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LOSS AND GRIEF AMIDST COVID-19 PANDEMIC

2 YEARS ON: LOSS AND GRIEF AMIDST THE COVID-19 PANDEMIC

by

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A thesis submitted in partial fulfillment of the requirements for the degree of

Master of Science

Department of Psychology and Counseling

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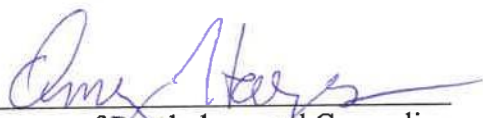
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Abstract

2 YEARS ON: LOSS AND GRIEF AMIDST THE COVID-19 PANDEMIC

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Fall 2022

This study sought to examine the variability and impact of different kinds of losses experienced during COVID-19 and how people reacted to and coped with those losses. The most common loss reported by individuals was the loss of social connection, while death-related losses were identified as the most impactful loss experienced. Results suggest that people responded in a myriad of ways, including increased cautiousness for health safety, refocusing their attention on important life matters, and finding alternative ways to connect with others. Furthermore, this study found that individual factors such as intolerance of uncertainty and perceived social support may play a significant role in positive and negative reactions to loss. Findings from this study provide valuable insights into the variability and impact of losses experienced during the pandemic. Future research should continue to explore experiences with death and non-death losses to better understand the dynamic processing of loss and grieving.

Keywords: loss, grief, COVID-19, coping

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Chapter 1

Introduction and Literature Review

On March 11, 2020, the COVID-19 outbreak was declared a global crisis (WHO, 2020). Two years have passed since the pandemic started and uncertainty about the continued and long-term impacts of the coronavirus remains. The pandemic has forced many changes in the everyday lives of people, creating a *new normal*. People have experienced, and continue to experience, disruptions in different aspects of their lives. For many individuals, the home became the center for both their personal and professional lives, as schools, universities, and businesses switched to remote operations. Many people have learned to be resourceful by creating opportunities to be productive, connect with others, and simply adjust to the rapid and abrupt changes. However, these changes have not been easy and have led to a serious rise in mental health challenges (Czeisler et al., 2020).

In the past two years, more people reported elevated levels of anxiety and depression than in previous years (Czeisler et al., 2020). Research shows that early pandemic lockdown measures were associated with increased health anxiety, stress, and loneliness (Tull et al., 2020). Social distancing guidelines forced many to self-isolate at home, away from friends and family, to reduce the risk of transmission. During this time, people reported lower levels of social contact and physical activity and increased feelings of loneliness, sadness, depression, and anxiety (Glowacz & Schmits, 2020; Killgore et al., 2020). In addition, it seems plausible that the constant news cycles about the threat of the coronavirus and the rising number of deaths could have further affected people's psychological wellbeing.

In the U.S. alone, the coronavirus has taken the lives of over 800,000 people and over 5 million people worldwide (CDC, 2022). The past two years have resulted in a serious

confrontation with morbidity and mortality, as new variants continue to pose a threat to people's lives. In addition to the growing number of deaths, people have experienced losses in different aspects of their lives. Graduating students lost the opportunity to walk the stage in celebration with their peers. Holidays and special occasions were spent alone at home. Others have lost their livelihoods, financial security, and health security. Many people are experiencing an ongoing, pervasive sense of loss, as the coronavirus continues to disrupt and challenge our sense of normalcy (Walsh, 2020). Furthermore, many people are feeling grief in response to these losses (CDC, 2021).

The COVID-19 pandemic presents a unique opportunity for researchers to begin to better understand loss and grief reactions in times of global crisis. Restrictions brought on by masking and social distancing guidelines have put pressure on people to learn to adapt and cope in new ways. Exploring how people have dealt with covid-related challenges can offer some insight into the development of tailored strategies for coping with difficult times. In addition, this research can further build on our understanding of loss and grief reactions by examining the impacts of, and responses to, death and non-death losses during the pandemic.

Loss & Grief

People encounter many types of loss throughout their lifetime, whether it be the death of a close loved one or the loss of an important job opportunity. Much of what we know about grief reactions to loss has come from research on death-related losses (Walsh, 2020).

Researchers long thought that the absence of grief was atypical and pathological (Middleton et al., 1993). However, more recent research has shown that most individuals, approximately 45-60%, display relatively stable and healthy adjustment to loss (Bonnano, 2004). In other words,

the majority of people respond *resiliently* to loss, with most grievors resuming normal functioning within a few months (Mancini & Bonnano, 2009).

In addition to losses related to death, people encounter many other significant losses throughout their lifetime (Walsh, 2020). Some of these losses include the loss of relationships, the loss of physical ability, divorce, and other such losses. Unlike death-related losses, however, these losses are not openly acknowledged in the way that death is. People may not even realize that what they are experiencing is a loss and that they are grieving this loss (Rando, 1985, as cited in Walsh, 2020). The research on grief reactions to non-death losses is limited and future work is needed to increase our understanding on how those reactions are similar or different to death-related loss. For example, we know from extensive study on losses related to death that a number of individual and situational factors—coping, intolerance of uncertainty, psychological flexibility, resilience, and perceived social support—can play an important role in facilitating or buffering the impact of loss. Additional research is needed to examine these factors in the context of the recent pandemic and among both death and non-death related losses.

