

Lived Experiences of the Bereaved in the COVID-19 Era in Harare East, Zimbabwe

¹Nyandoro Rudadiso, ²Nyashanu Tichaenzana, ²Siwawa Christina, ²Mukorera Obey*

¹Department of Psychology, Great Zimbabwe University, Zimbabwe.

²Department of Psychology, Faculty of Humanities, University of Pretoria, South Africa

²Department of Psychology, Great Zimbabwe University, Zimbabwe.

²Community Health and Behaviour Change Coordinator Zimbabwe Community Health Intervention Research (ZiCHIRe)

*Corresponding author

DOI: <https://doi.org/10.47772/IJRISS.2023.7492>

Received: 31 March 2023; Accepted: 17 April 2023; Published: 16 May 2023

ABSTRACT

Introduction: The aim of this study was to learn about the lives of people who lost loved ones to the coronavirus and were unable to carry out the customary funeral rituals or practices due to restrictions imposed by authorities. This study investigated the meanings that the bereaved assigned to funeral practices during the COVID-19 era, investigating the experiences of the bereaved in COVID-19 deaths, and to determine which alternative rituals could assist in coping with the loss of a loved one, and to investigate the concept of delayed rituals.

Methods: Qualitative method was used for this study, employing snowballing and purposeful sampling.

Results: The study came up with three different phases that were experienced by the bereaved families during the covid-19 pandemic, and these were, the phase before death and during illness; the phase after death and the initial rituals and the phase during the period of mourning.

Conclusion: There is need for people to draw a leaf from the lesson portrayed by COVID-19, the pandemic revealed that, once mourning has passed, most people are able to bounce back and move on with their lives.

Key Words: COVID-19 pandemic, funeral rituals, bereaved, culture, death.

INTRODUCTION

In every culture, religion, and way of life, death is inevitable, and when it happens, a funeral and burial or cremation usually ensues. The purpose and practice of funerals and other death rituals vary greatly across cultures and religions. In the Western world, normally the custom is to have a church service, then bury the deceased in the cemetery or have them cremated. After that, close friends and family go to the deceased person's home or family home with casseroles of food and sit and eat to comfort those who are still grieving.

In the majority of African countries, friends and family gather at the deceased person's home or family home for a wake, typically the night before the burial, where they would sing, dance, and give testimonials about the deceased. With most deaths, families and friends got together and offered their condolences and support to the bereaved. However, the coronavirus pandemic that ravaged the world in December 2019 marked a significant shift in the dynamics of all of these rituals. Numerous lives were lost as the number of

new infections grew each day. By mid-March 2021, countries around the world had reported more than 123 million cases and more than 2.7 million deaths due to the disease, according to the Committee for the Coordination of Statistical Activities (Morris and Ryan, 2021). World leaders were at their wits end regarding the rapid spread of the virus. There were lockdowns and restrictions placed to help combat the spread of the disease and naturally this affected how funerals were conducted. Due to the nature of the virus and the way it spread, traditional funeral practices were abandoned as these gatherings were regarded super spreaders of the disease (Adais & Panolong, 2022).

Those who contracted the disease could not be visited by family and those close to them to at least say goodbye before they passed away, and those who died after contracting the disease could not be mourned in the traditional manner. As the coronavirus continued to spread to all four corners of the globe, traditional funeral practices were abandoned, leaving the bereaved confused as to how to process their loss.

With the absence of the normal funeral and burial rituals the entire grieving and mourning process was thrown into quandary. In her work with dying patients at the University of Chicago, Elisabeth Kubler-Ross was the first to identify the five stages, which were thought to represent phases that all or most people went through when facing death (Kübler-Ross & Kessler, 2014). Denial, anger, bargaining, depression, and acceptance are the five stages of grief that were originally described and have become ingrained in our common understanding of mourning. Conventional funeral practices assist individuals in going through these steps; however, the absence of these practices may throw individuals into disarray and cause them untold psychological problems as they attempt to process and cope with their loss.

The study assisted researchers in enhancing the dynamics of therapy and, as a result, service delivery by helping them better understand the lived experiences of performing or not performing funeral rituals during COVID-19. As a result, it became possible to take care of the general population's mental health if service providers were aware of how particular phenomena affected individuals. Based on the findings of this study, new funeral practices may be implemented to assist individuals in processing and coping with loss.

