



Articles

Negative Changes in a Couple's Relationship After a Child's Death

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Abstract

The purpose of this study was to describe negative changes in parents' relationships following the death of their child. A request to join the study was presented to members of grief associations through email and websites. Additionally, data were gathered through closed internet-groups where parents who had experienced the death of their child were logged in (e.g. in Facebook). The study participants were mothers (n = 321) and fathers (n = 36) whose child had died. The data were analysed using inductive qualitative content analysis. As negative changes in their relationship following the death of their child, parents reported the following: problems caused by failing mental health, problems due to changes in identity, increased difficulty of emotional communication, and decreased sexual intimacy. In addition, decreased sense of togetherness, behaviour that damages the relationship, everyday life straining the relationship, and emotions straining the relationship. It is concluded that a child's death brings many kinds of negative changes to the parents' relationship. The changes manifest as problems in the parents' interaction, their behaviour, and their emotional life. The results can be utilized in supporting the relationships of grieving parents, developing different kinds of support interventions, and in nursing education.

Keywords: couple's relationship, child's death, grief, qualitative study

Interpersona, 2014, Vol. 8(2), 193–209, doi:10.5964/ijpr.v8i2.166

Received: 2014-06-19. Accepted: 2014-10-22. Published (VoR): 2014-12-19.

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Introduction

Couples' relationships and family are the foundation of the welfare of our society. In addition to intimacy and stability, they signify belonging to something and being together. A couple's relationship is considered the most important, challenging and rewarding emotional relationship in adulthood. Its foundation is based on love and commitment (Lainiala, 2010; Paajanen, 2007).

The majority (80%) of the parents in Finnish families with children live in an intimate relationship (Statistics Finland, 2012). Giving birth to a child is a natural event that enriches and deepens the couple's relationship (Tulppala, 2012). A child's death, however, takes away the meaning from the parents' lives. It is experienced as an unfair event and it breaks the normal order of the cycle of life. It is more natural for a parent to die before their child (Keesee, Currier, & Neimeyer, 2008).

A child's death is considered one of the biggest stress factors in life (Wing, Burge-Callaway, Rose Clance, & Armistead, 2001) and the most difficult experience for a person and a parent (Keesee et al., 2008). The grief it

causes is the strongest and most long-lasting form of grief (Aho, Tarkka, Åstedt-Kurki, & Kaunonen, 2006; Koskela, 2011; Laakso & Paunonen-Ilmonen, 2002). The longing and grief that a parent feels towards a child can last throughout their lives (Aho et al., 2006; Dyregrov & Dyregrov, 1999; Koskela 2011). Although the length and experience of grief vary from person to person, mothers' grief is described as stronger and as more long-lasting than that of fathers (Avelin, Radestad, Saflund, Wredling, & Erlandsson, 2013; Cacciatore, DeFrain, Jones, & Jones, 2008; Lang & Gottlieb, 1993).

A child's death has a broad impact on the parents' lives and relationship (Aho et al., 2006; Koskela, 2011). There is little research on couples' relationships after a child's death, but it has been shown in grief studies that a child's death has a broad impact on the couple's relationship as well, strengthening or weakening it. The changes in the couple's relationship may be temporary or permanent (Avelin et al., 2013; Dyregrov & Gjestad, 2011). A child's death can increase intimacy between the parents and strengthen the relationship (Aho et al., 2006; Alam, Barrera, D'Agostino, Nicholas, & Schneiderman, 2012; Arnold & Gemma, 2008; Cacciatore et al., 2008; Gilmer et al., 2012; Laakso & Paunonen-Ilmonen, 2002; Titus & de Souza, 2011). Intimacy between the parents increases as a result of successful interaction (Arnold & Gemma, 2008; Cacciatore et al., 2008; Toller & Braithwaite, 2009) and receiving of social support (Alam et al., 2012; Glaser, Bucher, Moergeli, Fauchere, & Buechi, 2007; Toller & Braithwaite, 2009).

