

**DOES AMBIGUOUS LOSS APPLY TO THE NORMAL LIFE
CYCLE TRANSITIONS IN THE MOTHER AND ADULT/SON RELATIONSHIP**

by
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A Research Paper

**Submitted in Partial Fulfillment of the
Requirements for the
Masters of Science Degree
With a Major in**

Marriage and Family Therapy

Approved: 2 Semester Credits

Investigation Advisor

**The Graduate College
University of Wisconsin- Stout
May 2001**

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ABSTRACT

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<u>Ambiguous Loss and the Mother/Adult Son Relationship</u>		
<u>During Life Cycle Transitions</u>		
(Title)		
Marriage and Family Therapy	John Williams	May, 2000
(Graduate Major)	(Research Advisor)	(Month/Year)
		60
		(Pages)
<u>American Psychological Association Psychological Manual</u>		
(Names of Style Manual Used in this Study)		

This qualitative study examines ambiguous loss within the mother and adult son relationship and the impact of such losses when they are not acknowledged and processed. Beginning with an overview of existing research that primarily focuses on loss in relation to death and the grieving/mourning process, the report then explores the concept of ambiguous loss and its subsequent impact on “normal” changes and transitions that occur within a mother and adult son relationship. This study is not intended to be comprehensive, but rather, to provide an adequate foundation for this review.

A total of 10 subjects participated in the study, all of which are mothers of adult son(s). All subjects completed the Ambiguous Loss and Mother/Adult Son Relationship Questionnaire; five participants completed in-person interviews in order to clarify their written responses. The data suggests that ambiguous loss exists in all participants and furthermore, that life cycle transitions have a strong impact on the development of understanding for mothers; for themselves as individuals, as well as on the evolving

relationships they have with their adult sons. Finally, data revealed that most participants had difficulty identifying what losses occurred and furthermore, did not know where to go to get assistance with issues.

ACKNOWLEDGEMENTS

I would like to thank a number of people. Without their support, I would not have found the courage to return to school in my midlife; nor the energy, focus and determination needed to sustain the effort, ultimately allowing me to “follow my bliss.”

To my wonderful, understanding and patient partner and husband who has shared the impact of his many losses in his life. In addition his journalism experience and correction of my grammar, along with asking, “What do you mean to say here?” Without his kindness, wisdom, humor, and emotional support, our family life would have been exceedingly more difficult throughout my graduate process.

To my long time friends and colleagues; Kim, Mary Jo, Kathy, and Toni, who have listened to me, nourished my spirit, given me priceless feedback and become my other family. I can never fully express what your friendship means to me.

To those mothers who chose to share their personal experiences regarding the difficult, yet learning times in their lives with their sons, I extend my deepest appreciation for your generosity of spirit and your willingness to look back at a difficult transition. We have a special connection that we are often not encouraged to speak about. I applaud you and your continued awareness of your influence on the loving connection with your children, as life cycle transitions for all of us, last a lifetime. You have given me much. I know I am not alone with the endless struggle and expectations of us to be the mother we want to be for our children.

To my professor, John Williams, a trusted mentor and thesis advisor who has freely shared his experiences concerning this topic, his wisdom, his sense of humor and patience. I’m grateful to have been able to share this precious time.

And last, but not least, to my children, Jay and Adam who, without their love and belief that I could actually graduate from college, yet alone graduate school, despite my lack of self-confidence in my past. They continued to inadvertently assist me in what paths to follow and which to avoid. Through their childhood and adult innocence and wisdom they challenge and revitalize me to look for ways to heal myself so I can be the person and mother I have always intended to be. I extend my constant love, friendship and gratefulness.

TABLE OF CONTENTS

ABSTRACT.....	2
ACKNOWLEDGMENTS.....	4
TABLE OF CONTENTS.....	5
CHAPTERS 1-5	
1. INTRODUCTION.....	7
The Purpose of This Study	
Objective of This Study	
Overview of This Study	
Definition of Terms	
2. LITERATURE REVIEW	12
A Brief Historical Perspective	
Ambivalence	
Unresolved Loss	
Life Cycle: Theories of Midlife	
3. METHODOLOGY.....	22
Qualitative Research Design	
Selection of Participants	
Survey and Interview Design	
Interview Procedures	
Overcoming Possible Bias	
Sample	

Ethics

Analysis

4. RESULTS.....29

Survey Results

Answers to Questions

5. DISCUSSION.....43

Summary

Resilience

Limitations & Future of This Research

Conclusions

BIBLIOGRAPHY.....53

APPENDICES

I: Letter to Research Participants.....57

II: Human Subjects Consent Form.....58

III: Ambiguous Loss and Mother/Adult Son Relationship
Questionnaire..... 59-60

CHAPTER 1

INTRODUCTION

The Purpose of This Study.

This qualitative study examines the existence of ambiguous loss in the adult son and mother relationship. This study will focus primarily on the mother and how and what constitutes loss in the mother/adult son life cycle transitions. All of the subjects of this study have adult son/s. The study draws from the conceptual framework of the ambiguous loss study conducted by Boss (1999). In her study the author has sought to advance the knowledge and impact of “loss” in our society.

While much research has examined death as loss, clinical literature has been mostly silent on ambiguous loss. As Boss states “... the phenomenon has always been the stuff of opera, literature, and the theater. In these genres, losses that remain vague and uncertain are embellished.” (1999, p. 5). This investigation of ambiguous loss specifically relates to the mother/adult son relationship. As we are aware, these relationships goes through processes of change, beginning early in the traditional life cycle, and continue throughout adulthood. This evolution is viewed as normal; however, the changes that occur are often not acknowledged as loss by the people involved or by society at large.

In western culture, we learn to expect answers and to place meaning on our experiences, which often carry powerful emotions. In the case of ambiguous loss, these emotions tend to be dismissed and masked. Societal definitions prescribe ways of acting,

which are often incompatible with the expectations of ambiguous loss. Therefore, these losses often go unresolved. From the psychological perspective, the problem is that some feelings are usually more accessible to an individual's consciousness than others. People who experience ambiguous loss often are filled with conflicting emotions. Therapy based on the recognition of the ambiguity frees people up to understand, cope with and move on after the loss. This study will seek to advance the knowledge and understanding of ambiguous loss by using the example of "normal" life cycle changes within the mother/adult son relationship.

The author will examine why this process may be considered an ambiguous loss, assess the impact on the mother, and explore the importance of resilience through "normal" life transitions. Questions to be explored are as follows: What is ambiguous loss? What does the process look like in the mother/adult son relationship (qualitative aspect)? Is ambiguous loss an inevitable occurrence in this relationship? How do mothers adjust to these transformations? How do mothers recognize and explain changes within this relationship with their sons? How can a clearer understanding of ambiguous loss assist us as parents and/or therapists?

Object of Study. The objective of this qualitative study is to examine if ambiguous loss may apply to our current understanding of "normal" changes within our lives. By focusing upon the Mother/adult son relationship and its "normal life cycle changes, this study may add insight into what constitutes ambiguous loss. Various aspects of loss within the context of these relationships will be explored through this with the use

of a questionnaire and structured interview. Discussion will follow concerning implications for further understanding of ambiguous loss.

Overview of This Study. Chapter One is an introduction to the thesis and provides the reader with the context, objective and purpose of this study. The introduction also provides operational definitions of terms utilized throughout the text. In Chapter Two, current literature available within the field of study is reviewed and critiqued by the author. Limitations of existing research is also outlined in this chapter. The third chapter offers the rationale for choosing a qualitative methodology and in addition, outlines in detail, the methodology utilized. The results of the study are reported in Chapter Four. Chapter five, the final chapter, attempts to summarize the study, discusses some of the limitations of the research design and results and suggests opportunities for further research. In addition, suggestions for therapeutically based applications are provided.

Two forms were utilized in the research process. A cover letter that introduces the questionnaire and basic instructions controlling the overall process (see Appendix I) and the Human Subjects Consent Form (see Appendix II). A copy of the questionnaire utilized, entitled Ambiguous loss: The mother and adult son relationship through life transitions, appears in Appendix III.

Definition of Terms. Operational definitions of terms used throughout the text are as follows:

Adult Children. Children ages 21 or over.

Affectional Bond. A long-lived tie in which the partner is important as a unique individual, interchangeable with none other, from whom inexplicable, involuntary and unnecessary separation would cause distress, and whose loss would occasion grief. It is to be distinguished from other long-term relationships in which it is the role of the other that is significant.

Ambiguous Loss. Perceiving loved ones as present when they are physically gone or perceiving them as gone when they are physically present. Elements of ambiguous loss are as follows: an inability to make sense of the situation; uncertainty over whether the loss is final or temporary; often denied the symbolic rituals of clear loss; the absurdity of the loss as being not rational or just; lastly, loss which goes on and on in relentless uncertainty.

