padre as an unwelcome visitor who offered little support:

I think the [name of town] padre probably came round at some point to introduce himself, but I have never really been a religious person, so for me that didn’t really help, I don’t think. (Participant: Phase I, ID P012)

Loneliness

The theme of loneliness or feeling alone described participants’ experiences at the time they were notified of their partner’s death, in the immediate weeks and months of bereavement, as well as the longer term and in the years following death of their partner. This theme specifically relates to bereaved partners and widows. Many respondents recalled feeling alone at

the time of notification. Whilst a Notifying Officer, and in some cases a padre, were present to convey the news, in many cases there were no other family or friends present, and participants described how they were left alone, in shock, and lacked support in the immediate aftermath of notification:

My daughter, mother and father and sister all lived nearby, in a small town in 1983, possibly some arrangement could have been made that I didn't receive such devastating news alone. My husband served in the Royal Navy away from home for long periods and I'd learned to be stoical which was cemented in the six hours spent alone after being given the news of his death, until I was able to go to my daughter. The barriers were up and have never come down. (Participant: Phase II, ID0176)

Participants described their ongoing feelings of loneliness extending passed this notification period, despite the support offered by family and friends. Moreover, participants acknowledged the limit of support that family and friends could provide, and described loneliness as an inevitable outcome of loss and bereavement:

No one can really change or help with the loneliness or facing the reality of the situation. (Participant: Phase II, ID1132)

I appreciate that family in particular tried to help and did but I felt very emotionally isolated without feeling able to speak to people about how I felt, or perhaps people not asking me the right question. (Participant: Phase II, ID0641)

In addition, participants recalled that feelings of loneliness emerged during their life course and particularly during significant life events:

The children's achievements throughout, sometimes cause upset, e.g. exam results, weddings, the grandchildren, that is where one misses a partner, to share with. (Participant: Phase II, ID 0630)

The feelings of loneliness encompassed both emotional loss as well as having to address challenges and make decisions alone. Respondents reflected that peer support groups have provided much needed long-term support and helped to mitigate feelings of isolation and loneliness:

RAF widows not formed until four years later. This was a revelation as stopped feeling so alone then as I met women in similar situation and have made lifelong friends. (Participant: Phase I, ID1167)

Many widows described widowhood as lonely, and over time, chose to remarry and create a life with a new partner. Respondents described how their second partner had helped them to rebuild their life. However, they reflect that developing new relationships has not diminished their love or memories for their first partner.

I have to say I remarried some 40 years later and I had a very happy married life with my second husband but it doesn't stop the memories of years gone by and what I and my daughter missed and her life growing up without her father. (Participant: Phase II, ID0171)

Identity reconstruction

This theme of identity reconstruction relates to the experiences of widows. That is not to say that bereaved children or parents do not face the issue of constructing a new identity when faced with the loss of a parent or child, but these participants did not mention identity reconstruction in their responses. Widows described the challenge of changing and reconstructing their identity from being married to a service person to becoming a military widow. For the majority of widows in this study, the death of their partner or spouse occurred at an early stage of married life, and they experienced an immediate change in status to that of a single mother, primary carer of their children and, for some, returning to work to support their family.

After my husband's death, as a "stay at home mum," I realized that my pension was not going to provide enough income to provide for my family. I decided that I would go to college and learn a trade, to enable me to get a job. I went to college for 3 years, only 6 months after my husband's death to qualify as a beauty therapist. My children were small and our whole lives had changed, particularly my son, who often had to go to nursery until I had finished at college. (Participant: Phase II, ID1145)

A challenge for those serving in the armed forces and their family members is the transition from military life to civilian life. In the UK there exists policies and programmes to support military families with this transition. Yet, respondents reflected that there was a lack of adequate support from the military institution to assist bereaved family members with the transition to civilian life.

When you marry a career serving officer, to make a success of your marriage and enjoy your future together it becomes your way of life and you are under the big umbrella of the Royal Air Force family. When you are widowed there should be support for you as part of the family, helping with "a shoulder to cry on," future accommodation and social needs until everything is sorted out. Moving into civvy street is frightening enough when your husband leaves the services and doing it on your own with your children is daunting! (Participant: Phase II, ID0418)

Additionally, respondents described how supporting other grieving family members prevented them from moving on and rebuilding their lives.