A strain on the relationship and emerging marital problems have been reported as negative changes in a couple's relationship after a child's death (Alam et al., 2012; Arnold & Gemma, 2008; Bellali & Papadatou, 2006; Gilmer et al., 2012; Glaser et al., 2007; Koskela, 2011; Rogers, Floyd, Seltzer, Greenberg, & Hong, 2008; Titus & de Souza, 2011; Toller & Braithwaite, 2009). Differences in the nature of the parents' grief experiences and increased difficulty of interaction are factors that increase conflicts in the couple's relationship (Cacciatore et al., 2008; Toller & Braithwaite, 2009). Negative changes can cause the parents to become estranged (Bellali & Papadatou, 2006; Gilmer et al., 2012; Koskela, 2011; Laakso & Paunonen-Ilmonen, 2002). Differences in the nature of the grief, one of the parents escaping to work, blaming the other parent, and a feeling of suffering are reported as reasons for estrangement (Laakso & Paunonen-Ilmonen, 2002). In addition, estrangement may lead to starting a new relationship after a child's death (Arnold & Gemma, 2008). Mothers have also experienced lack of sexual desire after a child's death (Dyregrov & Gjestad, 2011). Estrangement, infidelity and withering of sexual intimacy are the most common risk factors for divorce (Amato & Previti, 2003; Dean, Carroll, & Yang, 2007; Gigy & Kelly, 1993).

The pain caused by a child's death can destroy a parent's emotional life and increase instability of emotional life (Koskela, 2011). Additionally, parents have described increased anxiety (Vance, Boyle, Najman, & Thearle, 2002) and a feeling of loneliness (Cacciatore, 2010; Koskela, 2011). Increased anxiety also increases dissatisfaction with the couple's relationship (Vance et al., 2002). A child's death can also make interaction more difficult in the relationship and decrease communication between the parents (Arnold & Gemma, 2008; Toller & Braithwaite, 2009). Talking about the loss has been experienced as painful (Gilmer et al., 2012) and there is a desire to protect the partner by not talking about their child's death (Bellali & Papadatou, 2006). At worst, grief has estranged the partners and they have divorced or separated (Arnold & Gemma, 2008; Koskela, 2011; Rogers et al., 2008).

The purpose of this study is to describe negative changes in couples' relationships after the death of their child. The aim of the study is to gain knowledge on negative changes in relationships which can be utilized to support the relationships of grieving parents, to develop different kinds of support interventions, and in nursing education.

Methods

Study Participants

Table 1

Background characteristics of the parents

Characteristic	<i>n</i>	%
Gender		
Male	36	10
Female	321	90
Age		
≤30	72	20
31-50	234	65
> 50	51	14
Number of living children		
0	41	12
1 or more	312	88
Education		
No education/some vocational courses	39	11
Vocational education	71	20
College	72	20
University of applied sciences	89	25
Academic university	85	24
Employment		
Full time	197	55
Part time	26	7
Not employed	19	5
Retired	15	4
Sick leave	12	3
Home (housewife)	63	18
Student	19	5
Other	5	1
Religion		
Christian	285	80
Orthodox	2	1
Other Christian	4	1
No religious affiliation	66	19
Health		
Very good	49	14
Quite good	188	53
Satisfactory	98	28
Quite/very poor	21	5
Previous experience of death of a loved one		
Yes	256	73
No	96	27

321 mothers and 36 fathers participated in the study. The majority of the parents (65%) were 31–50 years old and most of them (69%) were well educated. Over a half (62%) of the parents were working and the majority (80%) were in the Evangelical Lutheran church. Additionally, the majority (88%) of parents had one or more living children (Table 1).

The majority (93%) of the parents had experienced the death of one child. Over one third (37%) of the children were stillborn and 37% had died before their first birthday. One third (30%) of the children had died in the uterus and another third (31%) had died from disease. At the time of the study, the time since the child's death was less than a year for one fourth (25%) of the parents, 1-5 years for a little less than half (42%) of the parents, and over 5 years for a third (33%) of the parents (Table 2).