Anxiety. Unpleasant expectations associated with the idea one will be punished for acting a certain way.

Family. Those who are thought of as intimate people, whom we can count on over time for comfort, care, nurturing, support sustenance, and emotional closeness.

Frozen Grief. Inability to reorganize the roles and rules of relationships with loved ones due to the ambiguity of the loss.

Mourning. The out-ward expression of grief.

Object Relations Theory. This term is a bridge between psychoanalysis which is primarily the study of individuals and their elemental motives (drives and need for attachment) and family therapy whose focus is a study of social relationships (old

expectations that distort current relationships). We relate to people in the present partly on the basis of expectations formed by early experiences such as: mental images of self and other, and self in relation to others, built from experience and expectation.

Unconscious remnants of those internalized objects form the core of the person, and are an open system developing and maintaining its identity through social relatedness, both present and past.

Resilience. A capacity to rebound from adversity strengthened and more resourceful. It is an active process of endurance, self-righting, and growth in response to crisis and challenge. The ability to overcome the blows of outrageous fortune that challenge our culture's conventional wisdom: that early or later; and that children from troubled or "broken" families are doomed. It is more than surviving, getting through, or escaping a harrowing ordeal; the qualities of resilience enable people to heal from painful wounds, take charge of their lives, and go on to live fully and love well (Walsh, 1998).

CHAPTER 2

LITERATURE REVIEW

Brief Historical Perspective.

It is clearly understood that numerous studies have been conducted on the topics of attachment and death. The bulk of existing research primarily focuses on separation within the context of attachment (Ainsworth, 1985, 1978; Bowlby, 1982, 1980, 1973; Carter, 1999; McGoldrick, 1983; Pollack, 1998). However, references to the mother/son relationship have been sporadic, at best. The purpose of this study is to examine whether and how ambiguous loss may apply to the mother/adult son relationship with emphasizes on the mother. As Chodorow reports, most of the existing studies were not concerned with the lives of the mothers, but only with how their children were affected (1978). Yet in reality, attachment is ineradicable between parent and child throughout the life cycle.

This author has found no empirical data that focused on the mother and adult son relationship through “normal” life cycle transitions as it relates to attachment and loss. One of this author’s professional interests in the Marriage and Family Therapy Field, are the concepts of Boss in her research on ambiguous loss. Boss’s research has invited further exploration on the general relational impact of unclear losses (1999).

When faced with “normal” changes that are experienced during life cycle transitions between the mother and adult son relationship, this author began to suspect that the influences of these changes has significant impact on mature adults that are not acknowledged personally or culturally viewed as loss. A review of the literature, which

follows, is intended to prepare the reader for the study. This study is intended to be representative rather than comprehensive.

Ambivalence. Ambivalence, as defined in Webster's New World College Dictionary (2000), is simultaneous conflicting feelings toward a person or thing, as love and hate. For generations, the concept of ambivalence has been central in psychology and psychiatry, focusing primarily on contrasting impulses in the psyche. However, sociology provides another perspective; ambivalence results from mixing the elements of cognition such as; social definitions of roles, status and emotions, which includes conditioning and learned behavior. Conflicting impulses that may exist inside the psyche are often a consequence of this uncertainty. In addition, ambivalence is often intensified by deficiencies outside the family. Therefore, the inability to resolve such ambiguous losses due to the outside situation, not caused by internal personality defects, often produces "frozen grief" resulting from uncertainty and confusion that are felt, but not recognized or acknowledged. (Boss, 1999; Chodorow, 1978; Pollack, 1999).

Few would argue that survival is at the heart of human nature, part of which includes our needs for love. Freud, who is given credit for establishing sex as biological in nature, later shifted his attention towards how aggression works in humans. He believed that aggression is a personal reaction and regarded anxiety as the ego's reaction to danger, showing itself often in response to loss of love or rejection. Anxiety, which can often be unconscious), arises when one fears punishment for acting on a particular wish. Children generally want to please their mother, yet conflicts often occur in this process and therefore produce anxiety. Harry Stack Sullivan, a psychoanalyst, developed

interpersonal theory, which emphasized the mothers' role in transmitting anxiety to her children, yet he didn't treat families.

Several scholars after Freud explored the connection between the individual, who was the only focus in early psychotherapy, to looking not only at the individual, but also at the person's family as a social system. One such scholar was Erik Erikson, who explored the sociological dimensions of ego identity along with the human struggle for individualism. Another respected work is that of psychoanalyst Murray Bowen, who is known for the theory on differentiation (autonomy from others and separation of thought from feeling) through healthy ego strength of the self from the family, assists in understanding separation and detachment. This research clarified the importance for the child and parent to think and act independently, yet maintain close family ties. The mother is generally considered the person who provides a sense of coherence and continuity and represents a high level of development (Nichols, 1998).

Klein continued the observation of the role of aggression within the developing relationship significant in object relation, namely the mother. By furthering Erikson's ego identity theory, Klein suggests that humans form impressions not only of the mother, who is commonly the infant's first significant object, but also on impressions based solely on other experiences (Nichols, 1998).

Klein, along with Jung, believed that the infant has an innate, rich fantasy life made up of love and hate. Perceptions of real objects are filtered through the distortions of an already formed inner world (Nichols, 1998; Pascal, 1992). It is a general rule in depth psychology that whatever the contents of our unconscious, whether personal or collective, we initially experience and first view them outside of ourselves in projected

form. Therefore, according to Pascal (1982), much of what we see in others is mainly deep within our own unconscious minds, which we are seldom conscious of until we finally become aware of the subtle mechanism of projection. These concepts are immensely important because they can spare unnecessary misunderstandings and hardships in our relations with others. Consequently, Pascal states that Jung believed the undifferentiated ego complex does not have the ability to distinguish between self and others, therefore projection exists. It is this author's opinion that this is often how ambivalence and therefore possible hardship occurs. Jung further contends that although the ability to make these distinctions implies psychic maturity, it is often a difficult road. It is essential to keep in mind that it is not the objects that are in the psyche, but rather the fantasies of the object. Fairbairn later adds to object relation theory, by purporting that the role of love is more important than instincts (Nichols, 1998). This argument, however, is an ongoing debate for those who question the nature/nurture discussion.

Chodorow states that the contemporary reproduction of mothering occurs through socially structured and induced psychological processes. For example, it is expected that women prepare daughters with mothering capacities and the desire to become a mother. By contrast women are expected socially to produce sons whose nurturing capacities and needs have been systematically curtailed and repressed. Yet seemingly, this puts both at odds. This prepares males for less affective family roles and participation in the impersonal extra-familial world of work and public life, which often provokes resentment. Chodorow further purports that the male development is more complicated than that of females because of the difficult shifts of identification a boy must make in order to attain his expected gender role. The process is not continuous as it is with a

daughter and furthermore, males are expected to repress their needs for love and relationships. Unfortunately, as a result, they often times are intolerant and disparaging of those who can express those needs, while at the same time attempting to deny their own needs (1978).

When discussing Jung, Pascal (1992) claims there is an archetypal genetic potential in a child, without which no “programming” could ever take place. Innate in geese and ducks, as in most animals, it is the archetypal urges that relate to a mother figure. Jung believed that a newborn child enters the world with many inherited psychological factors, including the makeup of the unconscious. Modern studies in genetics have made the same point. According to Pascal, rituals of social interactions such as mating games, methods of evaluation and perception, attitudes, and ideas and cultural assumptions are typical and eternally repeated behaviors among humans beings.

As indicated earlier by Pascal, it is generally accepted that the first person a child connects with the mother, who is the child’s central focus over the first several years of life. Because of this, the mother becomes the object of primary focus for the child and is generally held most responsible for her children. This pattern of thought occurs often with little regard to include the influence of her extended family, the social construction of ideas and genetic disposition. Historically, academic research has been lagging in this area; however, more recently is beginning to uncover shared responsibility beyond the mother’s role and how we individually have learned to respond to attachment and separation.

Pollack finds several causes for boys’ current crisis of meaning. He empathizes with mothers who are expected to push sons away and yet are still held accountable and

responsible for their sons' emotional health and behavior. Pollack's interest in the male child and his experience affecting adulthood draws attention to the son's introductions to the early and harsh pressure to disconnect from their families that occurs when boys are toddlers and again in adolescence. This author suspects that this also occurs again later when the son leaves home and/or gets married. Pascal states that boys are expected to follow the "Boy Code," which are rules and expectations that come from outdated and highly dysfunctional gender stereotypes. He draws attention to the impact of shame on boys when feeling vulnerable because they want and need support from their mothers. For example the son risks being socially labeled as too sensitive, a "mamma's boy" or "sissy," or even homosexual if they express emotion or a need for support. Pollack further states it is not until much later in a male's life that men are allowed to be so publicly loving to their mothers (1998). Throughout this occurrence, mothers are expected to follow this code and may even encourage it, without questioning neither its validity nor its affects on themselves and/or their son(s).