Coping

Coping can be broadly defined as processes, strategies, or styles of managing (i.e., reducing or tolerating) stressful situations. In the context of loss, coping can refer to managing grief reactions (Stroebe & Schut, 2010). Previous research has argued that how people cope with stress can vary from one situation to another (Carver, Weintraub, & Scheier, 1989). Rather than viewing coping as a relatively stable style that people usually bring with them to deal with stress, this view sees coping as a situational response that can vary across different contexts (Carver, Weintraub, & Scheier, 1989).

Several theoretical formulations have been proposed to understand coping with bereavement. The grief work hypothesis has been a prevailing model for understanding coping with grief and argues that bereaved individuals must work through grief by confronting the feelings and reactions to the loss in order to adapt to it (Stroebe, 1992-93). This formulation suggests that an active form of coping, which entails coming to terms with the loss, is necessary for healthy adjustment to loss (Stroebe, 1992-92). However, more recent models suggest that, in their responses to loss, people oscillate between confronting the loss and other times avoiding different aspects of it, and that this oscillation between confrontation and avoidance is an important part of adaptive coping (Stroebe & Schut, 2010). In other words, what may be an adaptive form of coping in one instance may not be in another. Effecting coping can encompass the use of different coping processes, strategies, or styles in dealing with loss. This perspective is consistent with previous articulations of coping that see coping as a set of strategies that may change in any given situation as opposed to dispositions that people apply to all situations.

Previous research has found emotional avoidant coping, which involves cognitive and behavioral strategies to deny, minimize, and/or avoid dealing with stress, to be positively correlated with complicated grief and PTSD symptoms (Lipp & O'Brien, 2020; Schnider, Elhai, & Gray, 2007; Schoenmakers, van Tilburg, & Fokkema, 2015). On the other hand, problem focused coping, which involves active efforts to manage stress, was found to be linked to post-traumatic growth (Lipp & O'Brien, 2020; Schoenmakers, van Tilburg, & Fokkema, 2015). However, more research is needed to better understand the relationship between coping and grief. Few studies have explored how different coping strategies can be employed together or at different points in time in the grief process to effectively manage grief symptoms.

Intolerance of Uncertainty

Intolerance of uncertainty (IU), or the tendency to perceive future uncertainty as threatening and to react negatively to uncertain situations, has been studied for its role in anxiety-related disorders and symptoms (Boelen, Reijntjes, & Smid, 2016; Boswell et al., 2013). IU has been found to be a contributing factor in worry, a core feature of generalized anxiety disorder (Bottesi et al., 2016). Furthermore, previous studies suggest that high levels of IU may be a transdiagnostic risk factor for depression and anxiety disorders (Einstein, 2014).

Bereavement researchers have recently taken interest in intolerance of uncertainty as an important risk factor for complicated grief symptoms (Boelen, 2010; Boelen, Reijntjes, & Smid, 2016; Kennedy, Deane, & Chan, 2021). Some researchers propose that since loss can involve many uncertainties, it would be expected that individuals with higher levels of IU would experience greater emotional distress in response to loss (Boelen, 2010). Indeed, studies have found that higher levels of intolerance of uncertainty were associated with increased psychological distress, prolonged grief disorder, and post-traumatic stress symptoms (Kennedy, Deane, & Chan, 2021). Furthermore, psychological inflexibility was found to partially mediate this relationship. However, additional work is needed to further support this theory and identify potential associations with reactions to death and non-death losses.

Psychological Flexibility

Psychological flexibility refers to a person's ability to be in the present moment and deal with unpleasant thoughts, feelings, or bodily sensations while moving in pursuit of one's personal values (Hayes et al., 2006). Psychological flexibility is an important transdiagnostic dimension that has been found to promote mental well-being and mitigate the impacts of stress on mental health (Hernandez-Lopez et al., 2021; Gloster, Meyer, & Lieb, 2017; Masuda et al., 2011). Research shows that during the COVID-19 pandemic, higher levels of psychological

flexibility were associated with lower levels of psychological distress (Tindle & Moustafa, 2021). Furthermore, researchers suggest that flexible adaptation, rather than rigidity, is a critical variable in resilient responses to loss (Mancini & Bonanno, 2009). Conversely, psychological inflexibility has been found to be a predictor of negative mental health outcomes, including anxiety and depression (Levin et al., 2014). Research examining the relationship between psychological flexibility and grief has found that experiential avoidance, or the tendency to avoid or change unpleasant internal stimuli (i.e., psychological inflexibility), can be both an adaptive and maladaptive strategy for dealing with loss (Shear, 2010). In the short-term, experiential avoidance can be a strategy for grieving individuals to attend to their responsibilities while setting aside their grief but can hinder or prolong grief in the long-term (Shear, 2010). Further exploration is needed to better understand the role of psychological (in)flexibility in effectively adapting to loss.