Table 2

Background characteristics of the death of a child and the parents' relationship

Characteristic	<i>n</i>	%
Number of dead children		
1	331	93
> 1	26	7
Gender of the deceased child		
Male	194	55
Female	159	45
Not known	3	1
Cause of death		
Stillbirth	108	30
Disease	111	31
SIDS	30	9
Accident	28	8
Suicide	29	8
Homicide	8	2
Not known	41	12
Age of deceased child		
< 0 years	131	37
0-1 years	133	37
2-18 years	42	12
> 18 years	51	14
How long has it been since the death of the child?		
≤ 1 year	89	25
> 1-3 years	94	26
> 3-5 years	56	16
> 5-7 years	40	11
> 7	77	22
Marital status		
Married	263	74
Cohabitation	61	17
Unmarried/Single	6	2
Divorced	27	8

Characteristic	<i>n</i>	%
Years of partnership before the death of the child		
≤ 3	50	14
> 3-6 years	85	24
> 6-9 years	75	21
> 9-12 years	60	17
> 12 years	86	24
Participation in marriage/relationship counseling		
Yes	127	36
No	228	64
Would you have needed marriage/relationship counseling?		
Yes	217	61
No	137	39

The majority (91%) of the parents were in an intimate relationship, either married (74%) or cohabitation (17%). Approximately one third (36%) of the parents had received support for their relationship and over a half (61%) felt that they need support in their intimate relationship after their child's death (Table 2).

Data Collection

A request to join the study was presented to members of grief associations (KÄPY ry – association for families with deceased children, Surunauha ry – Mourning Band – association for family members of suicide victims, Huoma ry – association for family members of homicide victims) through email and websites. Additionally, data were collected through closed Internet-groups where parents who had experienced the death of their child were logged in (e.g. in Facebook). All of the study participants were identified. The participation criterion for the study was personal experience of a child's death. The cause of death, age at the time of death, or the time since the child's death were not limiting factors in the study.

The data were collected with an electronic questionnaire that contained background variables related to the couple's relationship, family and the deceased child. Additionally, the questionnaire included one open question: *What kinds of negative changes has your child's death brought to your intimate relationship?*

Data Analysis

The research data were analysed using inductive qualitative content analysis (Parahoo, 2006). The analysis began by reading through the research data several times in order to gain a holistic picture. After this, words and sentences answering the research question, "*What kinds of negative changes has your child's death brought to your intimate relationship?*" were underlined. Then these underlined words and sentences were reduced. This process provided altogether 634 reduced expressions (Table 3). The reductions were grouped into sub-categories according to their content. Sub-categories with the same content were grouped together as super-categories and named with a concept describing the content. The research question was answered with the help of the reductions and the sub-categories and super-categories (Parahoo, 2006).

Table 3

Examples of data analysis

Original sentence	Reduced theme	Subcategory	Supercategory
<ul style="list-style-type: none"> • "Lack of trust" • "Difficult to trust the partner" 	Emergence of lack of trust		
<ul style="list-style-type: none"> • "I looked for discussion company from elsewhere and that also led me to the arms of another man" • "Then my man found another woman" 	Revealed affair	Cheating on the partner	Behaviour that damages the relationship
<ul style="list-style-type: none"> • "My partner started to have affairs" • "Even infidelity at some point" • "We became estranged from each other and my man started to have affairs" • "And then divorce due to the cheating" 	Revealed infidelity		

Ethical Considerations and Reliability

The research data were gathered on the Internet through grief associations and mailing lists. Consequently the participants may have been a selected group. However, representativeness of the data is not significant whereas the meaning is the saturation of the data in qualitative research (Parahoo, 2006). All of the study participants were identified. Permissions were asked and received for the study from the grief associations and from the moderators of the discussion forums. An informed consent for participating in the study was obtained from the parents. The cover letter for the consent emphasized that participation in the study is completely voluntary and absolutely confidential. Participants were also informed that their personal information would not be public or available at any point during the study and that they have the right to withdraw from the study if they want to (Stroebe, Stroebe, & Schut, 2003). The study subject was sensitive and it may have caused emotional strain on the study participants, such as re-activation of a trauma. Participation may also have been useful for parents who have lost their child. Participation in the study gave the participants a chance to tell their story and write about their emotions (Dyregrov, 2004). It may have been a coping mechanism and it may have improved the parents' wellbeing (Aho & Kylmä, 2012). The researcher's contact information was on the study information leaflet and parents had the possibility to contact the researcher (Aho & Kylmä, 2012; Parahoo, 2006).

