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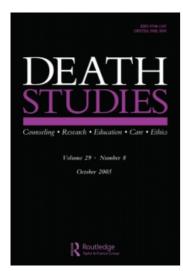
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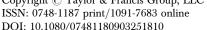
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PREVALENCE AND SEVERITY OF COLLEGE STUDENT BEREAVEMENT EXAMINED IN A RANDOMLY SELECTED SAMPLE

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The authors used stratified random sampling to assess the prevalence and severity of bereavement in college undergraduates, providing an advance over findings that emerge from convenience sampling methods or from anecdotal observations. Prior research using convenience sampling indicated that 22% to 30% of college students are within 12 months of having experienced the death of a family member or friend. Using an ethnically diverse sample from a private, Midwestern university, 118 randomly selected students answered demographic and life experience questions and indicated whether a family member or friend had died within the last 24 months. Those who reported experiencing such a loss also completed the PG-13, a questionnaire used to assess prolonged grief disorder. Results indicated that 30% of the sample was within 12 months of experiencing a loss and 39% was within 24 months of experiencing a loss. Two of the students bereaved at 12 months (1.7% of the sample) were classified as having prolonged grief disorder. A limiting factor in this study is the homogeneity of the sample in terms of geographic location and religious preference. The authors concluded that a significant portion of college students are bereaved at any given time, confirmed previous estimates of the prevalence rate, and noted university assistance may be needed to prevent academic decline.

Bereavement among traditional age college students (i.e., persons between 18 to 23 years of age) is more prevalent than many persons suspect. Counseling and clinical psychologists and professors

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from several universities have indicated bereavement presents "a defining issue in the lives of no less than 40% of the students on the campus" (Balk, 2008, p. 6). LaGrand's (1986) survey of college students in the state of New York first disclosed the prevalence of students' diverse personal losses, such as the loss of a cherished ideal, loss of self-respect, the end of a love relationship, and the end of a friendship. The highest percentage of respondents—nearly 30%—reported the death of a loved one.

Some students experience the death of a fellow student while attending college. Deaths of college students each year range from as low as 5,000 to as high as 18,750 (Wrenn, 1991). More recent epidemiological research into suicide has raised consciousness that approximately 8 students per 100,000 take their own lives each year (Haas, 2004). Deaths of students are bound to affect classmates and contribute to the overall prevalence rate of bereavement in the lives of college students.

A five-semester longitudinal trend study (Balk, 1997) examined the prevalence of college student bereavement over the deaths of family members and/or friends. Gaining access to a large undergraduate survey course on human development and the family, Balk obtained participation from 994 students, nearly 69% of the total course enrollment over five semesters. The respondents were asked if a family member had died and if a friend had died, and if so, when the deaths had occurred and the cause of death. The great majority of respondents (81.8%) reported deaths of grandparents, and nearly 20% reported the deaths of immediate family members. While the average length of time since the death of a family member was over 4 years, 29.4% of the students reported that a family member had died within the past 12 months. Most of the deaths of family members were due to illness. Further, a majority (59.8%) reported a friend had died. While the deaths of friends had occurred on average 2.5 years ago, 27% said a friend had died within the past 12 months. The majority of friend deaths were due to vehicular accidents, but some were due to cancer, some to suicide, and some to homicide.

Balk's (1997) use of a convenience sample prevented generalizability of the results. Other estimates of prevalence of college student bereavement have come from convenience samples as well as from clinical observations of college counselors (Floerchinger, 1991; Hardison, Neimeyer, & Lichstein, 2005; LaGrand, 1986).

While offering consistent findings of a 22–30% prevalence rate for first year bereavement, these findings can be questioned due to the limitations of non-randomized research methods. Because colleges keep enrollment databases, sampling frames are available to obtain randomly selected samples and thereby produce data that identify convincingly the prevalence rates of bereavement among college students.

In addition to wonders about prevalence of bereavement, there are also questions about the severity of the bereavement college students experience. The effects of normal bereavement are more intense and longer in duration than the newly bereaved typically anticipate and than unaffected outsiders appreciate (Balk, 1997; Bonanno, Moskowitz, Papa, & Folkman, 2005; Freud, 1917/1957; Silver & Wortman, 1980). And yet, in addition to the stressors of normal bereavement, there are instances of bereavement that elicit complicated grief reactions, resulting in agitated depression, chronic illness, enduring and intense clinical reactions, such as guilt, suicidal ideation, serious sleep difficulties, marked neuroendocrine and immune system reactions, and significant disturbances in self-esteem, job and school performance, and interpersonal relationships (Lindemann, 1944; Osterweis, Solomon, & Green, 1984; Prigerson & Jacobs, 2001; Prigerson, Vanderwerker, & Maciejewski, 2008). One way to understand complicated grief reactions is to see them as acute grief that never lessens.