Resilience

Researchers suggest that a stable and healthy adjustment to loss is a sign of resilience (Mancini, Sinan, & Bonanno, 2015). Resilience, which refers to the ability to maintain stable equilibrium in the face of adversity, has been identified as an important protective psychological factor in the prevention of negative mental health outcomes (Bonanno, 2004). Previous research has shown that high ego resiliency, or the ability to behave flexibly and recover from stress, is associated with stress resistance (Mancini, Sinan, & Bonanno, 2015). Furthermore, researchers have found that prolonged grievers were more likely to report low levels of ego resilience compared to resilient grievers (Mancini, Sinan, & Bonanno, 2015). More research is needed to investigate the role of resilience in predicting healthy adjustment to loss, particularly when multiple death and/or non-death losses are experienced together.

Perceived Social Support

Perceived social support, which refers to an individual's perception of available sources of support (e.g., family, friends, colleagues), is an important protective factor against negative cognitive, emotional, and behavioral symptoms during times of stress (Lee, 2019). Research shows that perceived social support can buffer the impact of stressful life events (Cohen & Wills, 1985; Melrose, Brown, & Wood, 2015). In the context of loss, however, there have been inconsistent findings regarding the role of perceived social support in grief reactions to loss (Rosenblatt, 1988). On the one hand, some researchers argue that social support can sometimes have a negative impact on someone who is grieving (Rosenblatt, 1988; Wortman, 2004). For example, seeing other people or conversing with them can bring forth distressing memories of the loss and may complicate the grief process for the individual. On the other hand, however, researchers have also argued that social support can be of benefit for individuals who are grieving by pushing people to deal with the loss or helping distract them (Rosenblatt, 1988; Bonanno, 2004; Mancini & Bonanno, 2009). More research is needed to further explore the relationship between perceived social support and grief reactions to loss.

The Current Study

An ample amount of research has examined grief reactions to death and non-death losses; however, the research has yet to explore grief reactions in response to death and non-death losses in the context of the COVID-19 pandemic. Therefore, this study sought to address this gap with three aims using a mixed method design. The first aim was to explore the variability and impact of different types of loss using qualitative responses to open-ended questions regarding specific losses experienced during the pandemic. Given the limited research

in this area, particularly as it relates to differences in reactions to non-death losses during the pandemic, the first aim was exploratory.

The second aim used quantitative data based on self-report questionnaires to examine how individual and situational factors, including psychological flexibility, resilience, intolerance of uncertainty, and perceived social support, were associated with the impact of losses experienced during the COVID pandemic. Based on previous literature investigating the role of individual and situational factors in grief reactions, it was hypothesized that higher levels of psychological flexibility and resilience would be associated with lower levels of grief reactions to loss. It was further hypothesized that higher levels of intolerance of uncertainty would be associated with higher levels of grief reactions to loss. Because of inconsistencies in the literature on the role of social support in grief, no a priori hypotheses were made and this analysis was considered exploratory.

The third aim explored the types of coping strategies used in response to different kinds of losses, including differences in coping with death and non-death losses and explored the self-reported effectiveness of those strategies. Given the evidence that *adaptive* coping involves adjusting strategies to fit the given situation or context, this aim was considered exploratory and involved examination of both qualitative and quantitative data.

Chapter 2

Methods

Participants

Participants for this study included undergraduate students at a public university. The sample consisted of 119 individuals between the ages of 18 to 57 ($M = 21.97$, $SD = 5.95$).

Descriptive statistics of the sample are displayed in Table 1.

Procedures

This study was approved by the local Institutional Review Board. All participants provided consent to participating before completing an anonymous, online Qualtrics survey that included self-report questionnaires and prompts for open-ended text responses.

Eligibility criteria included: 1) 18 years of age or older and 2) able to complete the survey in English. Participants received SONA credit for taking part in the study.

Measures

COVID-Related Loss

Loss during the COVID pandemic was assessed with a series of qualitative questions that asked participants to describe a loss experienced during the pandemic (e.g., *In a few sentences, please describe how the loss of your loved one has impacted you*), its impact (e.g., *Is this loss still currently impacting you?*), and coping strategies used to cope with the loss (e.g., *What have you been doing to cope with this loss? How has that been helpful or not helpful?*).