The study used data collection, research and evaluation methods, which were in accordance with the criteria for scientific research. In addition, the study was conducted by observing general care, accuracy and integrity (Parahoo, 2006). The reliability of the qualitative research in this study is evaluated by its reliability criteria, which are credibility, confirmability, reflexivity, and transferability (Malterud, 2001). The credibility of the research was strengthened by the discussions the researched had about the research process and results with researchers studying the same subject. The credibility of the results may be weakened by the fact that the researcher did not have the opportunity to discuss the results with the study participants due to the anonymity of the collected data. The confirmability of the results and the reliability of the analysis are strengthened by providing an example of the data analysis (Table 3), the result table of the data analysis process (Table 4), and direct quotations from the data. Reflexivity requires that the researcher is aware of his or her own starting points. The researcher did not have personal experience of a child's death but several years of experience of living in a relationship. This helped the researcher to understand the phenomenon under study, i.e. couples' relationships. The scope and richness of the research data as well as the comprehensive and detailed information about the study participants provided in the study (Table 1, 2) give readers a good basis for evaluating the transferability of the results to other similar

situations (Malterud, 2001). Additionally, it is remarkable that men's participation of the study was low, which is typical in studies (Aho, 2010). We will need additional information focusing to the data collection from men's experience. It was justified to study the subject because the study outcome was a multi-faceted description of negative changes in couples' relationships after their child's death.

Results

As negative changes in the couple's relationship after their child's death, the parents reported the following: problems caused by failing mental health, problems caused by changed identity, increased difficulty of emotional communication, decreased sexual intimacy, decreased sense of togetherness, behaviour damaging the relationship, everyday life straining the relationship, and emotions straining the relationship (Table 4).

Table 4

Negative changes in the relationship after a child's death

Subcategory	Supercategory
<ul style="list-style-type: none"> • Losing joy in life • Increased problems due to depression and falling mentally ill • Increased problems caused by self-destructiveness 	Problems caused by failing mental health
<ul style="list-style-type: none"> • Instability of emotional life • Changed self-image • Weakening self-esteem • Worldview becoming more polarized 	Problems caused by changed identity
<ul style="list-style-type: none"> • Increased difficulty of expressing emotions • Increased difficulty of talking • Increased difficulty of communication due to a gender difference • Increased differences of opinion • Problems caused by different grieving processes • Dismissing the partner's grief 	Increased difficulty of emotional communication
<ul style="list-style-type: none"> • Changing of sexual life • Increased lack of sexual desire • Sex being mechanic due to wanting a child 	Decreased sexual intimacy
<ul style="list-style-type: none"> • Losing the feeling of love • Increased difficulty of intimacy • Being less present 	Decreased sense of togetherness
<ul style="list-style-type: none"> • Emerging aggression • Emergence of a substance abuse problem • Neglecting the relationship • Escaping from the relationship • Cheating on the partner • The relationship ending 	Behaviour that damages the relationship

Subcategory	Supercategory
<ul style="list-style-type: none"> • Increased difficulty of family life • Increased difficulty of family planning • Increased difficulty of everyday life • Problems related to social support • Changing social relationships 	Everyday life straining the relationship
<ul style="list-style-type: none"> • Channelling feelings of grief to the partner • Grief symptoms having a negative effect on the relationship • Increased fears related to the partner • Increased fears related to children • Increased fear of tomorrow 	Emotions straining the relationship

Problems Caused by Failing Mental Health

Problems caused by failing mental health included the themes of *losing joy in life*, and *increasing problems in the relationship due to depression and falling mentally ill and self-destructiveness*.

As a negative change in the couple's relationship, *losing joy in life* included weakened belief in the future and in good, losing faith in life, and increased feelings of meaninglessness and hopelessness. In addition, it included decreased joy, lost interest in life, experiencing life as hard, no longer enjoying celebrations, experiencing everything nice as wrong, and an increased negative attitude.

"We both feel less joy and it affects our relationship as well..."