Unresolved Loss. In our culture most would agree that when confronted with death, emotionally healthy people are expected to mourn, move on, sooner rather than later and eventually invest in new relationships. Although the mourning process is difficult, each culture has rituals to honor the ordinary loss associated with death (Boss, 1999; Bowlby, 1973 & 1982; McGoldrick, 1983).

Just as there are differences in rituals , there are also different types of losses that one can experience. Boss discusses different types of loss, which she labels as ambiguous loss. The recognition and acknowledgment of these losses are different from the losses normally associated with death. Ambiguous losses are often complicated by

outside forces. They often lack clarity, finality and uncertainty, which make up the ambiguity of such losses. According to Boss, one of the major theoretical propositions underlying therapy is that the greater the ambiguity surrounding one's loss, the more difficult the loss is to master, therefore often resulting in depression, anxiety, and individual/family conflict (1999).

According to Boss, there are major differences between loss resulting from death and ambiguous loss. First, ambiguous losses are confusing in that people are often paralyzed and do not know how to make sense of the situation. They are unable to problem-solve because they do not know if the loss is final or temporary. A second difference between the two is that the uncertainty of the loss prevents people from adjusting to the ambiguity of the loss itself. The confusion over what is occurring within the relationship requires reorganization of the roles and rules of the relationship and often times the accompanying confusion provokes fear. Individuals may become frozen in one place, referred to as "frozen grief." If they have not closed out the person, they hang on to hope that things will return to the way they were previously. Another difference between loss from death and ambiguous loss is that the symbolic rituals that ordinarily support a clear loss are often denied in the latter. The experience of the loss and the meaning of the loss to the individual remains unverified by the community and little validation of what they are experiencing and feeling occurs. A fourth difference in these losses is that the absurdity of ambiguous loss reminds people that life is not always rational and just and consequently, those who witness it tend to withdraw from the situation rather than give support as in the case of loss from a death. Finally, ambiguous loss goes on and on, leaving those whom experience it physically and emotionally exhausted from the

relentless uncertainty. Perceiving loved ones as present when they are physically gone, or perceiving them as gone when they are physically present, can make people feel helpless and therefore, also more prone to depression, anxiety, and relationship conflicts. The result is the same when one is emotionally present yet physically gone or the reverse, emotionally gone but physically present (Boss, 1999).

Throughout life we are affected by our life experiences including economic status, family, culture and sub-cultures and our social history. The life cycle stages greatly influence how we manage life. It is understood there is wide variance within these parts of our past and how they affect us. Research on life cycle alerts and guides us through what we may suspect has occurred or what may be occurring in our lives (Carter & McGoldrick, 1999).

Bowman (1996) gives examples of ambiguous loss and states that the psychosocial losses such as: divorce, developing a chronic illness, shattered dreams, relationship endings, systemic losses when changes in the systems affect us, loss of emotionally important images of oneself, or losing the possibilities of “what might have been,” are seldom recognized by ourselves nor acknowledged.

The importance of the parent/adult child relationship is reflected in adults’ reactions to loss of the relationship. Umberson and Terling (1997) draw attention, in their study of symbolic meaning, within relationship between adult children of parents and their well being when a salient relationship is lost. They report that frequency of contact and quality of relationship may not translate directly into salience. For example, the relationship with a mother may be highly salient for an adult child’s psychological well-

being even if the child rarely or never sees the mother and receives no emotional support from her. It generally has adverse effect on adults' psychological well being and physical health. The loss of a relationship means loss of information about the self. Symbolic meanings emerge through a series of interactions with another person; in the case of parents, this occurs through a lifetime of experiences. At the same time, Umberson and Terling further report that some groups of individuals with a more difficult family history and thus, an increased likelihood of having experience a negative relationship, may interpret this loss as a relief. It is important to assess what meanings are attached to the mother and adult sons connection to assist in understanding the expectations and outcome of the relationship.

Life Cycle: Theories of Midlife. This author has not found any research that addresses the view of the mother/adult son at man's midlife stage. However, Carter and McGoldrick (1999) state that generally mothers are approximately forty years of age at the time their son becomes a young adult. In our culture a son is considered a young adult at approximately eighteen to twenty one up to thirty-five. Human development involves the accomplishment of certain physical, intellectual, social, spiritual and emotional tasks. Each person's individual life cycle intersects with the life cycle of the family at every point, causing conflicts of needs at times. Jaques (1965) states that, young adult idealism is built on the unconscious denial and manic defenses as normal processes of defense against two fundamental features of human life-the inevitableness of eventual death, and the existence of hate and destructive impulse inside each person. He continues by stating this recognition is the "quintessence of successful weathering of the mid-life crisis and the achievement of mature adulthood.

With this manuscript's focus on mother and "normal" life changes, together with what constituting the feelings of loss, it is stated that the seventh stage of the life cycle lasts approximately from ages thirty-five to fifty five. Some of the phases include: A time for last opportunity to be a hands-on, active parent, by shifting treatment towards their teenage and young adult children and helping them develop emotional competence while continuing to nurture and support them. It is also common at this stage to do a philosophical reexamination their lives and desire to reinvent themselves in their work and community. In addition, they recognize their choices, accomplishments and their limitations. By mentoring the next generation, one helps firm up and make solid all of the tasks of early adulthood (Nichols, 1998).

Chodorow states when discussing the expected mother's sense of continuity with her child that the development of an autonomous self becomes difficult for the child and leads to a mother's loss of sense of self as well (1978). At these major points in life a destabilized sense is considered normal, yet the mother is challenged with next to impossible choices that are distressing.

Flach's insight into how distress occurs offers a different way to view how stresses brought about by significant changes as an opportunity to reorganize us. Often the fear of "falling apart" keeps us from recognizing the necessary restructuring of our lives. Flach states that this process might well be nature's mandate, forcing us to forfeit obsolete perceptions and ways of viewing things in favor of new, more complex homeostasis more suited to our present and future survival (1988). Although there is some change in society's view of sharing responsibility for the child, it remains a dilemma in the twenty-first century.

CHAPTER 3

METHODOLOGY

Qualitative Research Design. According to Yin (1984), qualitative methods of research are utilized for four reasons which are as follows:

The exploratory nature of the research question: The research question is: What is the experience of the mother who is gone through the transitional life cycles with her adult son and has she personally experienced ‘ambiguous loss’ through life cycle changes as mothers? Being a ‘what’ question, it calls for exploration of the phenomenon (Polkinghorne,1995). It does not call for responses in terms of ‘how much’ or ‘how many’. Rather it seeks to qualify, describe, illustrate and reveal the phenomenon. As such, qualitative rather than quantitative methodology is called for, according to the criteria. The desire to learn the perspective of those who have experienced the phenomenon being studied: It is hoped that the rich data yielded by this study will add to the information gathered in previous studies related to these topics. This study adds to the pool of subjects who have been willing to share their experiences with ambiguous loss and mother parenting.

The lack of control that the investigator has over behavioral events within the area of study: Unlike the high degree of control over behavioral events that is the hallmark of quantitative approaches, the variables in this phenomenon could not be controlled.

Lack of prior research in this area from which to build a theory: As was evident in the review of literature, little research exists in this area of study. Qualitative, or narrative, research emphasizes theory building rather than hypothesis testing (Hammersley & Atkinson, 1983). It is a process of exploration from which a theory is developed. As such, it is important that a theory not be developed prior to the investigation. This investigation does not offer a theory nor does it seek to test a particular hypothesis. Rather, it seeks to contribute to a pool of data.

In qualitative research, reality is viewed as dynamic. It is seen as a process made up of seemingly divergent events that are interrelated. Given this, there are no simple or easily identifiable cause and effect relationships in the phenomenon being studied (Loflund & Loflund, 1984). However, qualitative methodology does presume that there will come a time when the sample size will be deemed large enough, and/or the accumulation of data in the particular field of study will be deemed substantial enough for generalization: the data being generated will become repetitive, patterns will clearly emerge, no new information, categories, or themes will be revealed (Morse, 1986). For this reason alone, it marks an important contribution to the field.

The following assumptions serve to illuminate the qualitative researcher's stance and functions: 1) to formulate research questions which involve the perspective of the participants; 2) to search for the differences in meaning among participant responses; 3) whenever possible, to utilize the exact words of the participants to describe their personal experiences rather than rely on the 'translation' of these words into numerical categories (Depner, Wethington & Ingersoll-Dayton, 1984). The process by which these functions are fulfilled is through a series of sequential steps.