Table 1*Demographic Characteristics*

Variable	Levels	Count	%
Gender	Man	25	21.4 %
	Woman	89	76.1 %
	Genderqueer, gender non-binary, or gender-fluid	2	1.7 %
	Transgender man	1	0.9 %
Ethnicity	Not Hispanic or Latinx	83	70.9%
	Hispanic or Latinx	33	28.2%
	Prefer not to respond	1	0.9%
Race	White	83	70.9%
	Black or African American/White	1	0.9%
	Black or African American	12	10.3%
	American Indian or Alaska Native	2	1.7%
	American Indian or Alaska Native/White	1	0.9%
	Asian	7	6.0%
	American Indian or Alaska Native/Black or African American/White	2	1.7%
	If not specified, please specify: Hispanic	1	0.9%
	If not specified, please specify: Hispanic/White	1	0.9%
	Prefer not to respond	7	6.0%

Reactions to Loss Scale

The Reactions to Loss Scale (RTL; Cooley, Toray, & Roscoe, 2010) is a 70-item questionnaire designed to assess grief reactions to death and non-death losses in college students. Each item is rated on a 6-point Likert scale, ranging from 1 (*never*) to 6 (*always*). The scale consists of three subscales, including Positive Reappraisal (*I continued to be optimistic about my future even after the loss*), Avoidance (*I tried hard not to think about the loss*), and Loss of Control (*This loss has caused me to question my beliefs*). Subscale scores are obtained by summing the responses for each respective scale (Positive Reappraisal Cronbach's $\alpha = 0.92$, Avoidance Cronbach's $\alpha = 0.91$, and Loss of Control Cronbach's $\alpha = 0.94$).

Feelings About Loss Scale

The Feelings About Loss Scale (FAL; Cooley, Toray, & Roscoe, 2010) is a 19-item measure of current feelings about a loss. Items are rated on a scale of 1 (*not at all*) to 5 (*very strongly*). The scale consists of three subscales: Positive Affect (*hopeful*), Negative Affect (*frightened*), and Regret (*guilty*). Subscale scores are obtained by summing the responses for each respective scale (Positive Affect Cronbach's $\alpha = 0.92$, Negative Affect Cronbach's $\alpha = 0.86$, and Regret Cronbach's $\alpha = 0.76$).

Intolerance of Uncertainty

The Intolerance of Uncertainty Scale-Short Version (IUS-12; Carleton, Norton, & Asmundson, 2007) is a 12-item questionnaire developed to measure levels of intolerance of uncertainty. Each item is rated on a 5-point Likert scale, ranging from 1 (*not at all characteristic of me*) to 5 (*entirely characteristic of me*). The scale includes statements such as “*Uncertainty makes me uneasy, anxious, or stressed*” and “*The ambiguities in life stress*

me.” The total score is obtained by summing all the responses (Cronbach’s $\alpha = 0.91$).

Psychological Flexibility

The Personalized Psychological Flexibility Index (PPFI; Kashdan et al., 2020) is a 15-item measure of one’s ability to pursue valued life aims despite the presence of distress. Each item is rated on a 7-point Likert scale, ranging from 1 (*strongly disagree*) to 7 (*strongly agree*). The scale includes statements such as “I avoid the most difficult goal-related tasks.” and “When I feel discouraged, I let my commitment for this goal slide.” The total score is obtained by reverse scoring responses on some items and summing all responses, in which higher scores represent psychological inflexibility while lower scores represent psychological flexibility (Cronbach’s $\alpha = 0.70$).

Resilience

The Brief Resilience Scale is a 6-item measure to assess perceived ability to bounce back or recover from stress (Smith et al., 2008). Each item is rated on a scale of 1 (*strongly disagree*) to 5 (*strongly agree*). The scale consists of statements including “It does not take me long to recover from a stressful event” and “I usually come through difficult times with little trouble.” The total score is obtained by averaging all the responses (Cronbach’s $\alpha = 0.80$).

Perceived Social Support

The Multidimensional Scale of Perceived Social Support (MSPSS; Zimet, Dahlem, Zimet & Farley, 1988) is a 12-item measure of perceived social support from friends, family, and a significant other. The items are rated on a scale from 0 (*strongly disagree*) to 5 (*strongly agree*). Sample items from the scale include statements such as “I

get the emotional help and support I need from my family” and “I have friends with whom I can share my joys and sorrows.” The total score is obtained by summing all responses (Cronbach’s $\alpha = 0.93$).

Analyses

To explore the variability and impact of losses experienced during COVID, descriptive statistics were used to examine frequencies of types of loss identified, the number of losses experienced, and the ratings of loss impact. Thematic analysis was also used to identify themes in responses to qualitative questions. A multiple linear regression analysis was conducted to examine the association between four individual characteristics (IVs)—psychological flexibility, resilience, perceived social support, and intolerance of uncertainty—and grief reactions to loss (DV). Coping strategies were assessed by examining frequencies of types of coping strategies used across death and non-death losses, as well as a thematic analysis of qualitative responses to the types of coping strategies used and their perceived effectiveness.

Thematic analysis was conducted using a combined approach of inductive and deductive coding by the author of this paper. Given the exploratory approach of this research, inductive analysis was conducted to identify themes that emerged within the qualitative responses to two questions, one examining loss impact and the second examining coping strategies used in response to the loss. Inductive analysis consisted of a multi-step process, as outlined below (Thomas, 2017):

1. Reading of raw data for familiarity with the content and identification of initial concepts/themes (inductive).
2. Line-by-line coding consisting of a closer reading of the text, application of

identified codes (deductive), and identification of new codes (inductive). This step was completed several times by the author of this paper.