"We don't trust in life, life is scary... Our faith in good has become weaker; I often notice a negative attitude in myself and my partner."

Increasing problems due to depression and falling mentally ill were related to the respondent or their partner becoming depressed, increasing problems due to depression, and weakening health of the respondent or their partner and consequently the intimate relationship having become more difficult.

"My husband got severely depressed 2 years after our baby's death... Depression is a difficult illness for a relationship; it makes you even more estranged from each other."

"My own failing mental health made our relationship more difficult and drained too much energy from us both. My husband couldn't understand my constant depressed mood. We easily fell into arguments over the smallest things."

Self-destructiveness was related to emerging self-destructiveness of oneself or one's partner, the partner threatening with suicide, or the partner committing suicide.

Problems Caused by Changed Identity

Problems caused by changed identity included *instability of emotional life*, *changed self-image*, *weakened self-esteem*, and *worldview becoming more polarized*.

Instability of emotional life included an experience of emotionlessness and being traumatized. Parents experienced uncontrollable emotions, which resulted in increasing conflicts in the relationship after their child's death.

"On bad days, I'm ready to end the whole marriage; in other words, the emotions wash over me so forcefully and they're difficult to control."

Changed of self-image included losing self, finding it more difficult to be a partner due to a broken self, changing sex due to processing one's self, becoming estranged from the partner due to a changed personality, and losing a sense of womanhood.

"If you're completely broken inside, you don't have the energy to be a partner."

"My partner started to process his personality and eventually he changed his sex, so we went our separate ways."

Weakened self-esteem included an experience of worthlessness as a woman, decreased self-confidence, and increased uncertainty. *Worldview becoming more polarized* includes cultural differences becoming increasingly emphasized, religious differences becoming more extreme, and separation due to different religions.

Increased Difficulty of Emotional Communication

Increased difficulty of emotional communication included *increased difficulty of expressing emotions, of talking, of communication due to gender differences, increased differences of opinion, problems caused by different grieving processes, and dismissing the partner's grief*.

Parents experienced the theme of *increased difficulty of expressing emotions* having as withdrawing into oneself and becoming self-absorbed in grief more often. In addition, the increased difficulty of expressing emotions was also manifested in an experience of inability to share grief or talk about emotions. Experiencing an inability to speak about emotions made partners estranged from each other. *Increased difficulty of talking* was related to decreased talking and talk becoming more superficial, increased difficulty of having discussions, being afraid to talk, denying the partner from talking, or partners ceasing to talk to each other. It was also related to increased speechlessness due to protecting the partner and decreased talking due to being tired.

"..It's a kind of a need to protect him. For instance, I have a huge need to talk about what has happened, but I won't talk to my husband about it because I don't want to add to his grief."

"Don't have the courage to speak, can't open wounds... Candles are taken to the grave but we won't talk, we don't have the courage."

As a negative change, *increased difficulty of communication due to gender differences* included the woman's increased, greater need to talk and a resulting estrangement from the partner. It also included the man's increased speechlessness, resulting in conflicts and increased estrangement in the relationship after the child's death. The theme of *increased differences of opinion* in the relationship was related to increased arguments, increased differences of opinion due to tiredness, and increasingly taking out one's bad feelings on the partner.

"Soon after our child's death, arguments between us clearly increased. The arguments were very hard and destructive at the time of the greatest grief..."

Problems caused by differences in the grief processes included problems caused by the different nature of grief and dismissing the partner's grief. Parents experienced problems caused by differences in their grief in the form of bad mood, lack of understanding, and increased differences of opinion. *Dismissing the partner's grief* included denial and dismissal of the partner's grief, denying the partner from crying and wondering about it, as well as denying the partner from seeking help.

"At home you couldn't cry at any time or talk about the deceased child. On the morning of the funeral, he said that after today we have to forget our dead child..."

Decreased Sexual Intimacy

Decreased sexual intimacy included *changing sexual life*, *increased lack of sexual desire*, and *sex being mechanic due to wanting a child*.