Selection of Participants. The ten individuals who participated in the questionnaire range in age from forty-six to 80 years of age. Fifty percent were married, thirty percent were divorced, ten percent widowed, and ten percent partnered. There were basic criteria for selecting the participants. Firstly, they needed to have a minimum of one adult son for whom they are the biological parent. Secondly, the son had to be of adult age of twenty-one or older. Thirdly the mother had to be willing to participate in the research project through sharing her experiences with the investigator. Fourthly, when prospective clients were identified, the investigator assessed them according to the criteria.

Prospective participants were self-identified through snowball contacts. The search was advertised by word in the community by the investigator, and the investigator's friends and colleagues. Each of the identified prospective participants, or the friend of that prospective participant, received the home telephone number of the investigator. When the participant let the investigator know that they were interested in participating in the project, they were provided with the packet previously described. They were asked to review the documents and decide whether they wanted to take part in the research project.

Survey and Interview Design. This research relies on the work mentioned in the bibliography. The participants all completed the Ambiguous Loss and Mother/Adult Son Questionnaire, which was constructed by the author based on work discussed throughout this manuscript. A copy of the Questionnaire appears in Appendix 1. On the basis of their written responses, the author followed-up with an open-ended clarifying interview with a subset of the sample. The questions were made up primarily open-ended

questions. This framework creates a minimum of restraint placed on the participants, and when combined with an interview, allows for clarification of the written responses and probing for greater detail regarding the phenomenon being studied. Participants can communicate of attitudes, beliefs, values, and behavior (Gehart, Ratliff & Lyle, 2001). If skillfully facilitated by the researcher, the interview becomes a guided conversation.

While maintaining a professional stance, the researcher shares enough of herself /oneself to create a trusting, interactive environment. Together, researcher and participant share and gather data about the phenomenon, and in doing so, come to a better appreciation of it. Each prospective participant was provided with a packet which contained: a letter which introduced the questionnaire and provided the prospective respondent with some basic instructions governing the overall process (Appendix 1); a copy of the Ambiguous Loss and Mother/Adult Son Relationship Questionnaire (see Appendix 2); and a stamped, addressed envelope in which to return the consent form and survey. These documents were submitted for approvals to ensure their clarity, appropriateness, and that they met the guidelines established by the University for ethical research.

Interview Procedures. As previously noted, the investigator chose to interview a subset of the original sample of the original sample of questionnaire respondents. Since these participants had already signed the consent form and had completed the questionnaire, the purpose for the interview was explained; to further expand upon and/or clarify some of their written responses, and the issues of risk and confidentiality were verbally reviewed, the investigator spent time joining with each of these participants to

enhance their level of comfort and trust thereby enhancing the richness and depth of the data.

Each interview proceeded with the questionnaire serving only as a guide. The investigator asked probing questions, as appropriate, to elicit detailed information about the previously provided response and/or the participant's experience of mothering an adult son through transitions and ambiguous loss. The probing questions were, as far as possible, kept open ended in keeping with the nature of qualitative research described previously in this chapter. The open-ended questions were used only when it appeared that the participant needed some guidance and direction to help them continue on with the telling of their experience.

Overcoming Possible Bias. It was necessary to review the interview process with attention to possible bias introduced by the interaction of the investigator and participant. In this regard various techniques were employed such as credibility and fittingness, audibility, and conformability (Morse, 1986).

The credibility and fittingness of research procedure are said to have been addressed when the participant (the individual who supplied the data) is able to make sense of the analysis of the data. Results have a high degree of credibility if they are understandable and realistic to both the investigator and the participant who are part of the dynamic, divergent reality being investigated. In the interest of achieving credibility and fittingness, each participant was asked to review the analysis/summary of the data they had provided. Did they understand and analysis/summary? Was it a realistic and accurate reflection of their experience of the phenomenon?

Research procedure is said to be audible when it can be replicated using the description of the research. The description of this research process was submitted to other researchers who were asked to indicate the extent to which it clearly and explicitly described the research procedure.

Research procedure is confirmable when the results either confirm, or are consistent with, the finding of other researchers. When results are confirmed through the research of other investigators in the same or similar fields, they are non-idiosyncratic to the biases of the current researcher. It is with this in mind that the results were reviewed in the light of the previous published research.

Sample. The following researcher's intent to better understand a specified phenomenon demands that participants have certain characteristics. Purposive sampling requires selecting participants based on availability with specific characteristics, such as extreme cases, typical cases, maximum variation, or politically important cases. Similarly, when using criterion-based sampling, the researcher sets criteria and recruits participants who meet them. In addition, theoretical sampling requires selecting a sample (Gehart, Ratliff & Lyle, 2001).

Qualitative research is often criticized on the bases of its samples and sample size. When considering using questionnaire, interviews and analyzed-discourse studies underscores the importance of evaluating each qualitative study based on its purpose and methodology, rather than on its numbers-a critical but often forgotten distinction from quantitative research (Gehart et al., 2001).

Ethics. The confidentiality of the participants was respected and maintained throughout the research process. The investigator did not initiate contact with the prospective participants until they, or the friend of the prospective participant, requested it. All written correspondence with prospective participants was kept in a file accessible only to the investigator. The completed questionnaires did not bear any identifying information until the respondent personally signed the agreement to participate. Only the investigator knew the name and purpose of the signature. The questionnaire and other identifying data were locked in a file drawer to whom only the investigator has access. This study was conducted in accordance with the ethics guidelines provided by the University of Wisconsin-Stout.

Analysis. Analysis of qualitative data is a complex process that typically requires multiple readings of transcribed material to code and identify themes. The focus is primarily to elicit meaning from the data. This study, like other family therapy research, tends to emphasize constant – comparison and iterative process to identify themes, rather than to develop a formal theory about the phenomenon studied (Gehart et al., 2001). The questionnaire data was then compared to the existing knowledge included in the study. Bias was minimized by reading through the data collected by way of questionnaire and by supplemental clarifying interviews, as relevant. Responses were then scrutinized for common categories and themes and organized accordingly. As new themes emerged, they were identified and transcribed in the participant's own language. The total numbers of respondents who fit the categories and or who voiced identified themes were represented in percentage.

CHAPTER 4 RESULTS

Survey Results. So as to maintain significance, percentages were represented in whole numbers only. Although the numbers do not always add up to one hundred percent, they generally do. This author chose to indicate as N/A ('not applicable') when respondent indicated it as such. Finally the reader is reminded, when reviewing the results that the sample consisted of ten women.

When possible, statements similar in content and theme were paraphrased. Some questions were not answered. In addition, statements have been condensed and italicized to reflect the participants' own words. Responses are numbered so as to allow tracking of individual responses and statements. The numbers, as they appear, are not always in sequence.

1. Current age:

46-55 - 30%

56-80 - 70%

2. Education level: (Highest level completed)

Specify degree:

Some graduate college 10%; Some College 10%

Graduated with - M.A. 40%; M.S. 30%; M.S.W.10%

3. Marital Status:

Married 50%; Divorced 30%; Widowed 10%; Single 0%; Partner 10%

4. How many adult sons do you have?

1 son – 50%; 2 sons – 40%; 3 sons - 10%

5. How many daughters do you have?

1 daughter - 30%; more daughters - 50%

6. In what birth order is he/ are they?

Youngest - 40%; Middle – 10%; Eldest - 30%

2nd of 7- 10%; 3rd of 3 - 10%; 3rd of 4 – 10%; 5th of 7 - 10%

7. How old were you when he/they were born?

18-25 - 30%; 26-32 – 40%; 33-38 – 30%

8. How would you describe your relationship with your son at age 10? (Choose as many as apply/use your own words if you choose)

Close - 40%, Warm - 60%, Communicative 60%, Emotionally connected - 50%, Challenging - 20%, Bonded - 40%, Strained – 0%, Argumentative - 10%, Distant - 0%, Loving - 40%, Interested in your well being - 30%, Emotionally disconnected - 10%, Strong trust - 50%, Surface communication - 20%

9. Describe your bond with your son/s at that time. Is it different at this time? If so, how is it different?

#3 He needs me to listen about his interests, not so different now, and depends on who his love interest is in his life.

4-It's warm and caring, but he keeps me in a peripheral position versus a central part of his life.

5-My first son and I are very close and still are. We communicate at an adult level.

6-Then, we were close, but he couldn't express his feeling, he felt forgotten and was very quiet. It is still a lot the same, but he is opening up and asking questions now.