3. Creation of categories based on larger themes emerging from the identified codes (e.g., inability to see loved ones before passing and lack of closure belong to the category of death/grieving).

Deductive coding involved the application of identified themes to participant responses from the initial coding of the raw data. Multiple codes were applied to a response if several themes emerged within a single response.

For quantitative analysis, a power analysis was conducted using G*power to determine the number of participants needed to run the multiple regression analysis. Assuming a medium effect size based on previous studies that examined reactions to loss, including four predictors and an alpha coefficient of .05, a sample of at least 85 participants was needed to achieve power of .80. Qualitative responses to the COVID loss questions were coded and unique themes were identified, along with the frequency of each theme.

Chapter 3

Results

Preliminary analyses were conducted to assess for potential violations of normality assumptions. An analysis of standardized residuals showed that the data contained no outliers (Positive Reappraisal Std. Residual Min = -2.37, Std. Residual Max = 2.53; Loss of Control Std. Residual Min = -2.56, Std. Residual Max = 2.45; Avoidance Std. Residual Min = -2.74, Std. Residual Max = 2.27). Furthermore, the histograms of standardized residuals indicated that the data contained approximately normally distributed errors, and the scatterplots of standardized predicted values showed that the data met the assumption of homogeneity of variance and linearity. Lastly, the assumption of independent errors was met (Positive Reappraisal Durbin-Watson value = 2.02; Loss of Control Durbin-Watson value = 1.95; Avoidance Durbin-Watson value = 1.97).

Qualitative Findings

Types of Losses Experienced

Participants completed a checklist indicating the types of losses experienced during the pandemic. All participants in the study indicated experiencing more than one loss. Some of the most frequently identified losses across the sample included the loss of social connection, loss of a sense of certainty, predictability, and control, and the loss of celebration of special occasions/events/holidays; whereas, the loss of a family member/close relative, friend, or loved one, loss of social connection, and loss of a traditional college/university experience were most frequently reported as being the most impactful loss (see table 2). Approximately 33% of the sample endorsed a death-related loss, with 51% of those participants selecting it as the most impactful loss. In a follow-up

Table 2*Frequencies of Total and Most Impactful Losses Experienced During the COVID-19 Pandemic*

Type of Loss	Total Losses		Most Impactful Loss	
	Count	%	Count	%
Loss of a family member/close relative, friend, or loved one	39	32.8%	20	18.2%
Loss of social connection	86	72.3%	16	14.5%
Loss of a traditional college/university experience	75	63.0%	14	12.7%
Loss of a sense of certainty, predictability, and control	72	60.5%	10	9.1%
Loss of celebration of special occasions/events/holidays	73	61.3%	9	8.2%
Loss of trust in other people, the government, and the world	62	52.1%	8	7.3%
Loss of relationships	46	38.7%	8	7.3%
Loss of purpose and direction	35	29.4%	6	5.5%
Loss of financial stability	38	31.9%	5	4.5%
Loss of employment	31	26.1%	4	3.6%
Loss of health security	19	16.0%	3	2.7%
Loss of freedom of movement	30	25.2%	2	1.8%
Loss of identity	26	21.8%	2	1.8%
Loss of cultural and/or religious rituals	15	12.6%	2	1.8%
Loss of food security	10	8.4%	0	0.0%
Loss of housing security	9	7.6%	0	0.0%
Other	3	2.5%	1	0.9%

Note. Total losses results represent responses to the initial question of what losses were experienced during the pandemic; thus, participants could select more than one type of loss. Most impactful loss represents the single type of loss that was identified as the most impactful among total losses experienced.

question to identifying the most impactful loss, more than half of the sample (55%) indicated that they were still being impacted by their loss at the time of the survey.

Perceived Impact of Loss

Various themes were identified across participant responses to qualitative questions about how the loss impacted participants. Table 3 displays the most common themes and subthemes observed from the results. The top three themes identified across participant responses to this question include worsened mental health, disruption to academic experiences, and relationships ending due to lost connection with friends. For example:

“I struggle with anxiety. Over the past two years it's gotten really bad especially surrounding social situations, and life decisions. I just don't feel secure in making big decisions because anything could happen and it would be out of my control.”

([Woman], age 20)

“I was unable to form friendships with other students. My teachers don't know who I am. Most of my classes have been online, so I didn't get to be on campus very much. I feel like I missed out on a lot of milestones.” ([Woman], age 21)

“It made me lose a few friends due to the social distancing mandate that had been put into place.” ([Woman], age 18)

Coping with Loss

Participants responded to the questions, “*What did you do to cope with this loss? How has that been helpful or unhelpful?*”, by describing a range of coping strategies used