Objectives:

The study's specific objectives were to

1. Investigate the meanings that the bereaved assigned to funeral practices during the COVID-19 era,
2. Investigate the experiences of the bereaved in COVID-19 deaths,
3. Determine which alternative rituals could assist in coping with the loss of a loved one, and to investigate the concept of delayed rituals.

Aim:

The study aimed to investigate the experiences of the bereaved following the loss of their loved ones to COVID-19.

METHODS:

The method of this study was qualitative. The researcher conducted the research adhering to the COREQ guidelines. Individuals' experiences with phenomena and the personal meanings they attach to them were the focus of a qualitative research method. The aim of the study was to learn about the lives of people who have lost loved ones because of coronavirus infection but were unable to carry out the customary funeral rituals or practices because of restrictions imposed by authorities and the disease's spread and high contagiousness.

The interpretive phenomenology research design was used in this study. Phenomenology's primary goal was to sum up the experiences of individuals with a phenomenon into a description of its universal essence. It captured the individual's interpretation of the phenomena's nature and significance. Phenomenology provided a wealth of data and a profound, in-depth understanding of a single phenomenon. However, data could be biased due to its subjective nature (Lawton, 2020). An interpretative phenomenological analysis is a collection of elements designed to analyse and explain an underlying structure in the stories people tell about their personal lived experiences (Pandey and Pandey, 2021).

It is explicitly idiographic in its commitment to investigating the specific details of each instance prior to making assertions of a more general nature. According to Snyder (2019), the IPA method is particularly suitable for investigating issues that are difficult to comprehend, perplexing, or emotionally charged. Death is an illustration of such a phenomenon because it is complex and involves psychological feelings that may be difficult to articulate.

The researcher used thematic analysis to look at the data. Data patterns (themes) can be identified, analysed, and reported using the technique of thematic analysis. It organises and describes the data set in (rich) detail. However, it frequently interprets various aspects of the research problem beyond this. Thematic analysis consists of the following six steps: familiarizing oneself with the data, creating the initial codes, looking for themes, looking over themes, defining and naming themes, and finally putting together the report are all steps in the process (Sileyew, 2019).

Procedure for the Research

The researcher began by obtaining permission to carry out the research from her institution. When permission is granted, the researcher approached the participants to explain the research and how it would be carried out. Informed consent was sought, and the participants were informed that they could withdraw at any time. After that, the researcher would set up appointments with the participants to conduct the interviews and request their permission to record and take notes.

(Pandey & Pandey, 2021) Data analysis is the process of going through organized material to discover the facts embedded in the material. To explore the new facts, the data are studied from as many angles as possible. In qualitative research, a variety of data analysis techniques are utilized. Thematic analysis, grounded theory, narrative analysis, content analysis, interpretive phenomenological analysis, and discourse analysis are all examples of these methods. Interpretive phenomenological analysis was used by the researcher. The goal of an interpretive phenomenological analysis is to comprehend the distinct experiences that individuals have with a phenomenon.

Population and Sampling

The researcher used snowballing and purposeful sampling. Purposive sampling, also known as judgment sampling, is the purposeful selection of an informant based on their characteristics. It's a non-random strategy that doesn't need any underlying concepts or a set number of informants. Simply put, the researcher determines the required data and seeks out individuals who, based on their expertise or experience, could and would provide it (Norble & Smith, 2021). By employing snowball sampling, the researcher was able to reach out to people whose loved ones had passed away as a result of COVID-19. Neighborhood residents were aware of the location of the COVID-19 death. Fifteen participants were selected by the researcher.

Instruments for data collection

The researcher made use of a semi-structured interview guide. In semi-structured interviews, a set of

questions for discussion is provided by an interview guide. An interview guide is a list of the top topics you want to talk about in the interview and the top questions the researcher wishes to ask. The design of the questions ensures that they address the research questions or objectives. However, there is freedom to ask questions in any order, veer off topic, or ask for additional information or clarification on previous responses. According to Nosek et al. (2018), semi-structured interviews help the interviewer direct the conversation. Due to their adaptability and freedom, the researcher used semi-structured interviews. The researcher appreciated the freedom to explore meanings as well as to rely on a guide to stay on course.

