“He Wasn’t Supposed to Die:” How College Students Coping with Peer Loss Differ from Other Groups of Grievers

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Introduction

In the spring of 2023, I suffered two peer losses. Though I had grieved older relatives, I had never lost someone particularly close to me before and never someone my age. I wasn’t sure what I was supposed to do, how I was supposed to act, or how I could continue on as a student. I felt intensely isolated in my feelings, certain that no one could ever comprehend the deep pain I felt. Desperate to understand how to move through my grief, I tried a variety of ways to cope: I visited a Presbyterian Church multiple times despite not believing in God, I tried talking with friends, I tried going out, I tried numbing my feelings, I looked online at posts and forums discussing grief and how to move through it, and I flipped through the self-help books my mother gave me, but I couldn’t bring myself to read them. No matter what I tried, my methods could not adequately address my emotions. Above all, I wanted to find someone like me who could validate my feelings and show me how to grieve.

I had suspected that joining a support group would provide me with the answers I was looking for. I looked for a group specifically dedicated to helping young adults and/or college students, but I was unable to find any such group nearby, nor could I find any online groups that were currently in operation. Instead, I joined a bereavement group that welcomed adults of all ages. To my surprise, however, I was the youngest person in attendance by far; the most common age for attendees was in the late 60s or early 70s. Since bereavement carries some similarities across all age groups, I found some comfort in attending, but it also deepened my sense of disconnect due to my age and the nature of my relationship to the deceased. My positionality as a college student, both temporally and spatially, made my bereavement feel very different from theirs.

Eager to understand why the traditional systems of grieving didn’t fulfill me, I began to explore how my specific experience of peer loss in college differed from the broader grief experiences that I read about in the literature. I found it sociologically interesting that grievers who were my age and in my situation didn’t feel like their experiences aligned with those of other grievers. When I pursued my curiosities, I noticed that information on and support for young adults grieving the loss of a peer was limited. I decided to conduct my own qualitative study to represent the experiences of people in similar positions to my own.

Though I knew my experiences had differed from other grievers, I still expected to ground my findings in existing grief literature. In my initial background research, I noticed the importance of ritual to grief in the traditional, theoretical, and modern sense of the term. Given ritual’s repeated prominence, I had assumed its importance would translate to younger grievers and show similar patterns among my respondents, but this was not the case. Most respondents showed little interest in discussing their rituals explicitly, especially in the traditional sense of the term. Funerals or memorial services hardly ever came up more significantly than a passive comment and when asked further, people had little to add. Respondents had much greater inclinations to share how they felt about what happened, how those feelings manifested, how they coped with those feelings, and how those feelings changed over time or affected their other relationships.

Additionally, the literature’s characterizations of grief often took a familial or partner-based approach to loss which excludes people grieving peers. The literature emphasized object and place as relevant to grieving, given the up-and-down nature of familial structures which naturally promote passing items down or tying familial or cultural importance to a specific site. Conversely, my research focuses on peer losses, meaning the relationships are horizontally oriented and aren’t structured for passing down remembrance symbols.
In the end, my research focus shifted from an examination of young peoples’ rituals in response to death transitions, to a broader examination of how college students suffering peer loss grieve differently from other bereaved populations.

The Sociology of Grief

Grief theory’s limited scope is partially because the sociological study of death more generally is relatively new. In the 1983 Annual Review of Sociology, John W. Riley Jr. wrote that “no satisfactory ‘sociology of death’ has yet been written” (Riley, 1983). Much of the literature on death and grieving tends to be in one of two categories: death circumstances involving suicide or a general category of deaths not attributed to suicide. The foundations of sociological theories of death prioritize the study of suicide over other types of death, with notable contributions from theorists like Émile Durkheim in his work Suicide: A Study in Sociology (1897). Durkheim defines suicide for us through four different classifications: anomic, altruistic, egoistic, and fatalistic. Durkheim’s explanations help us understand why people commit suicide, but they don’t explain the after-effects for those close to the deceased or how people conceptualize their loved one’s passing. While theories like his are beneficial foundationally, they fail to situate grievers into his theory of death.

Understanding the impact of suicide on survivors is particularly important for young adults. After unintentional injuries, suicide is the second leading cause of death for people aged 10-24, accounting for 17.3% of deaths in that age group (Thai et al., 2018). The United States has seen a 30% increase in suicide rates from 2000 to 2016 across all age groups, but researchers are particularly concerned for adolescents and young adults given increases in “social media use, anxiety, depression, and self-inflicted injuries” among their age group (Miron et al., 2019). Increases in premature deaths involving young people subsequently increase the number of young mourners.

More recently, economists Anne Case and Angus Deaton coined the term “deaths of despair” to describe more widely “increase[s] in mortality attributed to drug overdose, alcohol-related liver disease, and suicide in the United States (USA) during recent years” which usually corresponded to class inequalities and other social determinants (Beseran et al., 2022). The newer literature still focuses on death as either the “fault” of the individual or not, but the types of deaths that can be considered individual faults have expanded to include people who inadvertently “kill themselves” slowly. Like deaths by suicide, the stigma surrounding “deaths of despair” questions the morality of the deceased. In opposition to “deaths of despair,” death theorists have referred to accidental or timely deaths as “good deaths” or “successful deaths.” According to Meier et al. (2016, p. 261), there are “11 core themes of good death: preferences for a specific dying process, pain-free status, religiosity/spirituality, emotional well-being, life completion, treatment preferences, dignity, family, quality of life, relationship with healthcare providers.”

After the death occurs, the cycle of grieving is generally understood to begin with a phase of shock or denial, then a period of sadness (also known as the acute phase of grief), then finally acceptance in which the griever finds a way to preserve the connection they had with the deceased while being able to move forward with their lives in ways that do not involve them (The Recovery Village, 2023). Most theories following this staged format stem from Elisabeth Kübler-Ross’ five stages of death: denial, anger, bargaining, depression, and acceptance, from her book On Death and Dying. Many scholars have developed subsequent models with Kübler-Ross’ model as a basis. Some scholars credit her work with creating a “cultural shift” around conversations regarding

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1 Also referred to as the sociology of death, dying, and bereavement in annual reviews.
death and dying since her work encourages people to talk openly about the previously taboo subject (Tyrrell et al., 2023). Kübler-Ross later released a sequel with David Kessler in 2005, *On Grief and Grieving*, which applied her original model towards grief rather than death and adopted the five stages as grieving patterns. Again, Kübler-Ross’ model inspired a trend of alternative paradigms in similar styles to the original model. Though the stages are often interpreted as linear and objective and criticized for being so, Kübler-Ross herself contends that grieving is a highly individualized experience.

Much of the older literature on death focuses on grieving as a cultural practice or a state of being rather than examining how it impacts different groups of people, thus limiting college student representation in both theory and data. However, studies focusing on college students’ bereavement are becoming more common given the frequency of grieving on college campuses. Bereavement is “one of the most reported stressors” for college students which impacts both their physical and mental health. An estimated “30%–55% of undergraduate and 27% of graduate students have experienced bereavement within the last 24 months” (Hay et al., 2022). By the end of their senior year, nearly 60% of students will experience a loss of either a family member or friend since the beginning of college (Cox et al., 2015). Of those 60%, an estimated 1 in 10 will lose a peer (Cox et al., 2015).

The grieving process can be extremely detrimental to students’ social, emotional, and physical health while having lasting impacts on their academic development (Bistricean et al., 2021). Grieving students can experience "impaired cognitive functioning" resulting in memory failures, difficulty focusing, identity crises, and emotional side effects including dysphoric negative feelings (Bistricean et al., 2021). Due to difficulties that arise in response to grief, students' academic lives suffer. Grieving students tend to have “lower GPAs, fewer completed credits, higher likelihood[s] of being placed on academic probation, and increased risk[s] of dropping out” (Bistricean et al., 2021).

For many students, the grieving process will be temporary, generally subsiding within six months after the loss, but some students may enter a “chronic state of mourning” known as complicated grief (Cox et al., 2015). Those who develop complicated grief may have symptoms including “yearning for the deceased, emotional numbness, and agitation” (Cox et al., 2015). Complicated grief affects people physically, mentally, and socially, occurring more often in females and older people (Mayo Clinic, 2024). When left untreated, complicated grief can lead to side effects such as physical illness including heart disease, cancer, or high blood pressure, as well as sleep disturbances, substance abuse, and depression/suicidal thoughts and tendencies (Mayo Clinic, 2024).

Some scholars theorize that losses can change the psychological and social functioning of people. After a loss, people’s behaviors may undergo dramatic changes. Some individuals may experience a positive life change after going through a traumatic event or crisis, a phenomenon coined “posttraumatic growth” by Richard Tedeschi and Lawrence Calhoun in the mid-1990s. Posttraumatic growth doesn’t discount negative experiences as the result of trauma nor does it replace them, but it offers a parallel process to the negative psychological effects (Kadri et al., 2022). Tedeschi et al. (1996) offer a 21-item scale that includes factors such as “New Possibilities, Relating to Others, Personal Strength, Spiritual Change, and Appreciation of Life.” “Women tend to report more benefits than do men, and persons who have experienced traumatic events report more positive change than do persons who have not experienced extraordinary events” (Tedeschi et al. 1996). The concept of “personal growth” after a loss is derived from posttraumatic growth,
referring to the understood positive outcomes in life aspects and their ability to overcome challenges following a significant loss (Tan et al., 2021).