Changing sexual life was related to decreasing or ending of sexual activity, which caused anxiety and differences of opinion in the relationship. *Decreased sexual desire* was related to decreased passion, lack of interest in sex, and women losing their sexuality. It was also related to experiencing touch as intolerable or partners no longer touching each other.

"Lack of desire to have sex, even disgust towards it. "

"My own sexuality was lost; I'm no longer a woman but the mother of a deceased child."

Sex being mechanic due to wanting a child included sex life becoming forced due to a wish to get pregnant, forcing the partner to have sex, and the wish to become pregnant becoming an obsession.

"After the death of our child, I became obsessed with having more children. On some days, I virtually forced him to make love..."

Decreased Sense of Togetherness

Decreased sense of togetherness included *losing the feeling of love*, *increased difficulty of intimacy*, and *being less present*.

Parents described the theme of *losing the feeling of love* as their love being tested and as the end of friendship and love.

"Everything ended. Love, friendship, warmth, intimacy..."

As a negative change, the theme of *increased difficulty of intimacy* included the experience of approaching the partner and feeling intimate having become more difficult. Parents felt that intimacy had decreased or ended and that disgust and coldness towards the spouse had increased.

"Intimacy between me and my husband has died."

Being less present was related to decreased time together and an experience of being present to the partner. Parents experienced being together as uncomfortable and the partner's presence as annoying. Lack of willingness to participate in the family's shared moments, estrangement, and the experience of loneliness were also related to being less present in the relationship after a child's death.

"We have become estranged from each other more and more, year after year... we are both of us living our own lives..."

Behaviour That Damages the Relationship

Behaviour that damages the relationship included *emerging aggression*, *an emerging substance abuse problem*, *neglecting the relationship*, *escaping from the relationship*, *cheating on the partner*, and *the relationship ending*.

Emerging aggression was related to a man becoming physically and psychologically violent. Parents also experienced increased oppression, blaming, and contempt as behaviour that damages the relationship after a child's death.

"The child's father started to blame me for what happened. In addition to accusations, I experienced psychological and physical violence..."

The man's *emerging substance abuse problem* was related to the man's increased alcohol use or some other substance problem, as well as separation and arguments due to alcohol abuse.

"At first my husband drank a lot, and once he assaulted me because we had arguments about our baby's death..."

"He sulks by himself and drowns/drowned his sorrow in drinking."

Neglecting the relationship was related to an atmosphere of a bad marriage, a bad relationship, as well as the relationship getting worse. It also included an increased difficulty of planning a shared future, decreasing attention to maintaining the relationship, neglecting the partner, forgetting the relationship, becoming paralysed, and questioning the relationship.

"The relationship was completely forgotten after our child died. At times I felt, that I didn't even want to have fun or try to maintain the relationship..."

Escaping from the relationship included the man going to the bar more often, increasingly playing games on the computer, and increased absence from home. It also included the man escaping the everyday life, the man having more hobbies, and both partners increasingly withdrawing into their own worlds.

Cheating on the partner included an emerging lack of trust, another relationship becoming exposed, and emergence of unfaithfulness.

"It felt like we no longer had anything in common. My partner started to have affairs..."

"I looked elsewhere for company to engage in discussion with, and it also led me to the arms of another man."

The relationship ending included a final or temporary breakup, considering a breakup, and an anticipated breakup. It also included a breakup due to the partner's sex change and other reasons.

"A breakup because we couldn't process the grief together."

"In the beginning, the foundation of the whole relationship was lost and we broke up several times."

Everyday Life Straining the Relationship

Everyday life straining the relationship included *increased difficulty of family life, of family planning, of everyday life, problems related to social support, and changing social relationships*.

Increased difficulty of family life included the increased difficulty of raising children, the attitude towards the partner's children becoming negative, blaming the partner for having their own children, feeling envy, and appropriating the partner's children.

"Accusations about the other partner having living children when the other one didn't have any at all has perhaps been the only negative thing."

As a negative change, *increased difficulty of family planning* included increased difficulty of discussing a new pregnancy as well as either becoming estranged from or more dependent on the partner due to a new pregnancy. Differences of opinion related to family planning becoming more polarized and increased mental strain due to

trying to have a new child were also related to increased difficulty of family planning as a negative change in the relationship after the death of a child.