Bereavement places college students at risk of doing poorly in their academics, dropping out of school or being expelled, and undermining career development (Balk & Corr, 2001; Balk et. al., 1998; Servaty-Seib & Hamilton, 2006; Silverman, 1987). Situational factors (e.g., the mode of death) present clear risk factors for bereavement outcome (Moos & Schaefer, 1986). Unanticipated negative outcomes of bereavement can include secondary losses and incremental grief (Oltjenbruns, 1996, 2001). Unaffected friends fear coming into contact with a grieving college student, frequently dismiss the intensity and duration of grief, find a person's ongoing grief both disquieting and wearisome, and shun the griever (Balk & Vesta, 1998).

Students are at risk of declining in educational performance, particularly during the semester of the bereavement loss (Servaty-Seib & Hamilton, 2006). Unfortunately, many students may be geographically distant from their usual support systems

(Schnider, Elhai, & Gray, 2007), which otherwise could help students mitigate the negative educational effects of the stress of bereavement. Many students do not see themselves as needing help in dealing with their loss (Balk, 2008) and are thus not likely to complain to physicians or counselors about grief but instead about insomnia (Hardison et al., 2005), lack of motivation, inability to concentrate (Janowiak, Mei-tal, & Drapkin, 1995), and anxiety. Because the likelihood of a drop in a students' educational performance increases during this time (Servaty-Seib & Hamilton, 2006), universities may be interested in knowing the prevalence of bereavement and the severity of the problem.

Method

Sample

Data collection occurred at a private, Midwestern university. The Institutional Review Board at the appropriate institutions approved the study. The sampling frame included a list provided by the university registrar of all undergraduate students between the ages of 18 to 23. Drawn randomly, the sample was stratified by student's year in school, 433 students were contacted, and 118 agreed to participate, resulting in about a 27% response rate. Of these 118 students, 41% were men and 59% were women. The sample consisted of 69% White Non-Hispanics, 12% African Americans, 3% American Indians, 3% Asian Americans, 4% Puerto-Rican/Hispanics, and 9% from several other racial/ethnic identities. Most participants, 111 of 118 (94%), were Protestants, whereas 1 was an Orthodox Catholic, 1 was a Roman Catholic, and 5 indicated no religious preference.

Measures

DEMOGRAPHIC AND BACKGROUND QUESTIONNAIRE

Students provided information about their age, gender, racial/ethnic identity, religious affiliation, and types of losses including deaths. If the respondents reported that someone had died, the following grief and loss information was also collected: age and gender of the deceased, type of relationship, when the death occurred, and cause of death.

PG-13

Prigerson et al. (2008) revised and shortened the Inventory for Traumatic Grief into a 13-item questionnaire that can be used to measure complicated grief and diagnose prolonged grief disorder. The 13-item self-report instrument measures prolonged grief disorder using the following criteria: bereavement; separation distress; certain cognitive, emotional, and behavioral symptoms; and duration of at least 6 months. All students who reported the death of a family member or of a friend completed the PG-13. In cases of multiple losses, the participant was asked to document each, and then fill out the prolonged grief disorder questionnaire in terms of the death that had the greatest impact.

Procedure

After drawing stratified random samples using a table of random numbers, the researchers contacted students via telephone and e-mail message and informed them of the study, its purpose, and the request for their participation. If students did not respond to the original contact or two follow-up emails, no further attempts were made. All data collection took place in the same classroom. Following completion of the questionnaires, students received a gift card of \$22.50 to Barnes and Noble as compensation for their participation in the study. To obtain the targeted sample size, four samples ($n_1 = 54$, $n_2 = 27$, $n_3 = 14$, $n_4 = 23$) were randomly drawn at different time periods throughout the data collection procedure (September 2007 to April 2008). A chi-square test of independence between samples established that the four samples did not differ and could be treated as a whole.

Results

Other than a loss due to death, the types of losses experienced by students varied considerably. Of the 118 participants, 21 indicated recently experiencing the loss of a pet, 8 of physical function, 15 of a job, 18 of material goods, 15 of a cherished ideal, 9 of self-respect, 2 of an ability, 2 of parental divorce, 25 of a relationship, 27 of a friendship, 29 of a separation, 25 of a grade, and 18 of "other" types of losses. The initial research question investigates the prevalence of bereavement in college students at any given time.

The prevalence of bereavement in college students who completed the questionnaire in the first data collection was 28% (n=11) at 12 months and 40% (n=16) at 24 months; in the second data collection, 29% (n=7) and 46% (n=11), respectively; in the third data collection, 39% (n=11) and 43% (n=12), respectively; in the fourth, 23% (n=6) and 27% (n=7), respectively. Overall, 30% of the 118 participants were in the first 12 months of bereavement, and 39% of the participants within 24 months.