**Situating My Study in the Literature**

In addition to the limited amount of grief literature that centers on young adults, there are also severe gaps in the literature when it comes to the type of relationship between the griever and the deceased. Though peer loss is relatively frequent, literature that focuses on college students experiencing grief rarely makes the distinction between familial and peer losses. This is most likely the case because deaths of people aged 15-24 only account for 1.4% of all deaths (Thai et al., 2018). As a result, the bulk of the literature on young adult grief focuses on familial relationships (often referring to their “loved ones”), and usually defaults to a parental relationship. The focus on familial losses can be explained for one of two reasons. First, death is often conceptualized as impacting older adults, not young adults, and second, peer relationships are not perceived to be as close as familial relationships are. However, this dismissal of peer relationships fails to account for the vital and unique role friendships play for young adults. For college-aged young adults, friendships can be equally if not more important than their familial relationships, often because students live away from home, but surrounded by friends. The literature does not account for the closeness and intensity of these relationships.

Further, the loss of a peer can be incredibly destabilizing no matter the closeness of the relationship because young people aren’t “supposed” to die. For my respondents, their experience with peer grief at such a young age was uniquely jarring, mostly because it was their first time facing mortality. First experiences with mortality shape the grieving process for younger grievers differently from other cohorts because they must contend with both the loss of their friend and the loss of a “false sense of immortality.” Their premature losses forced respondents to learn about grief much sooner than the rest of their peers which sometimes contributed to feelings of isolation.

Ultimately, this failure to consider peer loss among young adults has left gaps in support systems and programming that could help affected individuals process their losses, but I aim to fill this gap. I used the characterizations of grief that most frequently showed up in the literature such as religion’s role in grief and gendered grieving, and adapted them to modern young populations, demonstrating where the theories aligned with my respondents’ responses and where theories failed to capture their experiences. Additionally, I identified two grief frameworks highly relevant to young grievers, but somewhat underrepresented in the literature: substance use and the role of institutional support for bereaved college students. Given that grief is a highly individualized experience, there wasn’t one uniform response among respondents, but there were patterns in their grief responses that crucially differed from or added to the existing grief literature in significant ways. I argue that existing literature is important for understanding why college students’ grief reactions may arise, but that it fails to explain how they are grieving and for what reasons. In my thesis, I demonstrate how young adults suffering from peer loss grieve differently from the broader population through four subtopics: religion’s role in grief, the lack of institutional support, substance usage, and gendered expressions of grieving.
Methods

During my preliminary research process, I found that most grief research surrounding young people generally covers the following categories: spirituality and religion, social rituals (e.g., parties, social media), institutional responses (e.g., their colleges/universities, support groups), and turning inward (i.e., isolating behaviors). Since preliminary research revealed a wide range of possible experiences of grief for young people, I intentionally created an interview schedule (see appendix) that was open-ended. I wanted to learn which of the categories college students most gravitated towards and why that was the case. The interviews mostly followed the same line of questioning.

I interviewed a total of nine people. Each had the option of a Zoom interview, phone interview, or in-person interview (location permitting). The interviews spanned durations of 40 to 90 minutes. To participate in the study, a respondent needed to be between the ages of 18-25, live in the United States, and have suffered a peer loss at some point in their collegiate career. They could have graduated, but the loss must have occurred within the last four years (sometime since January 2020).

The experiences of young people growing up in the United States are especially diverse as the country encompasses a wide range of cultural, religious, and community influences, while simultaneously creating its own secular, multifaceted culture. As a result, students in the U.S. shape their rituals and behavior from a diversity of influences that stem from a variety of cultural backgrounds. I suspected that the melding of cultures would help me more easily identify which death responses are unique or important to young adults rather than ones that are unique or important to only a certain culture. Ultimately, I aimed to have a mix of genders, ethnicities, and geographic locations to avoid any generalizations that would render my data applicable to only small portions of the greater college-aged population.

I identified my initial set of participants via personal, previously established connections with classmates, friends, and friends-of-friends. To supplement my own connections, I emailed several support groups, therapy organizations, and grief centers for help with outreach. Though some organizations communicated that they found my research important, all of them had to turn down my request for help (or chose not to reply) given the sensitivities and legality of sharing information regarding death and traumatic situations. I also used my social media connections on various platforms including Instagram, Facebook, and Snapchat to expand my outreach. My social media attempts were also less effective than I had predicted, so the bulk of my respondents came from my snowball sample method.2

Given that my respondents were almost all from my personal social circles or social circles in proximity to mine, the sample was not as diverse as I would have liked. My respondents are overwhelmingly white and unrepresentative of the majority of ethnic and racial identities within the United States. The sample’s religious inclinations are also predominantly of Christian origin. Additionally, while I spoke to participants from a variety of places around the country, most participants attend small, liberal arts colleges and/or come from elite coastal cities. This clustering of respondents from socially elite spaces could lead to a consolidated mindset among participants, creating a sample more homogenous in opinion/experience than the greater college-aged population within the United States. My final breakdown of participants is as follows:

2 Snowball sampling is a sampling method in which respondents already involved in the study recruit additional participants from their own social circles.
Note: Each participant has been given a pseudonym or provided one and any identifying details have been changed to protect the confidentiality of respondents.

<table>
<thead>
<tr>
<th>Name</th>
<th>Gender Identity</th>
<th>Racial Identity</th>
<th>Religious Upbringing</th>
<th>Home State</th>
</tr>
</thead>
<tbody>
<tr>
<td>Angela</td>
<td>Female</td>
<td>White</td>
<td>Catholic</td>
<td>Pennsylvania</td>
</tr>
<tr>
<td>Ken</td>
<td>Male</td>
<td>Mixed (Asian/White)</td>
<td>Protestant</td>
<td>Raised between the U.S. and multiple countries in Asia</td>
</tr>
<tr>
<td>Cash</td>
<td>Male</td>
<td>White</td>
<td>Catholic/Agnostic</td>
<td>Arizona</td>
</tr>
<tr>
<td>FCN</td>
<td>Male</td>
<td>Mixed (Black/White)</td>
<td>Agnostic</td>
<td>New York</td>
</tr>
<tr>
<td>Charlotte</td>
<td>Female</td>
<td>White</td>
<td>Catholic</td>
<td>Connecticut</td>
</tr>
<tr>
<td>Emily</td>
<td>Female</td>
<td>White</td>
<td>Catholic/Christian (non-denominational)</td>
<td>New Hampshire</td>
</tr>
<tr>
<td>Nina</td>
<td>Female</td>
<td>White</td>
<td>Jewish</td>
<td>Colorado</td>
</tr>
<tr>
<td>Rizz</td>
<td>Male</td>
<td>South Asian</td>
<td>Hindu</td>
<td>Georgia</td>
</tr>
<tr>
<td>Sarah</td>
<td>Female</td>
<td>White</td>
<td>Jewish</td>
<td>Virginia</td>
</tr>
</tbody>
</table>

While some respondents were more than willing to speak with me about their experiences, others were more reserved and needed more prompting to share substantial answers. Given the sensitive nature of the topic, I was more hesitant to probe respondents at times which may have resulted in incomplete answers on certain questions. While I made it clear that all respondents had the right to end the interview at any point or refuse to answer any questions that they felt uncomfortable with, none did explicitly. Still, some respondents chose to only give one-sentence answers for some questions or default to some form of “I don’t know.” The hesitancy some respondents had in answering questions is itself interesting because it demonstrates how difficult it can be to talk about grieving and difficult emotions, and/or that discussions of grief are not fully normalized in conversation.
Religion’s Role in Grief

Overview

For centuries, religion has played a crucial role in the rituals and coping mechanisms of people processing the death of a loved one, but the increasing secularization of the modern world may threaten religion's influence over grieving rituals, and modern grievers may no longer consider religion central to their grieving processes.

Historically, rituals have been used to create symbolic representations of the deceased so people can feel a connection to them after their connections in the physical world are severed. To achieve the connection to the divine through ritual and symbol, grieving processes are traditionally shrouded in spirituality and use religion as the framework for understanding death and grieving.

Theorists have speculated why religion has remained so relevant in peoples’ understanding of what death is and how to cope with it. In his work *The Elementary Forms of Religious Life* (1912), Durkheim argues that religion can be used to explain the unknown, namely life and death, and introduces the concept of ritual as formative to religion. To Durkheim, religion is not about seeking theological answers on understanding the world’s origins, but rather to teach us how to live within it. In his definition of religion, Durkheim explains that religion is the shared belief of what is considered “sacred” versus “profane,” continually re-established through collective ritual. Other theorists such as Clifford Geertz have added to Durkheim’s understanding of religion. Geertz argues that belief teaches us how to contend with the bafflement, suffering, and evil that consumes the world and religion’s role is to address the unexplainable (Geertz, 1993).

Ernest Becker argues that the more awareness man has of his own mortality and human vulnerability, the more he tries to suppress it. He claims that the fear of death is central to understanding all of human activity. Like other animals, humans are predisposed toward self-preservation, but we are uniquely the only species able to have symbolic thought, allowing humans to conceptualize their own inevitable and unpredictable death (Becker, 1973). When a death occurs, people often resort to avoidance by increasing the effort they put into their work and activity. Solomon et al. expand upon Becker’s fear of death theory, arguing that without supplementing these feelings with distraction and belief, understanding one’s mortality would lead to crippling terror, rendering the individual unable to function. To combat this fragility of the mind, humans create shared cultural worldviews to minimize the existential threat of the unknown. Existing within one of these worldviews gives one a form of immortality that cannot be achieved outside of a group. Some cultures, operating from a spiritual view, promise forms of “literal immortality” through a conceived afterlife the promise of eternal bliss provided by souls, heaven, rebirth, etc (Greenberg et al., 2015).