Table 3*Themes for Qualitative Responses to Effects of Most Impactful Loss*

Themes	Subthemes
Health	
Mental health	Loneliness Hopelessness Depressed mood Anxiety Discouragement Uncertainty Stress Fear Increased Rumination Defeat Low self-esteem/self-confidence
Physical health	Health anxiety (for self and others) Weight loss/gain COVID-related complications
Academics	Disruption to classroom experience Disruption to college life (e.g., joining organizations) Difficulty making new friends Lost academic opportunities (e.g., study abroad) Cancelled graduations
Social	Stunted growth Social impairment/awkwardness Relationship strain Relationships ending Increased isolation Disconnection Social withdrawal
General Life/Functioning	Cancelled holidays Restrictions on movement Disruption to religious involvement
Trust	Distrust of government Distrust of other people Decreased empathy towards others Increased polarization
Death/Grieving	Lack of closure Impacted funeral rituals Financial burdens Inability to see loved ones before passing

in dealing with their most impactful loss (see Table 4). The top three coping strategies identified include acceptance of the situation/uncertainty, engaging in self-care/self-improvement, and refocusing their attention on what is important (e.g., family, health, religion). For example:

“Just try to think ahead and be glad that things are going back to normal. Accept the things I cannot change and realize everyone else in the world is dealing with the experience as well.” ([Woman], age 23)

“I’ve have been working on coping in taking those mental health days and not being too hard on myself, because I am still trying to figure everything out.” ([Woman], age 19)

“Staying true to myself, approaching the situation authentically yet respectfully, focusing on my family’s and my wellbeing, practicing mindfulness, taking care of my health, limiting the frequency and places that I go, and concentrating on goals and moments in which I experience sense of peace, accomplishment, satisfaction, and joy.” ([Woman], age 27)

In addition, some participants indicated using more than one strategy to cope with their loss. For example, one participant reported reaching out to family while also attending therapy to manage anxiety related to the loss.

Quantitative Results

Multiple linear regression was used to examine the relationship between four predictor variables (intolerance of uncertainty, psychological flexibility, resilience, and perceived social support) and three outcome variables (positive reappraisal, loss of control,

Table 4*Themes for Qualitative Responses to Coping Strategies for Most Impactful Loss*

Acceptance of the situation/uncertainty

Increased cautiousness

Substance use

Self-care/self-improvement

Finding alternative ways to connect with others

Making new friends

Spending time with loved ones

Enrolling in/attending therapy

Taking medications as prescribed

Engaging in distractions

Avoidance: social interactions, feelings, COVID-related news

Setting goals

Spreading awareness

Refocusing attention on academics, relationships, religion, health, and work

Engaging in pleasurable activities

Praying

Mindfulness/meditation

Working more hours

Budgeting

Reminiscing about the past

Mending relationships

Keeping an open mind

Talking to friends/family

Didn't know what to do

and avoidant reactions to loss). Three models were fit, one for each outcome variable: positive reappraisal ($F [4,104] = 2.145, p = .080, R^2 = .09$), loss of control ($F [4,104] = 8.31, p < .001, R^2 = .24$), and avoidant reactions to loss ($F [4,104] = 4.98, p < .001, R^2 = .16$).

Model 1: Positive Reappraisal

No significant relationship was found between positive reappraisal reactions to loss and the four predictor variables: intolerance of uncertainty ($\beta = 0.16, p = .144$), psychological flexibility ($\beta = -0.19, p = .090$), resilience ($\beta = 0.16, p = .135$), and perceived social support ($\beta = 0.10, p = .306$).

Model 2: Loss of Control

Results indicated that higher levels of intolerance of uncertainty and lower levels perceived social support were significantly associated with reactions to loss characterized by loss of control ($\beta = 0.37, p < .001$ and $\beta = -2.38, p = .010$, respectively). By contrast, no significant relationship was found between psychological flexibility and resilience with loss of control reactions ($\beta = -0.06, p = .569$ and $\beta = -0.14, p = .151$, respectively).

Model 3: Avoidance

Higher levels of intolerance of uncertainty were associated with avoidant reactions loss ($\beta = 0.38, p < .001$), while no significant relationship was found between psychological flexibility ($\beta = -0.16, p = .119$), resilience ($\beta = -0.06, p = .543$), and perceived social support ($\beta = -0.17, p = .068$) with avoidant reactions to loss.

Chapter 4

Discussion

The COVID-19 pandemic led to losses in various aspects of people's lives, from lost job opportunities to the loss of a close loved one. The purpose of this study was to explore the variability and impact of different types of losses experienced during the pandemic and to examine how people responded to and dealt with those losses.

Impact of Loss: Qualitative Findings

Qualitative responses to questions about the impact of pandemic-related losses were analyzed to identify themes across responses. The most common loss reported by participants was the loss of social connection with other people. A closer look into participant's responses indicates that many people struggled to maintain relationships with close friends and loved ones during the pandemic. One participant shared:

“My best friend and I barely talk anymore because we lost touch during COVID-19. This still impacts me, as I still care about her and miss her. I have new friends that I love and are great to me, but I feel I am still grieving the loss of that friendship.”