"A more intensive battle over how many children there should be in our family in the future."

Increased difficulty of everyday life included a weakening sense of basic security, everyday chores being the responsibility of only one of the partners, increased difficulty of coping with everyday life, and losing livelihood after a child's death. It also included experiencing coping as too straining and losing direction in life.

"Grief is tiring and it's been hard to cope with everyday life ...we fall into arguments easily..."

Problems related to social support included strain on the relationship due to different levels of support from the partners' respective families, jealousy due to support from family members, and being disappointed in not receiving emotional support.

"Our child's death has increased the tension in our relationship because the one side of the family has supported us more. The constant presence of the partner's support network and the other side of the family receding to the background increases unpleasant discussions and tense situations."

As a negative change, *changing social relationships* included decreasing social relationships, becoming isolating from social relationships, longing for lost friends, and relatives having a negative attitude towards the partner. It also included the couple being left alone with their grief and a resulting boredom with the relationship, as well as a feeling of being alone with the grief after a child's death.

"A large part of my extended family and friends have disappeared. We have to get by alone/together with my spouse..."

Emotions Straining the Relationship

Emotions straining the relationship included *channelling feelings of grief to the partner*, *grief symptoms having a negative effect on the relationship*, *increased fears related to the partner and children*, as well as *increased fear of tomorrow*.

As a negative change, the parents experienced *channelling feelings of grief to the partner* as a feeling of melancholy, longing, bitterness, grief, guilt, and anger towards the partner.

"Our child's death has caused not only grief but tremendous anger and bitterness that isn't really targeted to anyone in particular but of course it becomes channelled to the person closest to you..."

Grief symptoms having a negative effect on the relationship included an experience of anxiety, suspicion, frustration, and indifference in the relationship. Parents also experienced increased stress symptoms, such as difficulty to concentrate and irritability. Increased sleeplessness, lack of energy, and fatigue were also experienced as negative effects of grief symptoms on the relationship after a child's death.

Increased fears related to the partner included worrying about the partner's coping and health. It also included being afraid of the partner dying, losing the partner, and fearing for safety. Fears and excessive worrying led to increased conflicts in the relationship and the atmosphere becoming strained after a child's death.

"I fear for my partner a lot. If he is late, for instance, I instantly fear the worst, and when he comes back, the groundwork for an argument has been laid... "

Increased fears related to children included fearing for the living children getting ill or dying or fearing for their safety. It also included fearing for losing a foetus or unborn children and fearing for childlessness. *Increasingly fearing tomorrow* included fearing for the future, life and death, being afraid of the uncontrollable nature of life, and other increased fears after a child's death.

"Fear has stepped into our lives and sometimes it's present, in the middle of traffic or in some surprising situations. It sometimes causes a tense atmosphere."

Discussion

Parents felt that the hardships of life, unhappiness, and lack of meaning weaken their relationship. The study results showed how parent or both parents had gotten depressed, and this has caused negative changes in the relationship. In earlier grief studies, failing mental health has not emerged as a cause for the weakening of the relationship, even though depression has been described as a consequence of grief (Aho et al., 2006) and prolonged grief is known to fulfil the criteria of severe depression (Zisook, Shear, & Kendler, 2007). The results of Vance et al. (2002), however, are similar: increased anxiety added to dissatisfaction in a relationship. In this study, it was revealed that the depression of one of the partners often led to the other partner also falling depressed, sometimes years after their child's death. It is important to recognize and intervene in the mental health problems of grieving parents in health care, especially by preventing the grief from becoming chronic and preventing depression from emerging. Supporting the parents' coping with grief is the best way to prevent depression and problems that it causes in a relationship.

One notable research result was how strong the parents' experience was of their changed identity and the negative changes it caused in the relationship e.g. the relationship may have ended in divorce due to a partner's sex change but this was an unusual outcome. On the other hand a broken self-identity caused one of the partners to become estranged. In earlier studies, there have been no reports about personality change having a negative consequence on the relationship, although negative and positive changes of self-image have been described in studies related to the parents' grief (Aho et al., 2006; Bellali & Papadatou, 2006; Koskela, 2011). A child's death and the grief it causes will shake and change a parent's self-image. In order to understand and accept one's own and the partner's change, parents should be offered an opportunity to discuss about personality development and growth and changes in self-image with a professional therapist.