Despite earlier theorists’ arguments that religion helps mitigate death anxieties, Feldman et al.’s 2016 study found that levels of death anxiety were relatively the same between religious and non-religious populations. They did find, however, that when participants’ beliefs included a belief in the afterlife, then religious participants demonstrated lower levels of death anxiety while displaying higher levels of “death acceptance” (Feldman et al., 2016).

Given religion’s role in addressing existential questions of mortality combined with my respondents’ unfamiliarity with processing death, one may assume that they would turn to religion for answers. However, this is increasingly untrue, particularly for young people, given the move towards secularization in the modern world. Instead, young Americans adopt a quasi-traditional method of grief work, different from how it has been previously understood in the literature. As the United States becomes increasingly secular, the way Americans understand death and grief
becomes increasingly secular as well. The question becomes: what do griever’s responses to loss look like when we do away with the traditional framework for processing grief?

The “unbundling” of religion and ritual in the United States started with weddings\(^3\), but secularization has since expanded to include funerals. As of 2008, 29% of Americans expected to have a secular funeral (Burton, 2018). Though the United States is becoming more secular, young people disproportionately self-report being unaffiliated with a religion; 35% of Americans under 30 self-reported having no religious affiliation while only 9% of Americans over 65 answered “none” in Pew Research Center’s 2014 Religious Landscape Study (Manning, 2019). Manning (2019) claims that “secular sources” such as science fill the role of “meaning-making” that once could only be filled by religion. While science may be able to assuage the unknown, it often does not provide the sense of community and support that collective religious belief can provide. Since young adults are more disconnected from religious communities, they may feel an increased sense of isolation in their grieving process in comparison to grievers of other ages.

As the modern world becomes increasingly secular, the pool of “meta-atheists,” people who claim to be believers but don’t actually hold the beliefs they claim to support, grows (Feldman et al., 2016). Many of my respondents were raised with religious backgrounds or ideals and many of them identified with their religious affiliations as an identity marker, but most did not find their labeling to be reflective of their religious beliefs. Over half the respondents were raised under some Christian denomination, two were raised Jewish, one was raised Hindu, and one was raised without any religious affiliation. Though mentions of faith as relevant to respondents’ grieving processes were limited, some reported that growing up with a religious background or in a community shaped by religion helped them learn how to deal with loss and grief whether or not they utilized those teachings in their own grieving processes. Very few reported a turn (or return) to religion and spiritual life in the aftermath of their loss. A few spoke of an inclination towards organized religion following their losses, usually more for a sense of familiarity than for theology, but in most cases that turn was relatively brief. One attributed a sense of spirituality to scientific concepts, and another spoke of a newly found rejection of religion. Overall, respondents did not place heavy emphasis on religion, suggesting that alternative methods of coping have replaced religion for ever-increasingly secular populations.

The Secularization of Religious Ritual

Religious ceremonies are clear: they are scripted experiences in which the community clearly gathers, engages in ritual, and de-gathers. Secular ceremonies are less clear. They don’t have the same finite boundaries or heavily established rituals. Secular ceremonies vary much more frequently than religious ones because they don’t have the historical blueprints to establish precedent. Though many religious traditions for death transitions remain among specific communities, secular institutions must approach death inclusively. However, the lack of established ritual within secular grieving may make it difficult for people to feel fulfilled by their newly created rituals. To combat this, secular communities may adapt religious rituals to fit their own needs, rather than abandoning religious ritual completely, to create the emotionality of the “sacred” without its theological ties.

One of the common rituals that has been adapted from religious to secular is candlelit vigils. In Christianity, the light of the burning candle is believed to represent the light in the world amidst the darkness, and the flame is also seen as symbolic of Christ, with whom the departed soul is reuniting (Rockhold, 2022). In Judaism, candles are also used to pay tribute to the life of the

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\(^3\) By 2017, only 22% of American weddings still occurred in religious spaces (Burton, 2018).
departed since the candle is often associated as a symbol of the soul. Yahrzeit candles are lit on the anniversary of the loved one’s death for a customary 24 hours every year to represent the continuation of their life by way of their loved ones’ memories which still burn brightly in their minds (Rockhold, 2022).

While candles are staples for grieving rituals in the Catholic and Jewish faiths, not all sects of Christianity use candles in their worship. Certain sects rejected the use of candles under the belief that worship should be plain and simple. Among them were Puritans, Calvinists, and Quakers. Though many in the community still align with the traditional beliefs surrounding the use of candles, many have relaxed their viewpoints so that they more freely accommodate their practices to better fit in with the rest of the modern world. Some members of the Calvinist community believe that candles are not spiritual or biblical, they cannot strengthen one’s prayers, but they can serve as reminders of the spirituality all around us (Got Questions, 2024). It is interesting that, at Haverford, we too choose to participate in candlelit vigil as a way of grieving despite the Tri-Co having a Quaker tradition and emphasizing our history.

Though respondents viewed their bereavement rituals as secular experiences, many of them engaged in evolved versions of these grief practices stemming from the Jewish and Christian faiths whether aware of the ritual’s history or not. Despite separating from organized religions over time, Christian influence has heavily shaped American culture, leading historically Christian traditions to become universally accepted as “American” rituals. The important questions to consider are: Why have candlelight vigils become a secular practice? And how has the ritual altered during its translation into modern American practice?

Several respondents shared that either their schools or families of the deceased decided to hold candlelight vigils in remembrance of the dead. Since most modern colleges and universities are secular institutions, religion cannot be explicitly implemented into the grieving process, so they re-characterize candlelight vigils as non-religious. Actors engaging in this form of ritual no longer necessarily connect the candle lighting to a higher power, but the solace that comes from candlelit vigils as a “sacred” practice allows it to possess the emotional qualities usually reserved for religious ritual.

Respondents’ Personal Inclinations Towards Religion

While many of my respondents were raised with some religious affiliation on behalf of their parents, almost none are currently practicing. Those raised with religious backgrounds also clarified that, although their parents were religious, they only exposed their children to religion and none of them felt forced or pressured into faith. As they grew up, many respondents felt that religion faded into childhood comfort rather than concrete beliefs. Though only one respondent referenced the importance of theology in their grief work, others used religion to find comfort in familiarity.

Unsure of how to soothe themselves, several respondents turned to religion because they did not know how else to cope. Sarah shared that she tried calming herself down with various methods, but her mind kept returning to her loss and she had no way of addressing these recurring thoughts. After some time trying to manage her emotions on her own, she decided to contact the rabbinic advisor to find a prayer or repeated song that she could read to herself in times of distress. She told me:

“I think I would have reacted differently in relation to Judaism four years ago, but one of the forms of support I sought was through our rabbinic advisor at the time, I
just emailed them and was like, Are there songs? All the emotions were crashing down, I wanted something to turn to, and it felt like the easiest, like, that felt like a logical and comfortable place to turn, so they sent me [some]. I kept that email starred for a long time so when I had one of those moments I would be able to go to it and look at [them].”

She clarified later:

“It was not a God thing I was looking for, it was a comfort and security thing. It was like looking for something familiar and looking for something stable.”

Studies have shown that the repetition and rhythm of prayer may lessen anxieties by lowering one’s heart rate, relaxing muscle tensions, and slowing breathing (Upenieks, 2023). Though religious in nature, Sarah used prayer for its calming effects. Prayer can be an exercise in patience, slowing down, breath work, and focusing all of which are important for mitigating the effects of grieving and preventing long-term grief complications. Sarah felt the benefits of prayer not because of a tangible belief in God, but because of the combination of the familiarity of Judaism and its repetitive qualities.

Despite growing up in a religious household, Ken found himself leaning more towards the “empirical,” yet he too found praying could be therapeutic. Ken shared that his parents made him pray when he was growing up, and always before meals, but when his mom encouraged him to pray after his friend’s death he “did find some relief in that.” Though Ken’s parents believe that his friend went to heaven, Ken isn’t sure what to believe, but he says his friend’s passing made him more “open” to multiple possibilities. Though he doesn’t think he personally believes in heaven, growing up surrounded by the narrative that people who die go to a better place reassured him that “everything will be alright.” Despite not believing the specific scripture, the feelings behind the core beliefs of Christianity became so encoded within Ken’s behavior. In some ways, his approach to grieving can be characterized as religiously Christian because the belief in the afterlife partially mitigated his feelings even though he doesn’t consciously believe in heaven. Furthermore, despite religion “never kick[ing] in,” it did provide him with an “ethic system” and way of viewing the world with an open mind.

Rizz was the only respondent who self-described their initial exposure to death and grief work as coming from a religious source which influenced his return to spirituality as a way to find comfort after his friend’s passing. Rizz grew up in a Hindu community that taught children about death and normalized conversations around grief work from a very young age. Given that his initial exposure to death came from a religious source, he was the only respondent who approached his personal grief work through a theological lens. He shared:

“We believe in reincarnation, we don't really believe a person dies just that their soul goes somewhere else...My local Hindu priest told me that a person's soul is never at peace until the grieving associated to them stops. Um, and it honestly was really comforting for me to hear because it kind of gave me motivation to stop. Not to like suppress my feelings, but to get better so his soul would be at peace.”

Rizz felt that he became “closer to his religion” in his grieving process, primarily because it allowed him some sense of hope. He desired to believe the words of his Hindu Priest because
that brought him a necessary comfort in the moment. Even if he doesn’t keep up with Hinduism
in the long term, his childhood experiences with religion gave him a place to turn to in times of
desperation.