([Woman], age 18)

Participants cited different barriers to making and maintaining friendships during early lockdown measures and social distancing guidelines. Some individuals reported worries around their own health safety and the safety of their families, thus limiting their interactions with other people, while others mentioned experiencing a difficult time fully expressing themselves over virtual formats. The social impact is problematic in its own right, but it seems possible that a loss of social connection could further impact other

domains, such as mental health. Notably, prior research has demonstrated important links between social connectedness and psychological wellbeing (Marler et al., 2021). In a time of increased social distancing and limited face-to-face encounters, participants in this study also reported experiencing increased social anxiety, loneliness, and isolation due to the loss of social connection. Some participants also stated feeling more helplessness and feeling like they lost a part of themselves in the absence of close friends.

In addition to the loss of social connection, more than half of participants reported experiencing a loss of certainty, predictability, and control, as well as a loss of trust in other people, the government, and the world. One participant expressed:

“I found it very frustrating that the pandemic became a polarizing issue and how some people turned it into a political issue. I lost confidence in a lot of people because they were willing to risk severe and life-threatening illnesses all because of refusing to be vaccinated or wear a mask.” ([Man], age 18)

Participants shared feelings of disillusionment, fear, and uncertainty in response to these losses. One participant expressed having a more cynical worldview due to their distrust of the media and government during the pandemic. These findings sit within a context of heightened levels of social and political unrest due to perceived inadequacy of government response to the COVID pandemic. Participants also reported being impacted in many other ways, including their academics, general life/functioning, and finances. Findings from this study indicate that individuals were impacted in more than one way by their loss in addition to experiencing multiple losses at once, including death and non-death losses for some.

Approximately 33% of participants endorsed the loss of a loved one during the COVID pandemic, in addition to other non-death losses. Participants reported difficulties

grieving the loss of their loved one due to the inability to see that person before their death and changes to funeral rituals during the pandemic. When asked about which loss was the most impactful, 51% of those participants who experienced the loss of a loved one selected the death-related loss as the most impactful. This may suggest that although some people experienced the loss of a close loved one during the pandemic, other non-death losses experienced could have had greater impact and significance for some individuals. This finding underscores the importance for researchers to continue exploring individuals' experiences with non-death losses to better understand grief reactions to loss. Overall, these qualitative results from this study highlight the diversity of losses experienced and the significant impact of those losses on various aspects of people's lives.

Coping with Loss: Qualitative Findings

This study also sought to examine how people coped with pandemic-related losses. COVID-19 put pressure on people to learn to adapt and cope in new ways in response to the many novel disruptions and losses brought on by the pandemic. The results of this study suggest that people responded in a myriad of ways, including increased cautiousness for health safety, refocusing their attention on important life matters (e.g., family, health, academics), and finding alternative ways to connect with others.

Some participants indicated that they learned to accept the situation and uncertainty surrounding their life as a way to cope with their losses. Many of those individuals indicated feelings of shock and disbelief by the continued impacts of COVID-19 on life. This finding is significant because it reflects a move towards approach-oriented or positive coping that involves acknowledgement of the situation. For example, some participants chose to refocus their attention on their family, wellbeing, and goals. Other participants

indicated using problem-solving approaches such as working more hours when finances were tight due to the loss of financial stability or trying to mend relationships with those with whom they became disconnected. In addition to these strategies, many participants expressed seeking out support from others by enrolling in or attending therapy and going to medical appointments regularly. Although most individuals indicated using positive coping strategies such as praying and talking to friends, some participants indicated not knowing what to do in response to their losses or using more recreational substances.

Prior research has shown that, in response to death and non-death losses, people engage in a range of processes that may be helpful at times and unhelpful at other times (Stroebe & Schut, 2010). Rather than engaging in only one fixed set of strategies for each situation, past work suggests people draw from a diverse pool of resources and strategies in coping with distress. Similarly, participants in this study used more than one strategy at a time to deal with multiple losses, such as engaging in mindfulness practices to reduce depression and anxiety or using more recreational substances in response to perceived lack of control. The findings from this study provide support for the perspective that coping can involve varying strategies that may change in any given situation as opposed to a disposition that people apply to all situations. Furthermore, people may employ different strategies that can be both helpful and unhelpful in response to multiple losses occurring at the same time.

Predictors of Reactions to Loss: Quantitative Findings

This study also aimed to examine the relationship between individual and situational factors, such as intolerance of uncertainty, psychological flexibility, resilience, and perceived social support, and people's reactions to loss. Specifically, we examined

positive reactions (e.g., positive reappraisal) and negative reactions to loss (e.g., loss of control and avoidance). Positive reappraisal refers to a meaning-based form of coping that is considered to be an adaptive process in which individuals contend with a loss by reconstruing it (Garland, Gaylord, & Park, 2009). On the other hand, loss of control and avoidance involve negative reactions and coping strategies.

Loss of control refers to the extent to which a person feels that they have lost control of their life and emotions as a result of the loss, while avoidant reactions involve attempts or desires to repress negative thoughts, feelings, and reminders of the loss (Cooley, Toray, & Roscoe, 2013).