The research results showed that emotional communication and talking between parents become more difficult after a child's death. Communication problems due to gender differences manifested so that mothers expressed a greater need to talk and the fathers were silent. The relationship was also strained by the different nature and different timing of the parents' grief, which has been reported in earlier studies as well (Arnold & Gemma, 2008; Cacciatore et al., 2008; Toller & Braithwaite, 2009). This study result supports the notion that social, professional and peer support are significant for open interaction and that they give an opportunity to express emotions.

The study also revealed negative changes in sexual life and increased lack of sexual desire in both parents after a child's death. Earlier studies have not reported about parents describing sex as having become mechanical due to a wish to have a child. However, Dyregrov & Gjestad (2011) also describe negative changes in sexual intimacy and mothers having an increased lack of sexual desire. A good sexual life is a significant part of the wellbeing of a relationship also after a child's death. Parents need information on changing sexual needs and support for ex-

pressing sexual needs and wishes more openly. Parents who have lost their child could be referred to sexual therapy if necessary.

According to this study, a man's increased substance use brought negative changes to the relationship. Increased use of substances has also been described in earlier studies on the grief of fathers (Aho et al., 2006; Davies, 2006; Li, Precht, Mortensen, & Olsen, 2003), but its connection to negative changes in the relationship has not been described. A worrying study result was the emergence of physical violence, which women described to have manifested in their men after their child's death. Increased violence has not emerged in earlier grief studies. Other studies on relationship violence show that psychological suffering (Vest, Catlin, Chen, & Brownson, 2002), excessive alcohol use, depression symptoms, and a withdrawing, anti-social personality are in connection with male violence and the emergence of violence in a relationship (Peek-Asa, Zwerling, Young, Stromquist, Burmeister, & Merchant, 2005). The psychological suffering caused by a child's death can lead to violence emerging in a relationship, which is why it is important to pay attention to identifying and intervening in violence in health care and referring people to treatment also when they are parents who have experienced their child's death.

Based on the study, a child's death shakes the stability of the relationship and can cause infidelity. Parents described cheating as an emerging lack of trust and as a revealed affair and infidelity. Earlier studies have also shown that estrangement from the partner after a child's death can lead to having an affair (Arnold & Gemma, 2008), which is one of the most common causes of ending a relationship (Amato & Previti, 2003). The results of this study support earlier information that a relationship can end in divorce or separation during the crisis following a child's death. A small part of the study participants were already divorced during the data collection but described their experiences of negative changes in a relationship before the divorce. Parents described that they are considering a divorce or separation, a temporary separation, having separated several times, or having separated permanently. Earlier studies have reported emerging divorces (Koskela, 2011; Rogers et al., 2008) increased numbers of divorces (Rogers et al., 2008), and destruction of the relationship (Titus & de Souza, 2011) after a child's death, but statistical information on this subject is lacking.

Conclusions

As a summary, a child's death causes a crisis to a relationship. It can appear only after years from the child's death. It takes time to go through a crisis and it requires open interaction in the relationship. This challenges both parents to deal with difficult emotions and to express their grief more openly. Parents should be offered support in the form of discussions and an opportunity for relationship therapy after their child's death. In addition, parents need information on the importance of supporting their partner, as well as means to identify and express negative emotions in order to avoid conflicts in the relationship. Going through a crisis is easier if written and verbal information is offered on grief and the changes it causes in the individual and in the relationship. Supporting the relationship after a child's death is important for the wellbeing of the parents themselves, their living children, and the whole society.

Funding

The authors wish to thank the Finnish foundation for nursing education for the financial support they have granted for the project.

Competing Interests

The authors have declared that no competing interests exist.

Acknowledgments

The authors have no support to report.

Notes

Study design: MK, ALA

Data Collection: ALA

Analysis: AS

Manuscript: AS, ALA

Manuscript commentary: MK, ALA

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