While Angela’s return to spirituality was the most institutional, as she was the only one
who physically went to a space of worship apart from during funeral proceedings, her reasoning
behind going closely mirrored the others’ responses. She found comfort in spending time at a local
Church not because of its religiosity but because of its familiarity even though it was not of the
denomination she was raised in. The pews, the Bibles, and the smell, all reminded her of Sundays
during her childhood at the Church where her dad worked. Angela felt like these small reminders
reassured her that she could always find a piece of home at a Church because it reminded her of
her family, her usual support system in times of crises when she couldn’t be with them.

Though they didn’t frequent a place of worship like Angela, several respondents expressed
an understanding of the appeal of religion and could see why people longed for community and
tradition during such a destabilizing experience. Ken shared that although he doesn’t frequent any
Church, he does understand the specific feeling one experiences when walking into a Church and
can see how religion can bring people the necessary comforts. Cash had a similar viewpoint, telling
me:

“There's like a feeling you get when you walk into a church, it's grand and it's holy
and like, you know, there's a special feeling but I wouldn't say that it connects me
to any sort of God.”

Places of worship often serve as physical representations of comfort beyond their direct theological
associations and those associations can be tangible for people in the space. Many churches,
temples, synagogues, and mosques preach acceptance of people in need, providing prayer, food,
and shelter. Historically, churches have also given sanctuary to refugees and undocumented
immigrants. For many unaffiliated with the religion, places of worship can offer comfort and
protection in addition to or instead of religious teachings despite their religious ties.

Non-Religious Reconceptualizations of Mortality

Though not an explicit turn towards organized religion like some respondents, other
respondents did express a change in their beliefs in response to their loss, spurring a re-evaluation
of how they conceptualized corporeality. Ken shared that his understanding of “what mortality
really is” shifted, realizing that “life is finite.” FCN characterized his spirituality as “rationalized.”
He believed that the dead remain with us in two ways: their memory is continued through those
around them and that their “actual matter isn’t gone.” He explained:

“Matter can't be created or destroyed according to laws of physics, so, even though
his consciousness is dead, even though I can't interact with him, he's still literally a
part of the universe. And he always will be.”

FCN viewed his spirituality not in a religious way, but in a “physics way.” He saw everything
through a scientific lens of predetermination, believing that everything that happens including his
friend's death is “inevitable.” While the preference for scientific over religious “meaning-making”
could be characterized as disenchantment, it actually shows FCN’s re-enchantment because
science gave him a new avenue to form his own belief (Manning, 2019). Some also may argue that
he is engaging in religion through the spiritualization of science if one defines religion as explaining the unexplainable. Though science cannot provide all the explanations for what happened to his friend, FCN uses what he has learned as objective and applies a spiritual application to it.

Rejecting Religion

Despite growing up in a Catholic background, attending a Catholic high school, and growing up with the belief that her grandparents existed blissfully in heaven, Charlotte’s experiences of suicide caused her to lose her faith in God. Before her friend’s passing, she still believed in the Christian gospel, but after he took his own life, she couldn’t stop wondering “why him?” The heartbreak of his death caused her to re-evaluate her lifelong beliefs. She recalled:

“I don't think there's any reason that a God could give me for making that worth doing. So it kind of caused me to lose my faith a little bit and I'm still kind of actually coming back from that. Um, I think I was pretty shaken in my faith for the large part of like a year and a half or two years, basically just I don't believe in God anymore. That's not only because of his death, but probably because of the whole string of suicides which contributed to it with each death that happened.”

When her belief in God started to falter, so did all of her other beliefs associated with the Christian faith, until she was left with none. She continued:

“When I started questioning my faith in a creator overall, that kind of dominoed into questioning my faith about the afterlife because they kind of come together. So, it kind of made me wonder, like, do we ever see these people again?”

In describing her friend, Charlotte told me he was “quiet, did a lot for the school, was a great student, with a lovely family.” If there was a God, she could not believe that he would “strip someone like that off of the Earth.” Charlotte no longer chose to believe that everything happens for a reason or that everything is part of “God’s plan” because she felt there was no reason that could justify her friend’s death. Though some people’s religious beliefs may strengthen in times of hardship, others falter because they cannot understand how a higher power could do something so cruel intentionally.
The Lack of Institutional Support

Overview

As evidenced in the section on religious inclinations, religion has historically been a tool for processing and metabolizing difficult or unexplainable feelings, making it a traditional outlet for processing grief. However, students are increasingly less reliant on religion as a support system. How, then, has the increasing secularization of society in the past few decades changed how people grieve? What has filled the gap in support for those who lose someone that religion left behind? Now that students are less inclined to find support in religion, they need an alternative to fulfill the role religion once served. While some students turned to academic institutions and their internal (or external) psychological services for support, many found these institutions lacking. In religion, the experiences are largely based on personal relationships: between the believer and God (or some form of spirit) or between the congregant and their relation to the congregation. Modern institutions, however, are largely bureaucratic. Modern, secular systems of support prioritize efficiency and uniformity which makes them impersonal and unapproachable. Given that grieving is a highly personal process, the services available to college students often feel insufficient, making students turn away from their institution and turn toward other types of comfort such as friendships, substance use, or even inwards. Yet, these other methods are also often inadequate which leaves grieving students struggling; they need help but are unsure of how to get it or where to look for it.

Though grief is prevalent on college campuses, college students are highly underrepresented in grief work and support services specialized for them. Given their underrepresentation, very few studies have been conducted to understand which needs are specific to college students and the barriers to getting them the necessary support (Tureluren et al., 2022). In what Fajgenbaum et al (2012, p. 99) are calling a “silent epidemic,” “grieving college students are at greater risk than their peers of a host of academic, social, and developmental issues” given the lack of supportive interventions on college campuses. Unlike other demographics of grievers, college students are at a unique age where they are away from home and their routine supports for the first time, often under-resourced in terms of institutional support, and adjusting to a new “carefree” social climate that prioritizes light-heartedness over difficult conversations (Fajgenbaum et al., 2012). College is a key shift away from ‘dependent’ high school and home life to a new expectation of independence (Tan et al., 2021). In recent years, the effects of the COVID-19 global pandemic also “exacerbated the experience of loss and grief among college students” (Bistricean et al., 2021, p. 54).

As young adults, college students are in the awkward position of being stuck between childhood and adulthood, which impacts their access to support services. There is a notable lack of support services for young adults of college age: childhood bereavement groups don’t accept people over the age of 18 (and sometimes stop accepting teenagers even earlier) and general adult support groups usually don’t address the specific issues of college-aged adults, so young people often don’t feel comfortable or supported in these spaces. As a result of this gap, there is a demand for support groups attributed specifically to age-based demographics. In Näppä et al. (2020)’s study, respondents across ten bereavement support groups suggested that younger bereaved people should have their own group. To address some of these gaps, some grievers have turned to self-help interventions and online therapy in the past few years, as well as social media, but online support is still scarce and oftentimes inaccessible (Tureluren et al., 2022; Thai et al., 2018). Recognizing the lack of supportive interventions, some groups such as National Students of AMF...
(Actively Moving Forward), created in 2006, have been founded to provide grieving students with peer-led support groups. Today, National Students of AMF run 61 campus chapters across the country (Fajgenbaum et al., 2012).

A 2023 report found that only 60% of students know about “the full range of mental health, financial aid, and career services available at their institutions,” yet there still seems to be a lack of faith in the ones that are known (EdScoop, 2023). Even when mental health treatment is available on campus, research has shown that students tend not to use their mental health resources. In Ebert et al. (2019)’s study, they found that students who did not seek help commonly reported two explanations: ~56% preferred to handle their grief by themselves and ~48% preferred speaking with friends or family in place of formal treatment. Some studies, such as Tan et al. (2021), suggest that universities and colleges can better support bereaved students by targeting material towards their friends and family so that all realms of their support systems are better equipped to help them. A combination of having both formal and informal ways of seeking help may make students feel more comfortable opening up which helps them find more benefit in these difficult conversations.

When students experience a peer death, particularly when that death occurs on campus, they are often presented with the support services available to them almost immediately. At smaller schools, most of the students and faculty may be aware of the death, creating a community to support affected students, but at the same time, this hyper-visibility can be unwanted and may alienate students from campus resources. At the same time, larger educational institutions approach student death more methodically. For example, at University College London where the enrollment is ~43,000 students, they offer a “guide for students affected by the sudden death of a peer, outlining what happens following a sudden death and the support available” which is intended for any students affected by the sudden death of a fellow UCL student (University College London, 2024). The rationalization of grief work and counseling can disconnect students from their communities because they make the support seem impersonal.

Despite assumptions that smaller-sized institutions may make students feel better supported, many students disagree with this sentiment. The respondents I interviewed came from colleges and universities of a range of sizes; some attended institutions with an enrollment of under 2,000 while others went to schools with enrollments upwards of 40,000, but attitudes towards institutional support seemed to be fairly similar no matter the size of their schools. Many of the respondents felt a sense of distrust or lack of understanding of the support services available to them. Of the nine people I interviewed, only two reported using services for long-term help through their school’s CAPS office (Counseling and Psychological Services, commonly available on many college campuses); one other respondent attended a drop-in appointment as a way of encouraging a friend who needed support but didn’t want to go alone. A few respondents were connected with a dean and/or counselor given their proximity to the deceased since the death occurred at their school. None of the respondents considered their connections with their administrations to be helpful to their grieving process. Of the four who experienced peer losses outside of their school community, none notified their professors or dean.

Overwhelmingly, students shared that they felt unsupported by their institutions. My interviews reflected that students felt a lack of access, support, and/or care on behalf of their institution, oftentimes unconnected to its size. As a result, young people’s ways of coping have moved away from relying on institutional support because it felt lacking, and instead, they found other methods of coping such as substance use or distraction via activity or schoolwork. In this section, I also introduce a new alternative to institutionalized support: informal support services via friend and family networks. In conclusion, few grieving students used the support services
available to them for four main reasons: the support felt rationalized, disingenuous, or impersonal, and/or because respondents aren’t yet at a place in their grieving process where they feel ready to engage with or feel a need for support services.