7-He was a difficult child and continues to be, he seem to want negative attention, yet he could and is often very loving, thoughtful and helpful.

8-At 10 a lot of activities began, he was given a lot of freedom and opportunities planning was done together enthusiastically and shared.

9-It was similar to being best friends-mutual interest concern. He became more self-absorbed, my purpose: To meet his needs-Less sharing of feelings.

5/6-Very/close - 20%

2/5/7/8-Improved now - 40%

1-Warm/role reversal - 10% (He's playing father and mentor-I'm grateful).

3/4/7/10-Increasingly distant emotionally - 40% (ebbs and flows)

10. At what age/s did you sense a change beginning to occur and briefly describe. What were the most obvious changes? What were less obvious?

**Age 12-20 - 30%*

1-We knew intuitively what the other was thinking. High school changes occurred as interest in females began. Hard to tell, family was going through big changes (divorce).

3-In high school when his interest in females and cars increase, it's not so different now, at 30.

5-At age 12 he became very moody, withdrawn, angry, using drugs and alcohol, which I found out the next year. It was obvious was his withdrawing. I did not know he was using.

6-In high school he withdrew, became more independent, showed his anger more, and talked even less. He felt all the attention went to his older brother.

9-The most obvious was him getting angry at when I would bring up certain subjects- Things became 'personal' to him. Less obvious was his desire not to spend time with me.

8-I would send him with his father, as I thought his father should be a role model to him too. I was mistaken. I don't think his father did much parenting.

**Age 20-30 - 60%*

1/3/4/8/9/10-Distance emotionally-he was beginning his family and establishing his own home.

**Age 25-35 - 30%*

2-Oldest son got better in 30's as he began to mature and understand my commitment, became more loving and less arguing.

1/10-My son began to move away from me when he wanted to find a serious partner. He then began to recognize and acknowledge my imperfections, which seemed difficult for him. It seemed that he began blaming his own perceived faults on me.

11. Were they're any other transitions going on at this time, which you recall, that may have contributed to this process?

1-On going changes, big family, never enough time

22/10-Maturity (30's) he was assessing other families-his understanding of single parent issues, going through school.

3-Divorce in family, his college was looming and he had little direction for himself and from others.

4-Always transitions taking place at varying degrees, other family members were experiencing difficulty and transitions.

5-We moved from a small mountain town into the city when he was in 6th grade. He got new friends, started having an attitude in school and attracted other insecure friends that used. I also had a live-in boyfriend who was a disciplinarian.

6-Older brother was having difficulty, he was using and in treatment. His sister told us a relative had molested her.

9-No –10%

12. How did you explain the changes to yourself?

1-Didn't try, we cared a lot and admired each other,

2-Not allowing my buttons to be pushed, being more unconditional

3-I didn't. My main concern was his safety...driving fast etc. Life was extremely painful then. We were all struggling to survive.

4-Changes were due to cultural (gender) expectations.

5-He was in junior high and I figured it was part of his development.

6-I realized he felt left out, I'm also a middle child, like him, I thought, if I was just a good kid, I'd be noticed, but neither of us was noticed.

10-When he was distancing, I was confused because we had a respectful and close relationship, we were able to frequently have long discussions on life growing up, dating, choices, politics, religion, family issues, etc. I guess he

believed he needed distance from me, maybe he felt too close and that was scary, maybe too dependent for a guy.

8-Husband was quiet and would walk away from dispute, also he was not open to express feelings nor conflict. Although he went to our sons activities throughout school, he served only himself. I needed to spend more time with my son.

13. Did those explanations satisfy you?

9-No, It worked from my head, not my heart. I was hurt & became snotty towards him, maybe tried to make him feel guilty.

*1-Didn't question, assumed we were ok. * I had none[questions].*

4/10-No-as a feminist, attempting to bring change to the world around me, this was another example of the role gender plays in both our lives.

5-Yes, at the time, but when I look back and realize how home life changed; I was partying and he knew it.

6-At the time, I realized it in family therapy, but didn't acknowledge it for a few years to him.

7-No, somehow I felt completely responsible for the distancing and very confused. I believed I was a better mother than he was saying, it was terrible and frightening, I thought I would lose him. He wants things orderly and likes to be in control.

14. Describe your feelings at that time and now, pertaining to your relationship with your son?

1-I'm more objective, we are resistant at showing external emotions, we read each other's minds.

2-There were times I thought he didn't like me, he had problems with my independence, i.e., travelling, moved away.

3-At that time I ached for him, but was unable to be there for him. Now I'm proud of him and keeping my feelings to "I love you." My thoughts are now to stay away from advice. These changes have occurred over 10 years and at times I would have much less contact depending on what kind of relationship he was in and how much he needed to "protect" that relationship from my advice

4-I was hurt and confused at the time, but have since recognized there were areas in our relationship that was unhealthy and enmeshed.

5-My feelings at the time were fear and frustration, He was changing and I thought having a disciplinarian in my home would help. My feelings now are

sadness knowing the hurt I cause him and determined to be a better parent and person. I also still feel guilty.

6-At the time I was unconcerned about his changes and figured it was part of what all kids go through. Now I spend more time with him, talk to him more about himself than about his siblings like I use to.

8-My husband was a slave to his work, I didn't want our son to end up without choices, like his father.

9-Hurt, sorrow, loneliness. Now more like a roller coaster of closeness, on and off, but better, it seems to begin when they suddenly insult you about something.

15. Would you consider these changes as losses? Why or Why not? On a scale of 1-10 (1 representing the best). How would you rate the effects of these transitions?

An 8-60% -2/5/7/8/9/10

5-No, our changes have helped us; I rate the effects of the transitions at a 3.

1-Partial losses, but necessary to separate. At my age I feel lonely and empty in relationship to my sons, I would like more contact with them, I don't know them as adults and they really don't know me anymore.

2/3-Yes, but now greatly improved, an 8, before. In the last 10 years, a 4 now, As he sought to disengage, if I gave him "advice" of relationship-even if I asked about the relationship.

4-Some loss but also some gain. I believe the two balanced each other.

6-No, because we get along better now- about a 3.

8-At that time I did the best I could or thought I did. When he left for the navy my opportunity came to a sudden end.

1/10-Yes, we lack the comfort of being spontaneous as we did when he was growing up and in his 20's. It seems to be more superficial now, yet I believe we both knowing how important we are to one another, it's sad for me. I hope that some day we can talk about it," now he's not able to. I think he's afraid to be too close to me, I make sure I leave the door open, and go on with my life.

16. What are the losses, if any? What are the gains, if any?

1- Before, they were in there 20's; they came to me with their stories and feeling. I miss their concern. I feel loneliness and emptiness, as I've grown older; however, I accept this and I view their behavior as normal and male. The gain of being loyal, if consistent – respect.

2- *Oldest son now looks forward to our visits-younger son very close and so supportive.*

3-*I think the losses have to do with his growing up and his needing to put distance between us. Every loss has had to do with my need to give advice. Gains have been in my own growth and his relief at not having to worry about me. The transitions have created growth in me.*

4/10-*The loss is of an easy companionship, but the gains represent independence for him and a healthier relationship for us.*

5-*The losses are my son has had a very challenging life and has felt very bad about himself. The gains are we have both worked hard to gain skills to better ourselves.*

6-*The losses are he has underlying anger, he doesn't know what to do with and is passive aggressive-very similar to his father. The gains are we spend more time together and are more open.*

9-*Loss of a relationship and loss of part of the self (i.e. role as mother) The gains Freedom to be selfish, but realized way later.*

8-*I didn't think my husband did the job of parenting, I think I should have done more talking about the future, career etc. I didn't realize he would move away so quickly.*

17. Have you found satisfactory answers for these changes? Briefly explain.

1-*Changes are normal, they needed to detach from me, they figured out that I wasn't perfect, that helped them detach.*

2-*More acceptance and appreciation of each other.*

3/10-*Hard to answer, because I think the changes have come and gone. Nothing was static and I find it fascinating that I see such cycles of bonding and not, between us. They have occurred at tiny intervals in which he or I were in distress.*

4/10-*In many ways I've found explanations, but maybe I have found rationalizations in order to find peace and less sadness, with the current relationship. I hope our relationship will open up in the future, like my daughter and I.*

5-*Yes, I learned of my co-dependency and have worked on it. My son has also looked for skills and has listened to me when I shared mine, as I listen to him.*

6-*Yes, I think I related more to him than my other children and worked harder to get closer.*

9-I'm still sad about it, but I've changed out of necessity

8-I've grieved my losses; I make it a point to talk with him alone when we can get together which is not often.

7-No, I'm not sure why his self-esteem is low, and it's difficult to share his feelings, but his dad is the same way.