I am hoping that she is eventually, after 11 years managing to move on, because it takes a huge amount of me to cope with her [deceased's mother] and the children. (Participant: Phase I, P006)

Discussion

The narratives from phase one and the textual data collected in phase two provided insight into the "lived experience" (Clandinin, 2006) of bereaved military families, from the initial "aftermath" of the notification of death,

or as is often described as the “knock on the door,” to the long term impact of death on the relationships and identity of surviving family members. Participants’ experiences of bereavement in the current study spanned from two to 93 years following notification of the death of a loved one. Thus, studying these narratives and the textual data aids provided an understanding of participants’ relationships and identity reconstruction over time, and provided an understanding of grief at different stages of the life course. Specifically, the data from this study generated key themes around changing relationships and resultant loneliness, the impact on children, and change in identity for bereaved partners and spouses. These findings offer the potential to construct meaningful understanding, leading to solutions and comprehensive recommendations.

This study supported existing research on family and social networks supporting bereaved following traumatic death (Breen & O’Connor, 2011) and added several new, notable findings to the existing empirical base on experiences of military bereaved. Social relationships and a change of identity from a “married” status to “widowhood,” both at an early and later stage of bereavement, revealed a shift in dynamic of friends and friendship groups. Family and friends were described by some participants as sensitive to the needs of the bereaved during the early stages of grief and this support was invaluable but, for some, felt isolated or embarrassed to discuss their emotions and, as time passed, the support was less effective or fulfilling and increasingly challenging. Expressions of grief are influenced by social and cultural history, and it is important to consider these findings within the social context (Jalland, 2013). For most of the 20th century, mourners in England were encouraged to be stoical and grieve privately and in silence, particularly families who had lost loved ones in World War I and World War II, and widows received little attention or community support (Jalland, 2013). In the 1960s and 1970s bereavement organizations were established to support widows, and whilst expressions of grief became more common among educated, middle class people, traditional methods of mourning continued for working class families (Jalland, 2013). Thus, the experiences of widows in this study and support from friends and family, particularly those who experienced bereavement during the middle of last century, reflect the social context and societal norms.

It was clear that combat-related deaths, or deaths that occur in the context of military life, present unique challenges for the bereaved. Surviving family members who feel less connected to the military, and who live in civilian communities, may not have the same access to healthcare providers, and civilian community organizations may not have the same level of understanding of the armed forces culture (Cozza et al., 2017). This can be problematic in relation to access to peer-support and to military

community resources more generally. Support from family and friends following the “knock on the door” was vital to the participants ability to cope. In any crisis, to have someone who provides comfort and support to work through the changing and confusing emotions is undoubtedly a valuable resource (Selman et al., 2020). In the immediate aftermath of the “knock on the door,” the network of support offered by the Ministry of Defence, including the Visiting Officer, eased the responsibility of planning the funeral and in turn, this support alleviated some of the tasks of day-to-day life that can become overwhelming (Neria & Litz, 2004). Whilst some bereaved families maintained a connection and relationship with the wider “military family,” many bereaved family members described feeling abandoned following the “knock on the door” notification or funeral and left to adjust to civilian life alone. The role of Visiting Officer is in addition to the individual’s day job in the armed forces, and the individual receives limited training to conduct this role (Cawkill, 2009). The findings lend support for a more professional role of Visiting Officer, with more comprehensive knowledge of bereavement organizations and support networks available for bereaved families, and available to offer practical and emotional support to bereaved family members beyond the initial few months following the death of a service personnel.

The loss of a partner or significant other can leave those who are bereaved feeling lonely and socially isolated and this is when participants felt that support was essential. It was evident from this study that individuals experienced both emotional and social loneliness (Weiss, 1973). Emotional loneliness refers to the absence of a meaningful relationship with a loved one, whereas social loneliness is the lack of a wider social network (Campaign to End Loneliness, 2020). It is imperative that differences in experiences of loneliness are considered when providing welfare and social support to bereaved family members to ensure best practice is being met. Close family members and children played an important role as the bereaved struggled to cope with the stress of the loss of a loved one, and experiences of social loneliness fluctuated over time.