Trustworthiness and credibility

According to Wisker (2019), a study's credibility is evaluated when co-researchers or readers are shown the experience and are able to recognize it. Credibility is the "fit" between the opinions of the respondents and the way the researcher presents them.

According to Pandey and Pandey (2021), a research instrument's credibility is the extent to which it measures what it claims to measure. As a result, the meaning of the phrase is the degree to which a tool accurately asks the right questions. In this study, piloting was used to determine the content validity of the research instrument by comparing responses from respondents to the research objectives. For a research instrument to be considered legitimate, the material selected and discussed during the interview must be related to the variable being studied (Sileyew, 2019). A random sample of individuals who were not included in the final study was used for the pilot test. An expert's opinion was used to test the instrument's content credibility. The research expert independently evaluated the interview guide's items' credibility in relation to the research objectives.

Research Instrument Trustworthiness

The reliability of the interview as a research tool was evaluated through a test-retest method in which interviews were conducted with a group of participants whose characteristics were comparable to those of the actual sample size but who were not included in the final study. The test was given again two weeks later. This was done to check to see if the interview got the same responses each time. Consistency in the findings suggests that the interview was a useful research method.

Respondent Validation

Respondent validation requires research participants to respond to various forms of initial data, such as interview transcripts and first drafts of interpretive reports, to verify their accuracy and respond to the made interpretive claims. They then confirm the accuracy of the initial data collected and determine whether interviewees have more to contribute to the transcript once they have had more time to reflect on the topic at hand. They could also be asked if they thought the story that was coming out was a fair and reasonable representation of the situation as they saw it (Adais & Panolong, 2022). In order for some of the participants to verify the researcher's transcriptions, second interviews were conducted with them.

Ethical considerations

Autonomy is a principle that deals with the concept of independence. Its core is to provide an individual with the freedom of choice and action. The participants in the study were given the freedom to participate in the study or not to participate in the study, it was at their freewill and there was no coercion involved.

The participants were also informed that if at any point they felt they did not want to proceed they were free to pull out.

The researcher sought informed consent from all the participants, fully explaining to them how the research

worked, how it would be conducted and if they might be any harm that the participant might experience. A consent form was signed by each of the participants and the participant kept a copy for further reference.

The researcher discussed with the participants the limits to their confidentiality. The participants' privacy was to be maintained at all times, however; the participants were informed that the researcher had supervisors who would have access to their information because the researcher was a student. The researcher made sure that there was no harm whatsoever that would be caused to the participants.

Response rate

The researcher had initially targeted 15 families from Harare East neighborhoods in an effort to answer the research questions. The researcher was able to get in touch with 15 families from Harare East neighborhoods thanks to referrals and personal identification. Ten families, on the other hand, participated in the interviews; however, five of the families declined to participate, citing personal reasons. According to Saunders et al. (2019), a response rate of more than 60% is generally regarded as representative of the population, while a response rate of less than 60% is regarded as biased and not fully representative of the population as a whole. The researcher used the response rate as the basis for data analysis because, according to Saunderson's (2019) submission above, it represented the population accurately.

Characteristics of the demographics

According to Sileyew (2019), the demographics data provides information about the unit of data and aids in determining whether the study participants represent a balanced sample of the target population. Demographic data cannot be skewed because they are independent variables.

Gender

According to the findings, there were slightly more women than men in the family. In order to present a balanced view of both feminine and masculine perspectives, Sileyew (2019) asserts that contemporary studies must be gender sensitive. Considering this, the researcher gave a large number of reactions that were reflected by orientation balance in the examination on the perspectives on lived encounters of the dispossessed in the Coronavirus period.

FINDINGS

Lived experiences of the bereaved who failed to perform normal funeral practices after the death of a loved one due to COVID-19

Ten interviews were carried out of people who had lost their close family members. Two of them lost their wives, two lost their children, another two lost a parent, three lost their husbands and one lost a sister.