**Institutional Failures**

The way respondents’ schools initially delivered the news of a student’s death was very important to them since the initial delivery shapes the way grievers process their peer’s death. In multiple cases, students who were friends with the deceased or shared an extracurricular or class with them received the news via a school-wide email. In some cases, the students’ identity was shared, but, in others, students had to piece together who died or were unaware until much later. Providing distressing but incomplete information can be incredibly disorienting for students. Understandably, it is difficult for schools to keep track of each of their students’ friends, but in circumstances when grievers share a commonality such as a sports team or club, the schools could deliver the news to those people in a more personalized way before sending a mass email.

When schools do not communicate information effectively and personally, the onus often falls on the students to gather and redistribute information. Sarah’s school sent out an email around early afternoon informing students that an unnamed class member had passed away from undisclosed circumstances, but it wasn’t until early evening that she discovered it was her club friend. Her club had been scheduled to meet that evening, but about 30 minutes beforehand, her co-head asked him to call her because he had reason to believe that the student who passed was their peer. At that point, she had not heard anything from the club’s faculty advisor, so she was unsure whether he knew yet. Together, Sarah and her co-head took it upon themselves to tell their faculty advisor along with the help of another faculty member whom they had to inform of the situation. In the end, Sarah learned that the faculty advisor already knew of her friend’s passing but had not reached out to any of the other students, issued any sort of statement, or provided any offers of support. Though college students are technically adults and responsible for themselves in many ways, they are still in the intermediary stage between childhood and adulthood, meaning they often must rely on older adults to help them through difficult and/or new situations. While the faculty member wasn’t specifically trained to address crises such as this one, they have a direct line to those who have been, and the college’s administration should coordinate with its faculty ways to best support all affected students.

Institutions don’t only fail in their delivery of information, but also in what they do in response to the information shared. In one of the most extreme examples of institutional failure, the administration at Charlotte’s college had to respond to seven student deaths in the span of six months, gaining them national coverage. After each death, the administration provided the student body with the name of who died but did little beyond that. Charlotte recalled how her school sent out a very frank email for each student's death, one so standardized that the information was interchangeable with the exception of the deceased student’s name. She said:

“We pretty much got those mass emails for each death and nothing was offered through any of them. No counseling, like no, uh, assemblies, no vigils. Like they didn't give, um, wake or funeral times or like, they didn't like attach obituaries, none of that. I don't recall which number suicide my friend's was. I know he was towards the later, the later end of them. But, um, I know after. Like three or four, it happened that students kind of started to take it upon themselves to organize things because the administration wasn't.”
As in Sarah’s case, the responsibility of handling the situation fell to the students. When institutions, like those of higher education, prioritize efficiency, the resulting processes are rationalized. In Weberian⁴ terms, rationalization refers to organizing social actions for the most efficient outcome possible, often at the cost of the quality and care for the people involved. It was the impersonal character of the response—or the rationalization of grieving—by school administrations that respondents were so critical of. When grief was rationalized by institutions, respondents felt it dehumanized and dishonored the deceased, stripped the deceased of their personhood, and further, did not leave space for expressing emotions. The responses of administrations in this way did the opposite of what they intended, making it more difficult for students to grieve.

Additionally, respondents reported that their school’s administration reaffirmed such a rationalization in the grieving rituals that they held to mourn students. Multiple respondents felt like their school’s response was “fake,” often because the community grieving rituals were championed by senior members of the administration whom the students felt least connected with. There was a disconnect between those holding the remembrance and those affected by the death. For example, in remembering his friend’s vigil, FCN chuckled, saying:

“There was a vigil. The president spoke at it. That was funny…Like you didn't know him, what the fuck? You're just the president of the college. You're just making a statement. This is your little PR stand.”

FCN viewed the president’s presence at the vigil as disingenuous because the president didn’t know the deceased, so how could they say anything meaningful? He perceived their actions as performative, or as a public relations event to protect the reputation of the school as opposed to coming from a place of genuine hurt from the death of a student. Angela felt a similar disconnect between the people constructing the narrative of her friend’s memory and who her friend actually was. She recalled the vigil for her friend:

“Everyone was just kind of there in silence for a while, and I think some deans who didn’t know him spoke? They were speaking like ‘we don't know who this student is, but we hope they're in, like, a better place’ [They were] saying stuff that could apply to literally anyone.”

The people who control the narratives surrounding student deaths tend to be the most removed from the situations which upsets students who were more heavily involved. The generalized format of grief ritual requires the administration to follow exact steps independent of who passed away, which makes the vigils in their memory unrepresentative of who they were. Angela felt that the vigil was far from what her friend would have wanted, saying “[he] would have hated this. Like, this was so not his thing.”

Institutions should involve students in the conversations on how to commemorate their peers’ deaths should they want to contribute. Angela had multiple ideas for how the school could have handled his passing in a way that would better honor his memory. She shared:

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⁴ In accordance with Max Weber, an early 20th-century German sociologist.
“I wish that for a memorial, they would have had a sit-down thing where his friends could speak, those from the community could speak, where we weren't just in silence outside in the cold with our candles blowing out every two seconds because of the wind. And I wish it wasn't just people who didn't even know him speaking.”

Sometimes the way the school addressed the tragedy was so unhelpful that respondents couldn’t even remember what they had done in response. Given that Emily’s hometown was so small, her friend’s death rocked the whole community including the high school she and her friend had attended together, but when asked what her high school did to address his passing, she wasn’t sure. Instead, she recalled:

“I don't know honestly. I think that they might have sent out something about like why they had a closure on for a half day or something like that.”

Students like Emily felt unsatisfied with the responses of their schools. They felt that responses were misrepresentative and/or misguided partially because they were minuscule in comparison to the losses they were feeling. They perceived the school’s responses as equating the loss of life to something trivial like a half-day off when a half-day cannot make up for the loss of a community member.

Depending on the nature of their peer’s death, some respondents felt distrust towards their institution immediately following their passing because they viewed the school to be partially responsible or at least partially complicit in their friend’s death. For respondents who lost friends to suicide, they considered the school to be inadequate even before their peer’s death, naming that the necessary support systems for struggling students were lacking and arguing that administrators should do more to preemptively care. Angela, who lost her friend to suicide, shared her frustrations with her school’s support services, saying: “Oh, school fucked up heavy.” Angela said that while her small school claimed to repeatedly check in with students, she felt their concern was disingenuous in both the leadup to her friend’s passing and the aftermath:

“The school should be checking in on that sort of thing. You gotta make sure that person isn't literally insane and gonna do something and harm other students or themselves. Yeah, there's a lot of stuff they messed up with and [their response] was just very fake to me. They didn't know how to handle it. And they were very ill prepared.”

Respondents’ skepticism that institutional actors had motives that trumped student well-being also manifested as an issue of trust among the respondents. Some respondents did not trust that their confidentiality would be honored given previous experiences with support services in childhood. For example, Nina explained that when she had mental health troubles unrelated to her grief a few years before college, she tried to find help in the resources available to her. However, as a minor, she did not have full autonomy over herself and her safety, so her parents were involved which exacerbated the gravity of the situation and violated her trust. Given her in-between state as not quite a child but not fully an adult, she had not yet formed a relationship with support services independent of her parents’ influence and felt uncomfortable starting to at that point in time. She shared:
“I have had some, like, bad experiences with therapists prior to this, so I, at that point, was not in a place that I felt comfortable doing that.”

While her distrust towards support services was previously established, grief can intensify previous fears and feelings. Since she was in a heightened state, she felt even further removed from the institutions that were meant to support her. Though her friends reassured her that seeking support would look different now that she was no longer a minor, her state of distress as a result of her grief made it an inappropriate time to combat her previous assumptions despite it also being the time that she was most in need of them.

Even when schools attempted to support their students, they often failed to do so adequately or effectively. After Sarah’s good friend passed away, her school offered to pay for students who were in the club with him to attend his memorial service which was a plane ride away in his home state. Though the offer originally allowed any student to go who wished to attend, at some point the school decided they would only pay for four tickets despite the club having many more members. Sarah remembers being “frustrated [with the school] at the time because there was a fifth student who wanted to go,” but they wouldn’t make an exception for him, and he ended up having to miss it. Not only did Sarah feel that restricting the number of invitations to four invalidated that most of the club was deeply affected, but it also made her question how justified she was to be there. She didn’t feel confident that she was close enough to him to deserve a ticket. Furthermore, since the memorial was held states away and they were only allowed to bring four club members, she felt very out of place when she was there. She had never met any of the other people in attendance besides his parents once or twice before which furthered her fears that she was undeserving to be there or be affected as deeply as she was.

Schools need to be especially careful in how they approach peer loss because grievers self-label themselves as “imposters” because they feel unjustified in their grief. Peer loss can be incredibly confusing because it’s not considered losing someone as “close” as a family member, but it still impacts young people greatly. There is no template to teach them how to feel, so they don’t know how appropriate it is for them to grieve. When schools, invalidate their feelings of loss by trivializing their relationships to the deceased, schools reaffirm to students that they don’t “deserve” to be grieving.

Though respondents were generally disappointed in how their schools responded overall, some recognized that their schools were making changes to how they approached student mental health and support. A few shared their gratitude for attending smaller institutions that provided a “more intimate relationship” between the faculty and students.