18. Did you expect these changes would occur? How would you describe your reaction?

1-Yes-didn't feel we were on the wrong track and believed we were ok.

2-No, didn't expect the changes, hoped and worked hard towards more with oldest son.

8-Not so soon, I was distraught.

3/10-Never anticipated them, I knew there would be changes, but not as difficult . I have been extremely saddened by them and surprised when he calls for contact.

9-No, shocked, disappointed, hurt and sad

4-In some vague way, had seen it repeated in this culture but still, the initial separation was difficult, painful and confusing.

5-No, not until I felt different about myself and became a good role model for my son. I was surprised he has accepted me, but he moved away 8 years ago to find himself.

6-I didn't really know if he'd ever open up to me and I'm surprised he moved back to town after being away for 4 years. He said it's ok to be closer to family now.

7-He has gone to counseling, but he is still unable to express himself or find answers for himself.

19. What has assisted you in accepting the changes? What has inhibited your acceptance?

1-I assumed we had an understanding-we did an do

2-Personal growth created the changes, no inhibition.

3/10-Acceptance-maturity and development on my own part. I'm inhibited by my grief over the distance at times.

4-Seeing him grow healthier and more self-assured and making good choices in his life. Change is inhibited by just plain missing him sometimes.

5-My sons support and he had told me “mom, if it weren’t for you always being there for me, I would be dead”. No matter what went on between us I was always there for him.

6-He has assisted me in accepting us getting closer. What has inhibited me is sometimes I think he is pulling away and I feel sad and stop communicating

7-His sharing his feeling with me more, but he quits when he doesn’t get any answers. I wish he could, he may find a partner easier.

8-Nothing at first, then changing myself (trying not to care) Talking about it would help with others in some situations

9-We don’t have enough time together, and we do better on a one to one.

20. If you have daughters, how is this process of transitions different or similar with daughters? Has it been approximately the same intensity? (Less/ more etc.) Describe

1-Got three weeks...I have 5 daughters.

8-I felt a strong pulling away by my daughters when they went to college, but I had spent more time with them so I felt they were more prepared.

N/A 20% - 2/9

3-My daughter is closer. We seem to understand each other better.

4-My daughter and I were more distant in the younger years, than with[my] son, but developed an extremely close relationship now. Transitions very similar in intensity, but just [are] opposite in time. frame.

5-It’s been the same for my daughter and the intensity is about the same. She has stayed sober so she has matured quicker than my son has. She did not move away.

6-It ‘s a lot the same but I’m more confrontive with my daughter because she will communicate with me and challenge me with her truth of me and herself, it’s more intense with her, because she is more intense.

7-Much easier with my daughters, I could talk with them-with my son I had to choose my words very carefully, therefore it wasn’t as natural.

21. If you have daughters, currently how often do you talk with your daughter/s? How often do you talk with your son/s?

Daughters up to three times a week. - 80%, 1/3/4/5/6/7/8/10; Sons 1-3 times a week- 30%, 3/7/10; Sons once a month or less - 60% (1 participant stated I talk to daughter- in- law in-between) 2/1/4/5/6/8

8-My daughter in-law tried to prevent us from seeing our son, even when we drove across the country to see them. We have had the grandchildren a few times, until she [daughter-in-law] changed her mind on that.

N/A - 20% 2/9

22. Were you able to discuss these changes with your son/s? Who were you able to discuss your opinions/feeling with?

1-When I was disappointed with him, I let them know, sometimes more difficult.

7-Since the good changes have occurred, I've even recently told him how proud & fortunate I am, this has happened since I left his father.

3/10-No, only with a good friend/s.

4-Somewhat-disscussion is more likely to occur at this time than in the earlier years.

5-Yes, we have spoken a lot about it. I discuss my feeling/opinions with everyone who I am close with.

6-Yes I have, he agreed he felt left out, angry and withdrew. I was able to speak with my kids, my ex and my close friends.

8-I have tried, but little time, but he now seeks me out. My best friend moved away so I talk to my husband.

23. What did/would have assisted you during these times?

1-Friends, most women I knew at that time could not have admitted there were any difficulties.

2-Perhaps a male counterpart, as my oldest feels he[had] a bad role model for a father during his childhood and adolescents.

3/6-I think having a mothers support groups available would have helped.

8/To have had a connected family in my own growing-up years, my mother was an only child and [she] grew up in a foster home.

4-Understanding family history influences.

5-What did assist me was to get into a support group, independent and family counseling, friends who supported me. and finishing my undergraduate and master degree I learned new skills.

7-Councelling when he was young, we didn't know what to do and didn't seek help...until much later.

9-More consciousness of what was happening. Not personalizing it (i.e. why me?, why us?)

24. What do you attribute these changes to?

1/9-Growing-up and aging. I suppose it is natural, like cutting the umbilical cord, but it needs to settle in the middle eventually (ideally).

2-Each of our personal growth

3-I don't know, but I was in my own turmoil and I was unable to connect with him and be there for him.

4-I attribute much of the early initial changes to cultural influences.

5/10-Therapy and finishing my undergraduate and master degree. I learned new skills and used them.

6-Wanting to know more in my life, wanting to know my son better, and be closer to him.

7-He took a seminar on feeling/openess a year of so ago, this has helped him "open up" more.

25. What would you recommend or do differently now, if anything?

1-Perhaps more direct expression of concern and support

2-Better understanding of ADHD, increased coping skills and working more with my oldest son.

3-Nothing, the best thing I can do is to continue my own growth. He's going to do well with support.

4-I cannot go back and change the initial relationship and interactions, perhaps any changes I would do now, would have made no difference, considering cultural influences.

5/10-I always recommend therapy, support groups telling the truth to your children and always being there for them or staying connected.

6-I would recommend working on you in order to be a better parent. I have my kid's respect for trying so hard and they like me better.

7-Get help from a therapist/psychologist.

9-I would expect it and not be as hurt by it, sad maybe but not hurt.

8-Spend more time with my son.

26. Review question 8. Describe your relationship after these transitions?

1-Now-stronger appreciation of their individual personalities. We are more interested in each other.

2-More understanding, admission of love, more supportive to me, perhaps even proud of me.

3-Now it is warm, emotionally connected new level of trust. Also explorative as we are rediscovering each other as healthy adults.

5-Our relationship is the best it has ever been. Our biggest challenge now is to accept his changes of wanting to take responsibility for his actions and believe what he says.

4/6-Now we are more emotionally connected, communicate better, give more hugs, laugh together and help each other more.

9-Now it is like before sometimes, also when he is 'in the mood' to open up, I drop whatever I'm doing and listen, as I see it as a "gift" almost.

8-Communicative on some level, not enough. Emotionally connected with gaps. Bonded with distance. Trust in measured amounts. Like his father, he will often do nothing, but he does tell me that he loves me.

10-We are now experiencing a new more mature type of relationship. I'm given myself permission to let go of the expectations of myself. I hope he is learning to do the same thing so we can be less afraid of misplacing/misunderstanding one another.

27. Do you know other Mothers who have gone through this process with their son/s? What did you learn from their experiences?

1-Some mothers are in denial when they go through this process.

2-I've learned some things never change

3/10- No, only later did I learn that other mothers had similar experiences and feeling.

8-Not really, I don't share much in the community. Small towns eat people alive!

4-Yes, painful for mothers. Would be interested in knowing son's perspective.

6/7-Yes, from one of my friends who has gone through similar hurt and confusion.

9-Yes, I've learned of other loss that may come. If your son marries, someone who sees you as competition (a girl who does not become your friend) & your son may believe he has to choose between you and his wife-that's a terrible loss. My sons aren't married, but I realize that my relationship with the girl will determine my relationship with my son.

5-Yes, my son introduced me to his friend's mothers who were going through a lot, I learned patience, and humor and their support were great.

28. Did your Mother experience these changes with your brother to your knowledge?

N/A 30%, 1/3/10

2/5/7/8-No - 20% (Although, 20% reported no, these are additional answers to this question, generally the other participants stated that her brother remains very angry at their mother, it is hard for her to change and improve her [our mother] communication skills, mother had favorites).

4/6/-Yes - 30%, my brother withdrew and remains angry, he's unable to share his emotions with her and can't tell her that he loves her.

9-Absolutely, he loved her until one day it seemed like he looked at her critically and was finding fault with her until she died. Yet, she couldn't find any fault with him-she was just hurt.

29. Please describe how you feel about this topic?

1-I'm looking backward and time heals all wounds, both men can become "10" with me at times.

2-Good because things are always getting better than they were before he was in his 30's.

3-More needs to be researched! So many more questions need answers by both mothers and sons.

4-Interested. Filling out the questionnaire assisted in clarifying both the influences and the feelings involved in this relationship.