Denial and disbelief

Family members struggled to believe that their loved one had died. They indicated that they struggled to acknowledge their loved ones death because they could not view their deceased's body. They indicated that because none of the rituals associated with closure were not performed, the finality of death did not quite hit them. *I struggled to believe that my husband had died. I did not even see his face to be certain that he was dead. We took him to the hospital and next we received a call saying he was dead! He was not even that serious.*

We could not acknowledge the death. It seemed like they were lying to us. We did not fully understand yet

what covid was all about and why we could not view the body, yet the person was already dead. In our culture body viewing is a must. For us to acknowledge the death

Failure to move on

The study found that the families who did not perform funeral rituals failed to move forward because of the pain from the loss. They indicated that life had come to a standstill and that the suddenness and how the funerals were conducted left them stuck in a place they did not know how to come out. They indicated that they felt there was something else that needed to be done to mark the passing of their family member so that they could then proceed with life. From the interviews, one of the family members (Participant C) stated that:

I cry every day. I do not feel like I did right by my beloved only son. I did not even give him a proper funeral; everything was so rushed. I am in this place where I do not know how to come out of. I am in pain, and I cry every single day (Interview, October 2021)

Some of the bereaved indicated being stuck in sorrow of what did not happen and what they expected to happen more than what actually happened during the funeral. However, there were some who were saddened and distraught over how the funeral and burial were conducted which left both stuck and struggling to move on.

It is completely pathetic to bury someone without mourning them. I could not even process the fact that I had lost my loved one. I feel like I'm closed up in a bottle. At one moment she was tested, and the result was positive and the next she collapsed and died. We could not even bring her to lie in state at her own house. It is still painful for me to this day that my wife of 32 years died and I could not have others come over to cry with me. I am always sad there is nothing to be happy about in my life. I am cursed.

Withdrawal, Isolation, Shame and Guilt

Family members mentioned that the younger family members were also affected negatively by the COVID deaths. This was evident in how some kept to themselves or withdrew from socializing with others. They kept to themselves and did not want to interact much with others. The results also indicated that some family members stopped socializing and interacting with others because they blamed themselves for how things turned out or for the spread of the disease that caused their loved ones death. One participant was a nurse and could not shake the guilt off as she felt responsible for her husband's death.

My niece has failed to accept the death. She is always locked up in her room. She is a different person now. She was a happy and jovial child before her mother died, full of life and energy. It's all gone now. It is so sad (Participant G)

My uncle feels shame and guilt over the death of his wife. He feels he is somehow responsible for letting her catch Covid-19. He does not go to any family gatherings anymore. (Participant D)

I am a nurse, I brought this disease home. I should have been more careful and kept my family safe. I cannot even face his family and I always keep to myself. The guilt is just too much for me. I imagine what they are all saying and thinking. (Participant B)

Meanings assigned to the funeral rituals performed by the bereaved in the COVID-19 era.

From the interviews that were conducted it was noted that the majority of those interviewed felt that how funerals of those who had died of COVID-19 were conducted added to their pain and there was a lot of negativity associated with them. The burials were inhumane and not in any way cultural. Below are the

negative meanings associated with how funerals were conducted.

Lack of respect for the dead

Bereaved family members indicated that they felt there was no respect awarded to the deceased in terms of how the COVID-19 funerals were conducted. This was evident in how funerals were conducted, the time frames and how the bodies were handled. They indicated that there was not enough time for significant others to travel to bury their loved ones and some could not even make it. Being present for the burial of a close family member is a known way of paying last respects. Interviewees also mentioned that the mere fact that usual funeral and burial rituals were not performed, though this was for their protection was a major indicator of lack of respect

It is pointless to say we just bury someone for the sake of just burying them and then we bury them like a dog. We have a tradition and a culture for a reason (Participant A)

A bereaved family member (Participant J) stated that

Where do I even begin? It was as if my wife never mattered on this earth as if she was nobody. We practically just dumped her. Complete nonsense) (Interview, October 2021) (Participant J)

A two-minute event for 72 years of life. Really? (Interview, October 2021)(Participant E)

It was so disappointing. Everything was in shambles, the funeral was so disorganised, the body was lowered before we even got there. It was so shameful for someone of her stature to be buried like that. (Interview, October 2021) (Participant D)

Cultural decadence

Bereaved family members mentioned that, the way COVID 19 had brought changes to funerals and burial rituals was going to lead to cultural decadence. The bereaved did not see funeral rituals normalising anytime soon since COVID-19 seemed to be around for a while and hence the new rituals were going to become the norm. They believed that the lack of rituals might be the beginning of a process of eroding current cultural values. Below are the participants' views. The use of social media though embraced by some as they could hold virtual funerals, was the beginning of a new culture that some feared would be embraced even after COVID (if ever it came to an end).