“The dean, the chaplain, all of the services that the school provided to help you deal with grief, to help you get through it…they were all very willing to help; they definitely outreached and definitely tried to be there. But like I said, just more a personal thing, I don't like leaning on those support structures. I don't feel like that's useful for me.”

One of the ways the students whose institutions were aware of their situations felt most supported by them was in the form of academic leniency. Some were offered the ability to drop classes, appeal grades, take leaves of absence, or be excused from certain assignments. Still, some found even the school’s approach to academics to be disingenuous. Angela shared:
They act like they're there for you, but then when it comes to solid stuff they could actually help with, like taking your finals and stuff. They're like, oh, it's up to the professor. That stuff shouldn't be left up to the professor. At some point you need to draw a line, like, they lost someone very close to them. And they shouldn't be forced to take a final like five weeks after they were last in class. Yeah. And, like, still grieving. Especially when it was, like, someone at the school and a real shock.”

Though schools offered some leniency in the immediate aftermath of a loss, they seemed to choose an arbitrary deadline by which the griever would be forced to return to routine as normal. However, the proposed deadline often didn’t align with the griever’s timeline towards recovery. To someone inexperienced with grieving, five weeks may seem like a long time to step away from one’s responsibilities, but to someone living through it, that is an insufficient amount of time to mourn their loss, recover, and catch up on the time they already lost by taking the space to grieve.

In Charlotte’s school’s case, the sheer number of losses proved institutional failure both in the prevention of student death and in its aftermath. Given the severity of the situation, the school had no choice but to invest in resources, counselors, and programming to make help more readily available for those who needed it. My respondent told me that since they lost so many students, “The school is invested in this now.” Now, athletic teams and other student organizations are visited by counselors who give talks on how to “process emotions” and combat “stereotypes around mental health” in athletics. She shared:

“I think just seeing the really big steps that our school has made in the past year or so, as well as the athletic community overall has really changed my perception of talking about [mental health and suicide].”

If schools take proactive steps to foster dialogues surrounding mental health and death, it normalizes the topic which may make students feel more comfortable talking about their experiences. Rather than rationalizing systems of care, putting community resources towards death prevention and grief work brings in the whole community. It forces the dialogue to involve everyone, not just the griefers, which can change the overall culture of the school. Charlotte felt a noticeable difference for the better after this restructuring, both in the way her community prevents and handles tragedy. She described the school’s changes as fostering a better sense of community among students while also preparing them to support one another in crisis. If schools invest the proper time and resources, the steps towards recovery felt more successful to students because they managed to not be rationalized.

When the normal structures of a community are disrupted by student death, leadership can reformat the community in the direction they wish. The administrative response to the death of a student has an enormous impact on how the school shapes its rhetoric. Deans can use the grieving space to restructure the community away from debilitating mental health conditions and towards an emphasis on supporting mental health recovery. They may do so by using the conversation surrounding death to transition to preemptive conversations on the importance of counseling services, so students feel comfortable utilizing those resources before they need to. In some situations, respondents’ deans emphasized CAPS (Counseling and Psychological Services) on campus as a means of re-establishing social structure to create a new form of community that places more value on mental health. The new specific type of community that evolves after
someone’s death can take multiple forms depending on how the community leaders respond to such a tragedy.

**Prioritizing Personal Networks**

After finding that their institutions were unable to deliver what students needed to cope, many respondents shifted how they sought out support. Instead of bureaucratic methods, many respondents turned to their social networks, viewing them as most helpful to their grieving process and thus as the preferred alternative to institutional support. Respondents felt that their friends and family were most helpful because they were familiar, knew how to support them, and were available to them when they needed without being over-imposing. All nine respondents credited family and friends as crucial to their grieving process either by using them as a justification for why they didn’t need therapy or as supplementary to their other coping mechanisms. Though the respondents showed a wide range of how much they relied on friends and family, they all felt the support or potential support from friends and family was relevant enough to be taken into consideration for the study.

Over the past 40 years, multiple disciplines have extensively studied the impacts of social support on improving grievers’ social, emotional, and physical health (Cacciatore et al., 2021). Studies suggest that few bereaved college students use professional services to cope with grieving, but much of the literature finds that social support is highly beneficial (Thai et al., 2018). Social support can take multiple forms including talking with family or friends. Tan et al. (2021, p. 1) reported that respondents preferred peer support and “used formal service only when they had a specific need.” The literature also suggests that while social support is more important to bereaved students, professional support should take a complementary role (Tan et al., 2021). Many of the respondents in my study affirmed previous findings, indicating that they preferred talking to friends and family over formal support services. Social support prioritizes “self-disclosure,” a process that encourages processing negative feelings while creating space to foster “meaning-making” after a peer’s death, both of which can support personal growth (Tureluren et al., 2022). Social support has also been found to be particularly beneficial for individuals experiencing “traumatic grief,” meaning the “violent or sudden death of a close loved one” (Cacciatore et al., 2021).

Some respondents considered individual talk therapy to be futile because it lacked the shared experience component that they felt was necessary to have a productive conversation about grief. Though trained to help people through periods of difficulty, no therapist would have personal involvement in the situation which made respondents skeptical that talking with them would be helpful. Some respondents considered opening up to someone who had never met the person they lost to be unnerving. Cash shared:

“The thing is about talking to people, they didn't really like, they didn't know the person, you know? They don't, they don't really understand, they wouldn't be able to, you know, relate with the way I'm feeling.”

Emily carried a similar sentiment when she shared why she felt uncomfortable speaking with people who aren’t experiencing the tragedy in real-time with her:

“It's just awkward, like, what are they gonna say, like, it's not like they're going through the same thing, like, I don't need them to pity me, or, like, sit there and tell
me that they're sorry, because, obviously. I just felt like it was just much easier to talk to somebody that was, like, going through the same thing as me, like, surround myself with, uh, those type of people.”

Many respondents found relatability to be most comforting in their discussions of grief. They didn’t understand how a professional could have anything meaningful to say about their friend’s passing because they never knew them in life. Medicalizing their grief made the support feel impersonal while diminishing the deceased’s personhood by simplifying their character to only be defined by their death.

Instead, respondents found support in other ways, describing those methods as their own form of “therapy,” “counseling,” and “support.” Even before her loss, Charlotte felt that the counseling services she had had access to were insufficient. She remarked:

“I had done some therapy in the past, like, just prior to this, like, for my life, and it wasn't really for me. I do a lot of journaling and very much, like, talking to friends and talking to family, and that kind of served as, like, my counseling in a way.”

For some respondents, the mere act of participating in activities communally felt crucial to processing their experiences even when it didn’t involve any direct discussion of their friend’s death. Angela mentioned how something simple like watching movies with friends reminded her of the support available all around her while helping her work through her feelings privately and at her own pace. Similarly, Nina shared how therapeutic the act of cooking with friends can be, with or without emotional conversations:

“One of my friends would come over and cook with me. Or at least one. And so it was nice that none of us were ever alone…We're close enough that it didn't feel like it was, like, draining our social batteries. I think that felt like a support system.

Even when she wasn’t outwardly expressing her grief, Nina still felt like her friends offered their support. She recalled:

“I think my friends were like conscious of like, that this was happening…If I would've needed support, my friends would've been like quick to be supportive.”

Some respondents found more value in speaking with loved ones over professionals because their loved ones know them best and therefore can theoretically best respond to their needs. She wasn’t interested in any bureaucratic support methods hovering over her. She felt that her friends would respond in times of crisis but let her have some form of normalcy in the meantime.

Though most respondents had positive assumptions about support groups or talk therapy for the broader population, almost none felt like they were a fit for them, framing their disinterest as personal. Emily shared that she wouldn’t “personally” need to join a support group because she has a “strong enough support system on her own,” crediting her family and friends as making up that system. As evidenced above, Charlotte described therapy as not “really for [her].” FCN described support services as “not useful to him,” saying “I’ve gone to therapy. I don't like it personally. I think that's also a personalized thing.” Though Sarah only had one experience of therapy to draw on, she shared:
“That was my first experience with any kind of therapy. First and only experience with any kind of therapy. And it did not help me personally.”

Cash shared: “I don't know. I partially feel like there’s other people that could benefit more from it than me.” In these descriptions of support services, respondents didn’t necessarily see a problem with therapy as a concept, but almost all (seven of nine respondents) framed its limited appeal as an individual issue. This suggests a failure of mental health institutions generally: what accounts for so many to see it as “not for them”?

Though informal support methods are preferred for many grieving students, these support systems can often be finite which means that professional services need to be improved (Tan et al., 2021). Informal support systems rely on peer and familial relationships that prioritize catering to the needs of a griever, but that support is often only sustainable in the short term since they are run by people with independent lives, who don’t have time specifically dedicated to caretaking. Furthermore, students who are not experiencing grief may be unwilling to talk about death and few understand the “importance, significance, intensity or duration of grief” (Fajgenbaum et al., 2012, p. 101). The declining quality of support overtime, which may also be impacted by the type of bereavement, can leave grieving students with feelings of isolation from their non-grieving peers (Tan et al., 2021).

**Fears of Reopening Old Wounds**

While several respondents chose not to use support services because of a sense of institutional failure, others chose not to engage in support systems as a way of shielding themselves from being re-traumatized. Even when unspecific to grief, there is increasing research into “re-traumatization” which occurs when thoughts, memories, or feelings reactivate trauma symptoms that had previously subsided (Schippert et al., 2021). By the time many respondents felt fit enough to have grief conversations with strangers, they had decided they did not want to put themselves through more emotional vulnerability. Though some students may find benefits in joining support groups because they can provide a unique form of emotional support through their relatability, others may be hesitant to confront their own and others’ grief reactions (Tureluren et al., 2022).