5-I like it, because it is so important. Parents need support, information and most of all to never give up on their children.

6-This is an amazing topic and it helps me to understand my kids then and now. It makes me want to sit down and talk with my son more than I do.

7-Confused-I don't know if I answered your questions, I just know that it has often been difficult with my son and at time very special. Now when he want to talk he comes to me-I have no answers to why it is so difficult, but he's a great son and realize he's not happy. I want that for him very much.

9-It is an event that occurs to most mothers and sons, yet is rarely, if ever discussed. Women should be prepared for this, so they're not so hurt.

8-Painful, but necessary

CHAPTER 5

DISCUSSION

This chapter begins by summarizing what this study set out to find as well as the findings themselves. The section on resilience is discussed in connection with to the results of the questionnaire. The limitations and future research possibilities follow. The author's conclusion ends this manuscript.

Summary. This study set out to examine, clarify and advance the understanding of ambiguous loss and how it applies to the mother/adult son relationship in life cycle transitions. This author will refer to the questionnaire answers to assist in summarizing the results of this manuscript.

- ♦ **Why may the relationship between mother and adult son during transitions be considered ambiguous loss?** 60 % of the participants agreed to experiencing some loss as it/they were defined, 10 % stated the gains and losses balanced one another, 10% didn't know for sure and 20% said no. Upon further inquiry with those who stated no, the author found they were referring to transitions/difficulties during adolescence as it pertained to substance abuse and their sons in this category were and are not married. The answers to this question were interesting in relationship to the next question, "What were the losses?" The participants seemed to take it upon themselves as needing to change themselves or do something different or learn to live with the "...loss, emptiness, and loneliness." They also stated the loss of "easy companionship," "...not as spontaneous..." The primary responses to the questions of any gains from the loss were less articulated, however, "...more freedom.....,"

“...created growth in me..., both have worked on growth and ...being loyal. The majority of the mother’s focused on the son and the relationship. They are not referring to their own perceived losses. The lack of personalizing may reflect the mothers remaining fears. This author proposes, as the literature review suggests, that our culture continues to hold mothers in the position of full responsibility. As a culture we have not yet synthesized the many factors which contribute to who we are and are becoming.

When relationship issues surface we generally continue to hold the mother solely responsible for the outcome of the relationship with her children even after they have become full-grown adults. I postulate that in the 21st century it remains very common when there are more than average difficulties within the family, the mothers to often say to themselves i.e.; “Somehow this is my fault; I didn’t do the job I’m expected to do no matter how much I tried or wanted to” They believe they have few if anyone to support them without feeling as though they have done it wrong. In addition, revealing how they feel becomes too painful and shameful.

To recognize losses within this extremely important relationship becomes, in truth, too frightening. It is especially true when the mother does not know whether the relationship will ever be mended. This may illicit the “frozen grief” that Boss discusses. The unresolved messages that we learn growing up in our culture constitutes the on going ambiguous patterns established in the mother and adult son relationships throughout the life cycle. This is reflected in questions 24 & 25. In general the mothers again believed it is themselves that needed to grow-up, mature and needed more understanding of what was happening. They stated they should

have gone to therapy, but really didn't know what to do. There was no indication that perhaps their extended family or the culture at large plays into this difficult dynamic between mothers and sons through all of the life cycles both are continuously experiencing.

- ◆ **What does this process look like?** Although most participants noted that they understand that life cycle changes are both normal and to be expected, none acknowledged their own transitions as it relates to the midlife life cycle. They reported that at age ten their relationships with their sons were well in tact. The percentages indicate the connectedness was loving and communication was satisfactory. Ten percent was given to an argumentative and emotionally disconnected relationship; twenty percent were assigned to challenging and surface communication.

In question 26 again they reported that the general consensus is there is a more mature relationship. Separation and individuation has occurred, However, in the interview with some mothers there is a sense of not being as close as they would like. This become more pronounced when comparing their number of times a week/month they speak to their daughters versus their son/s. They reported they talk with their daughter approximately 80% (where it applied) more often than their son/s.

- ◆ **How would one assess the impact on the mother?** The majority of the mothers who acknowledged the transitions, as resulting in some changes/losses reported

confusion, fear, frustration, hurt, loneliness, distance, sorrow, and missing their son. Some participants externalized the question by attributing the difficulty to stating they were “unconcerned because all kids go through that;” “we are resistant at showing external emotions;” “I thought he didn’t like me, he had problems...;” “...was hurt and confused, but since recognized areas in our relationship that were unhealthy and enmeshed.”

With further inquiry those participants stated they have daughters who they are very close to them spend time with them, at minimum approximately three times more in discussion than their sons. This may help mollify any overt changes within the relationship.

- ◆ **How do mothers recognize and explain changes within this relationship with their sons?** The mothers stated that to some greater or lesser level they have talked to their sons. The general answers indicated that the mothers had not yet intellectually recognized the possible losses they experienced and wanted to normalize the behavior of the son. One participant stated that “when the good changes occurred....or when the changes that were good....” they could discuss the changes and her feelings now. Another stated that she discussed her *sons* feelings of being angry,...being left out...” however, she didn’t state that she was able to discuss *her* feelings....” Twenty percent stated they could discuss the changes/feelings, but only much later.

Approximately seventy percent of the mothers were unable to, or attempted to, discuss their personal feelings. This is particularly understandable when she

may be feeling as though she had contributed to the “problem,” and somehow the culture at large holds her responsible for not maintaining the smooth family interactions. It is almost impossible to explain a situation to someone else that you are confused together with being emotional over. To minimize or tell ourselves we accept our son’s anger and aggression as part of his growing-up is a typical reaction and understandable, when mothers are the ones often to hold themselves or be held accountable for the turmoil that change provokes. It is also a way we protect ourselves from addressing our fears. After all, we are doing what our culture teaches us to do, “be strong, you’re the mother,...should know what to do...mother’s are responsible.” We often don’t know who to go to that will understand the paradox mothers are in. Finding those who will not judge us and hold mothers solely accountable, but hears the fears and validate pain and confusion. It is this author’s belief the mother generally has the wisdom to work towards resolving the issues.

- ◆ **How do mothers adjust to the transformation?** As stated previously, this author believes that mothers are very interested in searching and finding answers, however the emotionality is often high during those times and supportive understanding through the process would be helpful and as stated in questions 19/22/23 and 25 were wanted. The adjustments of the life cycle changes are inevitable. It is often not the transformation that is the problem, it often is the perceptions of the transformation and the lack of understanding throughout the process that confuses and complicates the changes. The outside influences who

share in the perceptions of placing responsibility of adjusting to the changes plays a significant role in the outcome of the adjustment. The flexibility of the people involved to acknowledge that change is difficult but necessary to evolve into a wiser individual and culture.

Resilience. The importance of being resilient during extremely difficult situations is possible, but is often not acknowledged. The majority of the participants expressed, confidentially, the pain, fear and hurt that these “normal” transitions within the mother/adult son relationship occurred. The mothers generally indicated that they held themselves solely responsible for any of the distancing that had occurred. When reviewing the results of this manuscript’s questionnaire, only ten percent alluded to our culture’s perceptual effects of what we expect or how we view males vs. females. Also only twenty percent alluded to the importance of the father’s assisting in the process of raising the son/s.

The ability of being resilient is beyond getting through and surviving. This culture’s conventional ideas of surviving those adversities which are thought to be, always damaging and therefore, eventually doomed. Walsh (1998) states the past American ethos is of the individual who is rugged and invulnerable and who, because of this, is seen as strong. It is this image which often confuses invulnerability with resilience. The “superkid” or super mom has often received this message and believes if he or she expresses their hurt, anger, or fears that they then are not meeting the general standard expected of our culture. This adds to the fears of not being a “good kid, or good mom.”

The process of being resilient and what it looks like, is generally within these mothers, and yet they are not often given credit as it doesn't fit the conventional understanding of being strong. The capacity to show these normal feelings during times of unexpected and unresolved situations shows openness and courage, especially when the topic is sensitive and generally not discussed. As this study's definition states, the qualities of resilience enable people to heal from the pain, take charge of their lives, and go on to live fully and love well.

Boss believes it is necessary for people in our culture to find meaning for these unresolved situations. The process of gathering reasons which begin to make the puzzle come together when the pieces seem skewed is especially challenging when we know the depth of our love for our sons is part of being resilient. Mothers grow up in the same society as the sons, we also encourage our sons to move away from us beginning at an early age. In varying degrees, we both receive that message and the paradox begins.