We shall forget proper funeral rituals because of covid. Will it come to an end? Is this how we shall all be buried?)(Participant J)

People now use Whatsapp to express their condolences, proper culture is not important anymore) (participant J)

Covid is taking our culture away, some people do not even bother to attend funerals anymore even when restrictions have been relaxed. It is changing us as a people (Participant I).

Using social media platforms is not for us black people. It's too English and it takes away the intimacy. (Participant G),

Alternative rituals

The COVID-19 pandemic appears to be an on-going pandemic and its effects will continue to take a toll on individuals, hence the need to come up with alternative rituals that may become acceptable and become the

new normal for dealing with funerals. Alternative rituals are different ways of conducting COVID-19 funerals that may assist the bereaved in dealing with the death of their loved ones.

Use of Social Media and virtual technology

Social media platforms were the alternatives of choice, which is mostly Facebook and whatsapp. Some of the bereaved were quick to adopt the use of social media though there were challenges that they encountered. However, evidence from the interviews indicated that not all the alternative rituals were viable options for different individuals. The younger family members were open to the use of social media but the elderly struggled a bit. A certain elderly family member felt disrespected when people were paying their condolences over the phone or on whatsapp and not doing it in person. Some indicated interruptions in network disrupted proceeding, hence they did not have kind words for social media platforms.

We just used WhatsApp to communicate and schedule video calls, though the network at times was bad and calls dropped. We also streamed live on Facebook. (Interview, October 2021)

We recorded the funeral and shared the discs with the people who were not present to see how the funeral went (Participant B)

We could not afford to use the social media platforms (Interview, October 2021) (family I)

It felt as if we did not organise the funeral well. The network played up on us and we could not live stream. I was so embarrassed later trying to explain to people that it wasn't because we could not afford to live stream, but it was the network. His family were disappointed in me. (Participant E).

We did a virtual funeral. We all attended virtually (Participant F) (Interview, October 2021)

Vana vakaita live streaming kuti vamwe vavo vaone. (The children organised live streaming so that others could also watch) (Participant D)

The head of Family G stated that:

We recorded the funeral and also did live streaming (Interview, October 2021)

Fear and Anger

Most of the bereaved family members mentioned that there was so much fear and uncertainty surrounding the whole COVID -19 pandemic. They were uncertain of what the future held for them, if they were going to be next to die since some had come in contact with the deceased, if the pandemic was going to end, if they fell sick would they be able to get help from anywhere and if the disease would be contained. Some of them also indicated that they had so much anger as they felt responsible authorities were not doing much to control the situation and it felt like falling into a bottomless pit.

Stigma and complications in social interaction.

Negative and sometimes even hostile behaviour from neighbours, friends and other relatives was mentioned by the bereaved, this was due to their fear of contracting the virus. If a person tested positive and died, the bereaved family would be stigmatised if they were affluent because initially it was perceived as a disease for the affluent. A positive case in the community would be shunned and when death occurred the place would be quiet and isolated which is different from the norm when there is a death in the neighbourhood. .

DISCUSSION

The study indicates that the bereaved' experiences with family loss during the COVID-19 pandemic varied. There are three phases that can be discussed pertaining to these experiences: 1) the phase before death and during the illness; 2) the phase after death and the initial rituals; and 3) the phase during the period of mourning, this is indicated by Morris and Ryan, in their study (2021). The prevalence of the coronavirus resulted in restrictions and the bereaved feared becoming infected, this caused confusion and pain during the initial stage. Due to the inability to perform traditional burial ceremonies and the absence of social support to express grief to family, loneliness and isolation became a major aspect of death. Even though the bereaved might have needed to be with other people, the situation didn't permit they sought solace elsewhere or suffered alone and maybe ended up with complicated grief.