Results indicated that higher levels of intolerance of uncertainty were associated with loss of control and avoidant reactions to loss. In other words, individuals with greater difficulty tolerating uncertain situations and events were more likely to react negatively or engage in negative processes, such as blaming themselves for the loss or using alcohol or other substances to cope with the loss. These findings are consistent with prior research which has indicated that higher levels of intolerance of uncertainty could result in greater emotional distress in response to loss (Boelen, 2010). Furthermore, prior studies have demonstrated that high intolerance of uncertainty was associated with increased psychological distress and pathological grief reactions (Kennedy, Deane, & Chan, 2021). The findings from this study underscore the significance of intolerance of uncertainty as a potential predictor of negative reactions to highly stressful events, including death and non-death losses as identified in this study. Although lower tolerance for uncertainty was associated with negative reactions to loss, this study did not find a significant relationship with positive reactions. In other words, greater tolerance for uncertainty was not

significantly associated with positive appraisal to loss. Future research should continue to explore the role of intolerance of uncertainty in psychological outcomes to loss and try to better understand how building up an individual's capacity to tolerate loss can impact grief reactions to loss.

Lower levels of perceived social support were also significantly associated with loss of control, but not avoidant, reactions to loss. This suggests that individuals who perceived less support from friends, family, or significant others during this global crisis were more likely to feel a sense of lack of control over their life and emotions in the context of their loss. However, those individuals were not necessarily more likely to engage in avoidant coping strategies, such as increased substance use or mental distractions, to deal with their loss. This could mean that when individuals do not feel well supported, they may be more likely to feel less control, more helplessness, or more hopelessness over their situation. However, higher levels of perceived social support are not necessarily linked to engagement in positive coping. This finding is inconsistent with previous research which found that higher perceived social support can be a protective factor that facilitates more proactive coping, particularly in the context of death-related losses (Bonanno, 2004; Mancini & Bonanno, 2009). One reason that this finding may not have been supported in this study could be that the relationship between perceived social support and loss and grief reactions can vary depending on the type of loss experienced. Future research should examine the role of perceived social support in facilitating different grief reactions and to examine whether types of loss can have an impact on this relationship.

Although there were no statistically significant relationships between resilience and psychological flexibility with positive reappraisal, loss of control, and avoidant reactions to

loss, the relationships between these constructs may warrant continued exploration in future research. Prior research has demonstrated the critical role of higher resilience in healthy adjustment to loss (Mancini, Sinan, & Bonnano, 2015). Similarly, psychological flexibility is a critical variable of mental wellbeing. The research suggests that flexible adaptation, rather than rigidity, is a critical variable in resilient responses to loss (Mancini & Bonanno, 2009). Despite evidence from past research and theoretical support, resilience and psychological flexibility were not significantly associated with positive reactions to loss in this study. One explanation for these findings could be that the measures used to examine resilience and psychological flexibility did not adequately capture these constructs within the context of loss. The literature consists of different understandings of resilience. Some researchers view it as a trait-like characteristic, while others suggest that resilience is a dynamic process that is ongoing and evolving (Ayed, Toner, & Priebe, 2019). This study used a measure that is more consistent with the former understanding of resilience; however, in the context of loss, it may be more appropriate to examine resilience as a dynamic process given that encounters with loss are dynamic and can involve temporary disturbances that subside over time. Similarly, psychological flexibility was measured as a general characteristic/trait in response to a particular goal rather than in response to losses experienced during COVID. Previous research suggests that it is important to fully consider the context in which flexibility matters the most (Doorley et al., 2020). Therefore, it may be more appropriate to examine psychological flexibility within the context of loss and in response to the loss itself, rather than an unrelated goal, to examine its role in grief reactions to loss. More research is needed to better understand the role of resilience and psychological flexibility in effectively adapting to loss and more clearly define ways to

measure and understand the role of these constructs in loss and grief literature.

Understanding people's experiences with loss during the COVID-19 pandemic provide us with some insight into how people have been impacted by death and non-death losses and how they managed to resourcefully deal with those losses. This research can shed light on ways to optimize physical and psychological health in any future public health crises in which social distancing is necessitated.

Limitations

This study had several limitations that could have impacted the findings. First, the sample was restricted to college students with over 70% of the sample consisting of individuals who identified as both White and woman. The constricted demographic characteristics could have significantly impacted the findings. Second, data was collected approximately two years into the pandemic at a time in which many were returning to normal, everyday functioning. Therefore, it is possible that participants' reflections on COVID losses and experiences may have been biased due to the passage of time and change in context. Lastly, the data was collected at only one time point and does not necessarily capture people's reactions to loss over time, which limited the interpretation of the results.

Chapter 5

Conclusion and Recommendations

Despite limitations, the findings from this study provide valuable insights into the variability and impact of losses experienced during the COVID-19 pandemic. This mixed-methods study contributes to the research examining loss and grief reactions, particularly within the context of a global pandemic. The study sought to examine people's experiences with both death and non-death losses, and the findings provide unique qualitative and quantitative perspectives on how individuals were impacted by various losses at once, and how they coped with those losses. Although this study captured people's experiences at a single timepoint, future research should continue to explore experiences with death and non-death losses, particularly over extended periods of time, to better understand the dynamic processing of loss and grieving.

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