The distribution of relationships for the 35 participants (29.7% of the 118 participants) who were bereaved within the past 12 months is as follows: 21 friends; 10 grandparents; 6 aunts, uncles, and cousins; 3 extended family members; and 2 parents. Of those 46 participants (39% of the 118 participants) who were bereaved within 24 months the distribution is as follows: 25 friends; 12 grandparents; 10 aunts, uncles, and cousins; 5 extended family members; and 2 parents. No children or siblings had died. One participant who was bereaved within 24 months provided no data on relationship with the deceased. Note that some participants experienced more than one death (see Table 1).

The participants indicated that 29 friends or family members died from illness, 8 from accident, 6 from murder, 4 from suicide, 2 from "old age," 2 from drug/alcohol related issues, 3 did not know the cause of death, and 1 did not provide data on cause of death. Two females who were within the first 12 months of bereavement

TABLE 1 Frequency Count and Percentage of Students' Relationship to Persons Who Had Died in the 12- and 24-Month Time Periods

	Bereaved within 12 months $(n=42)$		Bereaved within 24 months $(n=55)$	
Relationship to participant	n	%	\overline{n}	%
Friend	21	50	25	45
Grandparent	10	24	12	22
Aunt/uncle/cousin	6	14	10	18
Extended family members	3	7	5	9
Parents	2	5	2	4
Siblings	0	0	0	0
Children	0	0	0	0
Not reported	0	0	1	2
Total	42	100	55	100

were identified as having prolonged grief disorder. Of these 2 participants, one had experienced both the death of a grandparent due to illness and a friend due to accident, and the other had experienced the death of a friend due to suicide. The prevalence of prolonged grief was 1.7% for the total sample (i.e., 2 out of 118).

Conclusion

This study replicates findings from Balk's 1997 study which found that 22% to 30% of college students were in the first 12 months of bereavement. In fact, that prevalence rate could be understated because the rate determined in the current random sample averaged 30% over the entire study and as high as 39% in one quarter. Because a significant proportion of college students are grieving a recent death (i.e., within the last 12 to 24 months) and prior studies have indicated that educational performance of these students tends to drop (Servaty-Seib & Hamilton, 2006), it is logical that universities concerned with the academic outcome and success of their students will be interested in this finding (Balk, 2001). Some universities may find it worth investing in programs or interventions that specifically target some of the potentially negative outcomes of bereavement. As Servaty-Seib and Hamilton (2006) suggested, these interventions should be swift to reach students when acute grief most hinders their performance and when students are most in need of and most amenable to accept relevant assistance (such as extra time to complete course assignments and access to drop-in, peer-run support groups).

Although this study's random sampling procedures provide more certain estimates of prevalence than those garnered with convenience sampling, the results on severity of college student bereavement may not have been as clear, in that severity may have been underreported. The relatively low rate of prolonged grief disorder could be due to the challenges of self-report data, particularly with a group such as college students who are known as seeing themselves as not needing help (Balk, 2008). Those who are at greatest risk of developing prolonged grief disorder may be either unwilling to respond to requests to participate in a study on grief or unable to respond, possibly because of dropping out of school. Perhaps students with prolonged grief disorder are too traumatized to respond to research requests, do not open or answer emails, or

have withdrawn from social contact. Unfortunately, those who are experiencing the most severe symptoms are the least likely to be represented in this study.

Other explanations must be considered, however. Some colleagues have questioned if college students' resilience buffers them from prolonged grief disorder. We are hard pressed to believe that somehow college students are immune or exempt, though it is possible that the frequency of occurrence is lower. Personal relations with students whose acute grief has remained intense over time assure us that prolonged grief disorder does apply to some college students. It may be that adults' prolonged grief looks different than college students', in which case a different means than the PG-13 of assessing college students' prolonged grief could be needed. Guidance in the matter may come from Rubin and his colleagues (Rubin, Malkinson, & Witztum, 2008) in their application to prolonged grief disorder of the Two Track Model of Bereavement. In short, further research should be directed toward more clearly understanding the phenomenology and the severity of college student bereavement.

The current study is potentially limited in generalizability of the findings due to the homogeneity of geographic location and religious preference. Including additional universities in diverse locations would improve representativeness of the sample. Preliminary results of a related study in another location, however, are indicating similar prevalence rates (Noppe, Linzmeir, Martin, & Wisneski, 2008). Other than relationship, the demographic sheet did not ask for degree of closeness of the participant to the deceased; thus, the sample could possibly represent a diverse degree of losses from less significant to devastating. Establishing college students' closeness to the deceased and the influence on bereavement over time, perhaps by an estimate of attachment bonds, presents a problem for researchers to consider.

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