It is evident that the needs of children, in terms of emotional and psychological support, also need to be addressed. There was deep rooted concern that children may not have adequate long-term support and often were not consulted immediately following the “knock on the door.” Although it is doubtful that all bereaved children will develop significant, long-term mental ill health following bereavement the loss is, nonetheless, distressing and can lead to anxiety, depression and post-traumatic stress symptoms (Cozza et al., 2017). The death of a parent, in particular, may lead to disruptions in a child’s care because the grief of the surviving adult caregiver may make it more difficult to attend to the child’s needs

(Ellis et al., 2013). The findings suggest a need for a more joined up approach in providing access to support for dependent children, and for this support to be available to children throughout their life course.

The risk of poor grief outcomes and the impact on health and well-being of bereaved families extends to coping capacity and adapting to the loss over time (Cozza et al., 2017). Adaptation to stressful events is thought to be dependent upon the available “resources” to tackle the demands on the family (McCubbin & Patterson, 1983). More specifically, “it is the perception of the event as mediated by internal and external contexts that determines whether the family will cope or fall into crisis” (Boss, 1987, p. 270). Findings highlighted the need to consider the impact of adjustment and changing relationships and understand the mechanisms and resources needed to improve outcomes. Psychological and relationship aspect of social isolation and loneliness were caused by both emotional isolation and a lack of social integration. An essential process in the adjustment to loss is the development of a new self-concept (widowhood) that may or may not be improved by access to supportive friendships as protection against loneliness (Van Baarsen, 2002).

Based on this understanding, we know that family ties are significant. The change in identity following the loss of a spouse can impact on communication, and connections with friends and extended family members change. For many participants support was initially offered but as their identity as a “widow” solidified, issues arose in how they were treated by friends, leading to avoidance. Research has indicated that the bereaved themselves often believe their continuing distress is a sign of personal inadequacy (Lehman et al., 1987). Additionally, participants described the challenge of forming new friendships. The role of the military widows’ associations helped to support some individual widows and their children in this study, although not all participants felt an affinity to this type of peer support. Yet, avoiding situations that require a change in identity like this can result in a reluctance to affirm the new and unwelcome characteristics associated with the concept of widowhood, particularly with regard to social status (life transition from a couple to a single person) The avoidance may include selective interaction to avoid those which are likely to disconfirm them, such as membership of a new group or association (Burke, 2006). Thus, there exists a need for a more comprehensive program of support and social networks for all family members and further research is required to identify how best to support families.

It is important to consider the strengths and limitations of the current study. Participants were recruited via networks of military widows’ associations and thus, membership was disproportionate to the number of bereaved. Further consideration needs to be given to potential participants

who may be “hard to reach” or “seldom heard” to take part in research as part of the wider bereaved military community, particularly family members who have not sought support from war widows’ associations. Moreover, as a result of the sampling strategy, the majority of participants were widows (spouses or partners of the deceased), and future work would benefit from exploring the views and experiences of bereaved children and parents of deceased service personnel, particularly in relation to identity reconstruction.

Nevertheless, in the field of “complex bereavement” studies, our research demonstrates the impact of traumatic loss on the bereaved and the resources that may be needed to support families (as opposed to individuals) both in the short-term and long-term. Bereaved military families navigate significant changes, including change in their identity as well as transition to civilian life and change in relationships. The resultant loneliness for military widows and the long-term impact on children is evident in these findings which add empirical significance to the field of military studies and highlight the difficulties the bereaved experience with adjusting to changing identity and the impact this has on relationships. The narratives in the current study are based on lived experience and it is hoped that the findings can be applied in training of practitioners in health and social care settings and bereavement counselors to better inform practice and improve policy.

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Disclosure statement

No potential conflict of interest was reported by the author(s).

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Data availability statement

Due to the nature of this research, participants of this study did not agree for their data to be shared publicly, so supporting data is not available.

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