Though some could see themselves hypothetically joining at some unknown point in the future, most respondents hadn’t seriously considered joining a type of support group because the grief feels too fresh to reopen as of now. Angela told me:

“Maybe one day I would [join a grief support group] I think I’m still just trying to like, get back to normal life. Yeah. So I don't want to like, reopen all of it.”

Reconciling grief is an incredibly difficult and long process, so the thought of potentially regressing in their progress is a terrifying thought for many respondents, especially after the time spent trying to move away from those feelings.

Additionally, some respondents found that keeping their grief separate from their school life made managing their grief easier. Emily remembered the transitions between therapy and regular life to be very jarring. She remembers:

“I liked [my therapist at school], but it was just like It was weird, like, trying to like find time to like talk and like go to class. I didn't really want to like talk about it
and then like go to class like a half hour later, you know? So like I felt like it was hard to like prioritize that and I was just like very busy.”

Eventually, she found the oscillation between states of vulnerability and states of collectedness to be too chaotic and decided that she no longer needed talk therapy. Therapy required her to be vulnerable in ways that she didn’t feel comfortable being once she resumed the expectations of her previously established responsibilities. Being open and honest with your feelings may be feasible if you aren’t expected to completely shut off your emotions after an hour-long session, but college students have many tasks required of them. The stark contrast between the acceptable and expected behavior within therapy versus within the rest of life may become too conflicting for some young grievers.

Though students’ reluctance to engage with support services is not directly the fault of the institution since it is their personal choice, the hesitancy itself can be considered an institutional failure. Hesitancy towards support services indicates a high barrier to entry, weak infrastructure, and insufficient outreach methods which prevent them from helping the students who need it most.
Substance Usage

Overview
When all other methods of coping mentioned previously, i.e. social networks, schoolwork and extracurricular distractions, institutional support systems, religious rituals, etc., fail to soothe individuals coping with peer loss, some may choose to turn to alcohol or drugs as a way to regulate themselves.

College students may turn to substance use as a way of coping more readily than other grieving populations given the already-established drinking and drug culture on campuses outside of the bereavement context. College campuses regularly foster cultures of drinking and substance use as part of the integration into the “normative tradition” of the college experience (Welsh, 2019). In a 2005 study, ninety-two percent of students surveyed reported that their campus’s “social atmosphere” promoted alcohol use (Peralta, 2005). According to the National Survey on Drug Use and Health, 4.8 million full-time college students ages 18 to 25 (51.5%) drank in the past month with 29.5% reporting binge drinking and 12% reporting high-intensity drinking\(^5\) (NIAAA, 2024). College campuses provide several risk factors for substance use unique to the college population including Greek life affiliation, stress surrounding high academic pressures or perceived pressures, and social pressures (Welsh, 2019).

According to a 2020 study of self-medication among bereaved young adults, “33% had increased their alcohol use at some point after bereavement” and “12% had increased their use of drugs” (Pitman et al., 2020). Those who were grieving suicide were more likely to report increased substance usage than those grieving other death circumstances (Pitman et al., 2020). Although some studies find increased frequency of usage and dependence on substances, the duration that bereavement impacts usage is not agreed upon (Pilling et al., 2012). While grievers may initially increase their substance usage, the extent to which they rely on substances may dissipate over time.

In more extreme cases, reliance on substances can manifest into long-term addictive tendencies and/or disorders. Frequent use can lead to cannabis use disorder (CUD), which affects 6% of adults aged 18-25 (the highest percentage of any age demographic), or alcohol use disorder (AUD), which affects 16.4% (Wallis et al., 2022; National Institute on Alcohol Abuse and Alcoholism (NIAAA), 2024). Substance usage has also been highly correlated with grief work historically, and previous studies have “identified a link between the loss of a significant person, grief complications and substance abuse” (Caparrós et al., 2021, p. 1). Addiction and grieving are so closely interlinked that many substance abuse recovery programs use healing through grief work as one of the primary methods for overcoming addiction (The Recovery Village, 2023).

Some sociologists understand addictive tendencies and increases in substance use during periods of grief through “The Dual Process Model,” developed by Margaret Stroebe and Henk Schut. Under the Dual Process Model, individuals of all ages coping with bereavement are believed to oscillate between a loss orientation, in which the individual participates in emotions or activities that remind them of the deceased, and a restoration orientation, in which the individual engages in actions that help to separate themselves from their grief through distraction and coping mechanisms. Though some may consider ignoring one’s grief to be unhealthy, some repression is a normal way of coping under the Dual Process Model. The process of jumping between the orientations is referred to as a “regulatory coping process of oscillation” (Stroebe et al., 1999).

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\(^5\) As defined by the National Institute on Alcohol Abuse and Alcoholism (NIAAA), binge drinking usually refers to when a woman exceeds four drinks, or a man exceeds five in under 2 hours. High-intensity drinking refers to consumption that exceeds “two or more times the gender-specific thresholds for binge drinking” (NIAAA, 2024).
Some individuals may find substance use to be helpful since it provides relief from grief temporarily by distracting grievers from their pain and deflecting their attention elsewhere. Though increased substance use may lead to more negative long-term effects than positive, alcohol and drugs provide short-term breaks from stress, negative emotions, and even physical pain which can help grievers move toward normalcy (American Addiction Centers, 2023).

My research shows similar rates of reliance on drugs and alcohol in the early stages of bereavement as seen in the literature. One respondent reported heavily relying on alcohol to deal with his emotions, two reported using marijuana, one reported using marijuana but asked that it be off their record, and one reported an increase in nicotine usage. Some respondents were hesitant to talk about their substance usage, especially when it involved marijuana which still has a stigma attached to it despite being legal for recreational use in 24 states and in 38 states for medicinal use (NCSL, 2023). All respondents who reported using substances as a way of coping had previous experiences with drug and/or alcohol use but saw an increase in usage in correspondence with negative emotions. Those who did not partake in drugs or alcohol before their peer loss did not report starting to use substances in any capacity afterward either. Those who consumed alcohol usage socially reported little to no change in their alcohol usage. Respondents' choices to engage in drug and/or alcohol use felt necessary given their unwavering negative emotions and were enabled by college campus culture and the newly developed rhetoric around “self-medicating.”

**Alcohol Usage**

Alcohol use following a traumatic event can be understood as driven either by an enhancement motivation or a coping motivation. Enhancement motivations for alcohol use refer to drinking with the purpose of enhancing positive emotions and coping motivation refers to drinking to cope with already existing negative emotions (Merrill, 2013). Coping motivations are more closely linked with problematic, long-term, or reliant drinking habits (Merrill, 2013).

My respondents showed evidence of both motivations. Many who had previously been involved in party life at college either through Greek life or unaffiliated parties, continued to do so after their loss and did so for an attempt at normalcy and/or for an escape from feelings of sadness. Continuing their previously established social behaviors gave respondents a space outside of their grief that was specifically meant to produce feelings of happiness. Most respondents who had been drinking before their loss reported relatively little change in their drinking habits except for a few who noted a “deeper gratitude” for time “dedicated to having fun.” When prompted, most told me something like “I only drink [alcohol] at parties and stuff. It's only a fun substance I drink occasionally.” Only one respondent reported a heavy uptick in reliance on alcohol for coping outside of social contexts.

FCN, the respondent with the increased reliance, drew a correlation between the pressures of masculinity and his turn towards alcohol. Some studies, such as Drabwell et al. (2020), found that men may use alcohol to help them express their emotions. According to Pilling et al. (2012)’s study, 18.4% of men who suffered a loss in the past year and 29.8% of men bereaved for two years were “clinically at-risk” in terms of alcohol consumption, whereas only 12.9% of their non-bereaved counterparts were at-risk. As the studies suggest, FCN felt like he didn’t have the space to move through his grief by talking about it, so he used alcohol as a way of avoiding his grief. He explained:
“I don't have a great grieving process, um, I kind of use alcohol and other things to distract myself from it, like the week after he died, I was just drunk every day, didn't get a lot of work done.”

When his grief was most intense, FCN found that alcohol helped him “compartmentalize” his grief, so that he could try to move on with his life. He said:

“I definitely can compartmentalize my grief and just try to avoid it and ignore it or push it away with, like, alcohol use.”

FCN found that, without feeling comfortable enough to use other methods to work through the emotions, he needed to turn to alcohol, so that he would not be completely consumed or destabilized by his grief. He saw alcohol as a way to turn off the uncomfortable emotions that accompanied the passing of his friend. This type of self-medicating felt necessary to try to return to his normal life.

Given the masculine norms that encourage college men to drink heavily, FCN’s behavior may have been explained by his peers and to himself as merely the product of his masculinity. As Iwamoto et al. (2011) explain, male college students are constantly shown positive associations between masculinity and alcohol consumption in many forms, including through sporting events and advertisements. Excessive alcohol consumption corresponds with masculine ideals of “risk-taking” and self-sufficiency whereas men with lower alcohol tolerances may be seen as weak or more feminine (Iwamoto et al., 2011). Those who value self-reliance may also be less likely to seek help in relation to alcohol use because of their tendency to address problems on their own (Iwamoto et al., 2011). FCN did not indicate that he ever sought out help for his reliance, but over time his reliance on alcohol lessened as his grief started to subside. He said:

“I knew I was drinking a lot, right, like, that first week, especially after he died….I would finish a big bottle in three days…Yeah. And that it would eventually taper off over the next couple of months.”