Kubler Ross's theory on the five stages of grief resonates well with the findings of the study, especially the denial stage. According to this theory, people may not initially be able to accept that their loved one has passed away as a means of coping or as a defense mechanism. This was not unique to the Zimbabwean setting alone, but literature indicates that people in other parts of the world also experience denial upon losing a loved one. However, this was more so because of the circumstances that surrounded COVID-19 deaths. Denial therefore is a reaction that can be generalized to the entire world.

As individual go through the grieving process, love and support from others using culturally appropriate and relevant methods is integral. Some bring food and spend time with the grieving, others celebrate with song and dance, and still others hold all night vigils. With COVID-19 people have been forced to observe social distance, to isolate, to limit the number of attendees and at times lockdowns have been implemented to prevent people from travelling. This resulted in emotional and psychological devastation of those who were grieving their loved ones. A lot more have failed to find closure. In addition, the study's findings corroborate those of Maddrell (2020), who posits that because funerals could not accommodate more than twenty people, only immediate relatives who were healthy enough could attend. This made the event more intimate, and this would work well in western cultures but not in African cultures where there is Ubuntu and a high sense of community

Collective grief and culturally appropriate funeral and burial rituals during the death and burial of a loved one form part of the healing process for many Africans in various contexts. The study, lends credence to the bereavement theoretical framework, which holds that the bereaved seek assurance through the execution of meaningful funeral rites and the respectful departure of loved ones in a manner that leaves them with the impression that they have done justice to the deceased. This helps to kick start the healing process for most.

During the COVID-19 era, the use of technology played a huge role during the illness and funerals of loved ones. People who were unable to get together before because of restrictions could now connect and share their sorrow and show support. Zimbabwean diaspora residents, for instance, were able to virtually attend funerals or communicate with loved ones while isolated or quarantined. Though appears to be a good alternative, the current study found that people had mixed feelings and reactions to it. Even though technology is now widely used, not everyone has easy access to it. There are problems with connectivity due to a weak network, the cost of internet services, and the availability of compatible devices for mourners, among other things. The upper and lower classes of society then become distinct, but both had the same emotional and psychological responses to death, and both needed to process their losses, but the economic differences made the determination.

Lack of preparation for death, excessive stress at the time of death, an avoidable death, and low perceived social support after death may all lead to unresolved and difficult mourning (Stroebe and Schut, 2021). The study indicates most of the bereaved appear to have all of the aforementioned characteristics because of the

limitations imposed by the COVID-19 pandemic. The study was successful in examining the lived experiences of mourners during the COVID-19 epidemic. These include, but are not limited to, loneliness and the absence of funeral rites. As a result, family members have turned to technology and social media to participate in the funeral and pay their last respects to the deceased. Compatibility with Kubler Ross' stages of grief and the dual process of coping and bereavement has been emphasized in the findings.

Funerals are occasions for remembering loved ones and saying goodbye to them. For instance, Maddrell (2020) asserts that a typical eulogy for a funeral tries to draw attention to significant occurrences in the life of the deceased as well as the most obvious traits that they possessed. Because it tends to bring up more personal, intimate memories, this is helpful for mourners. Numerous mourners would informally share their memories of the deceased following the service. As a result, this part of the funeral helped people who are grieving remember the person who died. The funeral was brightened when people who were close to the deceased began to imitate their actions and laugh and joke about the things they used to do before they died.

When a person passed away, it could be difficult to psychologically acknowledge the loss because rituals were delayed or absent. Because physical death was not accompanied by social and psychological death, which may have caused people to struggle with their mourning process, sudden and unexpected deaths prevented mourners from preparing for the loss. These obstacles could lead to so-called complicated grieving when they were intense.

CONCLUSION

Rituals are portraits of cultural performances and rites of passage that mark a people's life journey. Rituals, when properly understood, are an expression of people's thoughts, emotions, social organization, and cultural identities. As a result, they are regarded as viable scientific methods of connecting and conversing. In the African culture funerals may be termed social events, where people come from far and wide to pay their last respects and to offer comfort to the grieving. Failure to perform such rituals or performing them in unfamiliar ways influences the mourning and grieving processes of individuals. However, in pressing times the human mind may be prompted to come up with alternative ways to perform these rituals. Society has learnt that grief is transient, even when we are in the midst of its clutches. People should expect to fluctuate between moments of sadness and mourning, and moments of acceptance or even happiness. The pandemic taught people to confront the frailty of attachments to other humans as well as places during bereavement. Going forward, people may mourn their loved ones in small numbers, with many people conveying their condolences on social media due to adaptation to the new norm. It is through the pandemic that people have learned to mourn their departed loved ones through social support networks, phone calls, text messages, video chats and social media. It suffices to say that these lessons would continue even after individuals emerge from the pandemic, scarred by its brutalities.