Limitations and Future of This Research. The limitations of this study are as follows: The sample was not cross-cultural. The need for diversity will broaden the research, yet this population is articulate. The participants were all college educated to some degree and the majority have masters degrees. This author believes she has experienced losses associated with her son's life cycle transitions. However, she believes she has made concerted effort to remain objective throughout this process by reporting what the literature and the participants conveyed.

This topic lends itself to much future research. The fact that there is little, if any, current research which addresses the connection of ambiguous loss to the mother/adult son life cycle transitions. Why is it that our culture veers away from acknowledging and

addressing the many losses we all experience? What is the view of the adult sons while experiencing life transitions in the mother and son relationship? What connections/cutoffs occur in these transitions? Why do mothers continue to assume the majority of the responsibility for the outcome of the family relationship and why is she more often than not held most responsible by her own family and by culture at large? What is it about mothers whom, despite having done their very best, remain silent in their pain, especially as it relates to their children?

The recognition of a mother's ambiguous loss within the therapeutic setting is of paramount importance. Across all psychosocial and economic relationships, changes and class differences within our society's population, this type of loss is experienced to a greater or lesser degree. The fact that it is seldom discussed and therefore not fully understood impacts the way we view the outcome of our lives.

The therapeutic implications are not limited to the following, but are offered as a beginning to the therapeutic process 1. Validating Moms feelings, especially her love. 2. Assist in her search for meaning. 3. Facilitating resolution of emotional cutoffs' where possible. 4. Assisting Mom's to leave 'cultural box' in which they may be caught in being over-functional or under-functioning in effort to compensate for the cutoffs. In essence the goal being continued relationship with enhanced understanding between both mother and son.

Conclusion. Ambiguous loss touches us at all stages of our life cycle. As this study reveals, approximately 60% of the participants acknowledge this type of loss. In addition, the same percentage occurs in previous generations as per Question # 28 suggests. Accordingly, this pattern appears to be common between mothers and sons. The

tenuous nature of the participants sharing the process with others or labeling the outcomes of losses within the relationship also may reveal ambiguity in itself. Often the fear of separation in families fosters blocked mourning processes resulting in an extreme manifestations of restraining. Freud and later Bowlby, refer to the anxiety produced by separation or loss and the affective working out of the lost object as an essential and critical factor in human development (Bowlby, 1973).

Restraining behavior often is seen as a form of denial or minimizing the fear, pain and confusion. The process of affective mourning, allows the son/family to witness intense emotional expression on the part of the parent. In part, continuing the blocked process in order to keep the comfort of existing homeostasis (the familiar patterns maintain the balance) that often perpetuates the denial and confusion. When a family member, in this case the mother, is able to acknowledge and mourn the loss and express the mourning related to the grief, the family members are free from the necessity of constantly fighting against change. Frequently as a result, the family has a greater opportunity to unite and more continuity is created.

This author recognizes the challenge when she suggests to fellow therapists to become more familiar with the concepts surrounding ambiguous loss and to practice the necessary therapeutic interventions to validate the experience while educating the client about ambiguous loss. We must recognize and have empathy for the client, who for example is having problems with their child/adult child. That client is, in essence, us. Offering safety while recognizing the lingering fears of loss which may have occurred previously or be linked to the present issues associated with loss is pertinent to therapeutic outcome. The fear of loss is normal and entrenched in us. As therapists we are

challenged to address with our clients our culture's tendency to perpetuate the misconception of what constitutes strengths within us. Our culture is us, ourselves as individuals, our families and institutions. These all have an effect on each other and work towards their maintenance of what is familiar. Although we are inclined to maintain the comfort of homeostasis, we also are challenged to evolve into healthier and happier individuals for our families and our communities.

We become stronger when we have the courage to move through the adversities rather than seek to maintain the normal perceptions. Loss felt from death, although very difficult, is discernable. A loss that is filled with uncertainty is seemingly endless. As the families and eventually culture evolve, this author's expectation is that ambiguous loss and its impact will be more easily recognized and open. Acknowledging the often devastating effects requires openness from all individuals within relationships. Generally humans have a capacity to learn resiliency just through becoming more aware of the need to share in the responsibility of raising sons, for example. By understanding and actively working towards changing the dilemma which both mother and son face, change will occur within larger system.

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APPENDIX I

LETTER TO RESEARCH PARTICIPANTS

Dear Participant,

I know your time is precious to you. So, I am especially appreciative of the fact that you have volunteered to complete the enclosed questionnaire.

Ultimately, the amount of time you spend is dependent upon: how thoughtful you are with your answers, how open you are willing to be, and how much time you are willing to devote to it. I trust you will give it the consideration you feel it deserves so we can both benefit from the process.

Before you begin, please read and sign the enclosed Human Subjects Consent Form.

There is no right or wrong answer. I am asking you to share your personal experience. Nor is there a correct way to complete this questionnaire: complete it in one sitting or over a period of several days, consult with those who are close to you or not (provided that in the end, your answers reflect *your* experience), and/or answer the questions out of sequence or in the order they are presented.

Please return the completed questionnaire, along with your signed Human Subjects Consent Form, by no later than _____. Use the stamped and addressed envelope I have provided.

Finally, regardless of the quality of the 'data' I am able to collect, my hope is that you will find some measure of meaning in this process. I greatly appreciate your participation.

Sincerely,

Carole Trehus

APPENDIX II

HUMAN SUBJECTS CONSENT FORM

I understand that my participation in this study is strictly voluntary and that I may discontinue my participation at any time, without prejudice.

I understand that the purpose of this study is to examine, clarify and advance the understanding of Ambiguous Loss as it relates to the mother/adult son relationship during life cycle transitions.

I also understand that, as a subject, I will be asked to complete the Ambiguous Loss and Mother/Adult Son Relationship Questionnaire.

I am aware that this study involves little risk to me and may help me to identify and/ or process some of my feelings, as well as examine some events, affecting changes my son and my relationship.

I understand that any information about me that is collected during this study will be held in the strictest confidence. At the conclusion of this study, all records that identify individual participant will be destroyed.

Participant's Signature: _____ Date: _____

Questions or concerns about participation in this research or subsequent complaints should be addressed first to the researcher (Carole Trehus 715-834-6109) or research advisor (Dr. John Williams, 715-232-1153, U.W. Stout) and second to Dr. Ted Knaus, Chair, U.W. Stout Institutional Review Board for the Protection of Human Subjects in Research, 11HH, U. W. Stout, Menomonie, WI 54751. Phone (715) 232-1126.

APPENDIX III

Ambiguous Loss and Mother/Adult Son Relationship Questionnaire

1. Current age: 56-80; 46-55; 56 - 70
2. Education level: (Highest level completed)

Graduated College Specify degree:

Some graduate college Some College

Graduated with: M.A. M.S. M.S.W.
3. Marital Status: Married Divorced Widowed Single Partner
4. How many adult sons do you have?
5. How many daughters do you have?
6. In what birth order is he/ are they? Youngest Middle Eldest
7. How old were you when he/they were born? 18-25; 26-32; 33-38
8. How would you describe your relationship with your son at age 10? (*Choose as many as apply/add your own words if you choose*)

Close; Warm; Communicative; Emotionally connected; Challenging; Bonded;
Strained - Argumentative; Distant; Loving; Interested in your well being;
Emotionally disconnected; Strong trust; Surface communication
9. Describe your bond with your son/s at that time. Is it different at this time? If so, how is it different?
10. At what age/s did you sense a change begin to occur and briefly describe. What were the most obvious changes? What were the less obvious.
11. Were there any other transitions going on at this time, which you recall, that may have contributed to this process?
12. How did you explain the changes to yourself?
13. Did those explanations satisfy you?
14. Describe your feelings at that time and now, pertaining to your relationship with your son?
15. Would you consider these changes as losses? Why or Why not? On a scale of 1-10 (1 representing the best). How would you rate the effects of these transitions?

16. What are the losses, if any? What are the gains, if any
17. Have you found satisfactory answers for these changes? Briefly explain.
18. Did you expect these changes would occur? How would you describe your reactions?
19. What has assisted you in accepting the changes? What has inhibited your acceptance?
20. If you have daughters, how is this process of transitions different or similar with daughters? Has it been approximately the same intensity? Describe.
21. If you have daughters, currently how often do you talk with your daughter/s? How often do you talk with your son/s?
22. Were you able to discuss these changes with your son/s? Who were you able to discuss your opinions/feeling with?
23. What did/would have assisted you during these times?
24. What do you attribute these changes to?
25. What would you recommend or do differently now, if anything?
26. Review question eight. Describe your relationship after these transitions?
27. Do you know other Mothers who have gone through this process with their son/s? What did you learn from their experiences?
28. Did your Mother experience these changes with your brother to your knowledge?
29. Please describe how you feel about this topic?