REFERENCES

1. Adais, F.D. and Panolong, K.S., 2022. Language Theses and Dissertation Landscapes: An Analysis of Research Analyses. *Canadian Journal of Educational and Social Studies*, 2(4), pp.1-22.
2. Burrell, A. and Selman, L.E., 2022. How do funeral practices impact bereaved relatives' mental health, grief and bereavement? A mixed methods review with implications for COVID-19. *OMEGA-Journal of Death and Dying*, 85(2), pp.345-383.
3. Harris, D., 2019. *Literature review and research design: A guide to effective research practice*. Routledge.
4. Harrop, E., Mann, M., Semedo, L., Chao, D., Selman, L.E. and Byrne, A., 2020. What elements of a systems' approach to bereavement are most effective in times of mass bereavement? A narrative systematic review with lessons for COVID-19. *Palliative medicine*, 34(9), pp.1165-1181.
5. Kübler-Ross, E., and Kessler, D. (2014). *On grief and grieving: Finding the meaning of grief through*

the five stages of loss. Simon & Schuster.

6. Lichtenthal, W.G., Roberts, K.E. and Prigerson, H.G., 2020. Bereavement care in the wake of COVID-19: offering condolences and referrals. *Annals of Internal Medicine*, 173(10), pp.833-835.
7. Maddrell, A., 2020. Bereavement, grief, and consolation: Emotional-affective geographies of loss during COVID-19. *Dialogues in Human Geography*, 10(2), pp.107-111.
8. Morris, S.E. and Ryan, A.K., 2021. Bereavement via Zoom during COVID-19. *Journal of psychosocial oncology*, 39(3), pp.316-319.
9. Noble, H., and Smith, J. 2021. Issues of validity and reliability in qualitative research. *Journal of Evidence Based Nursing*, 18, 34-35.
10. Nobre, H., and Silva, D. 2017. Social network marketing strategy and SME strategy benefits. *Journal of Transnational Management*, 19, 138-151.
11. Nosek, B., Ebersole, C., DeHaven, A.C, and Mellor, D.T. 2018. "The Preregistration Revolution." *Proceedings of the National Academy of Sciences 2017*: 201708274.
12. Pandey, P. and Pandey, M.M., 2021. *Research methodology tools and techniques*. Bridge Center.
13. Pearce, C., Honey, J.R., Lovick, R., Creamer, N.Z., Henry, C., Langford, A., Stobert, M. and Barclay, S., 2021. 'A silent epidemic of grief': a survey of bereavement care provision in the UK and Ireland during the COVID-19 pandemic. *BMJ open*, 11(3), p.e046872.
14. Saunders, M., Lewis, P. and Thornhill, A. 2019. "Research Methods for Business Students". 8th edition: Pearson Education Limited.
15. Selman, L.E., Chao, D., Sowden, R., Marshall, S., Chamberlain, C. and Koffman, J., 2020. Bereavement support on the frontline of COVID-19: recommendations for hospital clinicians. *Journal of pain and symptom management*, 60(2), pp.e81-e86.
16. Sileyew, K.J., 2019. *Research design and methodology* (pp. 1-12). Rijeka: IntechOpen.
17. Snyder, H., 2019. Literature review as a research methodology: An overview and guidelines. *Journal of business research*, 107, pp.333-339.
18. Stroebe, M. and Schut, H., 2021. Bereavement in times of COVID-19: A review and theoretical framework. *OMEGA-Journal of Death and Dying*, 82(3), pp.500-522.
19. Wisker, G., 2019. Developing scientific thinking and research skills through the research thesis or dissertation. In *Redefining Scientific Thinking for Higher Education* (pp. 203-232). Palgrave Macmillan, Cham.