FCN’s drinking is an example of how alcohol can relate to restoration-oriented practices. Though he used alcohol excessively for a time, it helped him ignore his crippling grief so that he could complete even minor tasks such as sleeping, eating, and staying alive. Though he had an increased reliance on alcohol shortly after his friend’s death, he eventually moved away from his dependency as he healed. Usage like FCN’s is not atypical, as users are most likely to abuse alcohol in the beginning stages of their grief before switching to healthier coping mechanisms which lessen their reliance on alcohol as they recover (Pilling et al., 2012).

Marijuana Usage

Starting in 2012 with Colorado and Washington, states have expanded access to marijuana for non-medicinal applications (Bryan, 2023). Today, recreational marijuana use is legal for adults over 21 in twenty-four states, two territories, and the District of Columbia (Bryan, 2023). The expansion in access translated into college life with many students regularly engaging in drug usage in addition to or instead of traditional alcohol usage.

Though accessible across generations, younger populations accept marijuana usage more widely and are more likely to view it as an unproblematic coping mechanism. Unlike other illicit
substances, marijuana is widely considered benign by student groups, especially given its portrayal in popular culture and social atmospheres on college campuses (Hyman, 2009). The perceived risk of marijuana usage has been declining since the 1980s, and legalization has sped up this trend (Cavalli et al., 2020). Despite changing ideas of risk and increasing acceptance of its recreational use, marijuana still carries a stigma distinct from alcohol, though this is mainly felt among older populations. American adults aged 18–29 are the biggest supporters of marijuana legalization for both recreational and medicinal use with 72% of the age group in support (Schaeffer, 2023). In comparison, that number is 62% for adults 30–49, 54% for adults 50–64, 46% for adults 65–74, and 30% for adults over 75 (Schaeffer, 2023). The younger the age group, the greater the tolerance towards marijuana legalization.

Between 2007 and 2014, the percentage of college students who used marijuana daily doubled, and as of 2020, marijuana use was at a “historic high among college-aged adults” (Welsh, 2019; National Institute of Health, 2021). As of 2021, 44% of college students reporting using marijuana at some point within the year, “the highest level in over three-and-a-half decades” (National Institute of Health, 2021). Twenty-five percent of students who used marijuana had not done so before college, meaning many users were exposed to the drug in a college setting (Suerken et al., 2014). For the greater U.S. adult population, the number who reported using marijuana at some point within the year was much lower, at only 19% (Schaeffer, 2023). The culture of substance use on college campuses may be one of the primary reasons that marijuana acceptance is so high among the young adult age group.

One of the primary reasons people cite regularly using marijuana is its effects on the body’s stress arousal system (Hyman, 2009). Whether medically true or not, relief-oriented beliefs, meaning the user assumes that cannabis use will reduce anxiety, grief, and other negative emotions, is the “only significant predictor of cannabis dependence” (Hyman, 2009). Marijuana use to cope with stress is more closely tied to chronic use rather than experimental use (Hyman, 2009). Given my respondents' use of marijuana as an important coping mechanism, I expected there to be more research available studying how people medicinally use marijuana temporarily. Most studies surrounding medicalized usage refer to long-term conditions typically associated with medical marijuana such as anxiety or depression, with far fewer studies exploring people who use marijuana to deal with grief and trauma responses.

Respondents who reported using marijuana to cope did not view their use as problematic, but rather to regulate themselves. Their assumption that marijuana use is a non-problematic coping mechanism reinforces their reliance on it as they don’t see a need to change their behavior. Still, the way they spoke of their marijuana use was careful and they spent a lot of time justifying and minimizing their usage. They explained to me specifically why they did it, saying that it wasn’t in any detrimental ways but only to “sleep” or to “relax.” For example, Emily explained:

“I definitely like smoked a lot of weed... just to like, like, calm my mind down, I felt like it was just constantly racing and thinking about that, and I would just like, relax it for a little while, and I do still have a hard time sleeping, and um, I definitely like, use weed to sleep, and I think that that whole experience has like, heightened that a lot. I [smoked weed before] but it definitely changed.”

Respondents also made sure to highlight that their frequent use was a product of their grief and not a reflection of themselves under normal circumstances. As one respondent put it:

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6 Only 7% of American adults aged 18-29 say marijuana should be illegal in all circumstances (Schaeffer, 2023).
“I smoked pretty frequently after, but not in a during-the-day way, but in a, I definitely have to sleep kind of way. Yeah. And then I mean, I still smoke a lot, but like, I'm moving out of the way of needing it.”

Their responses suggested that they were aware that substance use is looked down upon in broader circles, yet they still felt that it was relevant to their grieving process and comfortable enough to share that with me. They were forthcoming in their answers, but hesitant to speak openly, presumably because of the stigma that still surrounds drug usage.

The way the respondents speak of their marijuana use also suggests that they understand it to be more medicalized, using it as a tool to manage intense feelings rather than a recreational drug to have fun. Over time, conceptions of marijuana have shifted, from harmful to benign and from recreational to medicalized. Currently, medicinal marijuana use is legal in 38 states which in some ways shifts the discourse from marijuana as an illicit drug to a licit drug (NCSL, 2023). As a result, some respondents use this medicalized language to explain their usage. One respondent frequently used the term “self-medicate” in explaining her relationship with marijuana. “Self-medication” in these contexts refers to the personal choice to use marijuana as a way to lessen any psychological or physical distress an individual may be suffering from (Wallis et al., 2022). As she put it:

“I self-medicate mostly with, um, pot, marijuana, weed, whatever you want to call it... I was using weed as a coping mechanism.”

Like alcohol, marijuana can also be used because of coping motivations. One of the key distinctions, however, between FCN’s use of alcohol and the respondents who reported using marijuana was the intended outcome of the substance use. In both, the substances were used to help the respondents go about daily life without their crippling grief or anxiety, but they were used for different functions. For FCN, alcohol was a crutch throughout the whole day; it helped him move through his responsibilities by numbing previously painstaking tasks. For the marijuana users, the drug was primarily used at night. During the day, their minds were distracted by other things, such as friends or school. At night, however, they were alone with their thoughts. Most of my respondents reported thinking about their loss at least once a day and, with no more of the distractions that come with waking hours, some reported that their grieving made it difficult to sleep, especially in the first few months following their friends’ passing. Users reported that marijuana helped quell those thoughts which gave them a welcome break from sadness, as well as an increased drowsiness, making it easier for them to fall asleep. Therefore, marijuana may provide both a stress-relief method and a sleep aid that requires very little effort. FCN relied on alcohol to help him get through his grief work whereas marijuana users used the drug to avoid their grief work.

A Direct Response to the Deceased

Rizz differed from the other respondents who considered substance usage to be a significant component of their grieving processes in that he experienced both a rejection of substance usage and developed a new reliance. When his best friend was still alive, they regularly used alcohol, marijuana, and hard drugs together, all which Rizz associated with his friend’s memory. After his friend’s death, however, Rizz’s relationship with drugs changed:
“I don’t really smoke weed anymore. Because [he] was a very big weed smoker and I actually, like, I get reminded of him too much with it.”

Drugs became a trigger for Rizz. Since smoking had been a social activity for the two friends, he found engaging with the drug to be a painful reminder of who he had lost. His sense memory of getting high became much too intense because he created a tie between any form of getting high and feelings of loss. Furthermore, Rizz’s friend passed away from drug-related causes which made Rizz move away from hard drug usage altogether. He saw firsthand the potential effects of using unregulated drugs and how easily one could accidentally overdose. His friend’s family also cautioned him against using, asking him to stop doing drugs for his own safety, a promise Rizz intended to keep.

Though he chose to avoid marijuana because it reminded him of his friend and to avoid hard drugs because of the risk of overdosing, he did turn to a different substance for coping: nicotine. Despite using other substances, Rizz’s friend never approved of using nicotine. Thus, Rizz explained that during his “angry phase,” he “took on vaping and cigarette smoking as a coping mechanism,” suggesting that “it was a way of rebelling against [his friend].” He told me, “It was my way of saying fuck you for not being here.” Rizz used substances to cope, not as a distraction or lessening of negative emotions, but as a way to channel his emotions into a distinct act. To everyone on the outside, Rizz taking up cigarettes had no underlying meaning because it only had a specific connotation for him and his deceased friend. To him, however, it posed a powerful statement. Eventually, as his intense feelings of grief began to subside, and as Rizz got back into his daily routine without his friend, he moved away from his nicotine addiction and has “gotten back to being clean.”

Though Rizz’s reaction may appear to some as a special case, the way he uses substances also aligns with previous literature and the reactions of my earlier respondents. His substance use was also shaped by his grieving process because he too uses substances as a way of coping with his emotions. The way he did so was different from the earlier cases I discussed, but the takeaway is the same: grieving can change the way people use substances because substances can provide an outlet for emotions that people wish to redirect.
Gendered Expressions of Grief

Overview

In reviewing my data holistically, it became evident that the grievers’ gender identities played a large role in the way they coped with their peer loss. In some facets, my respondents adhered to broader theories of gendered grieving in the literature, with most male respondents choosing avoidant and rationalized coping methods and most female respondents choosing feeling and expressive coping methods. However, some respondents contradicted earlier theories by adopting the opposite method due to their generation’s more expansive understanding of gender expression and identity.

When gender is cited in the literature on grief work, there is rarely an intersectional focus on gender and age despite age and time period being heavily influential to the way people conceive of their identity (Creighton et al., 2013). Though the work on gendered grieving is relatively new research (the bulk of which was published in the early 2010s), conceptions of what gender is and how an individual can express their gender have changed drastically. While my respondents did show some gendered expressions of grief, many of my respondents also grieve outside of the gender binary, contrary to what some of the earlier work on gendered grieving may suggest. Representations of gender have changed drastically in both social and professional ways over the past century (Bhatia et al., 2020). Today, conceptions of gender are more extensive, especially among younger, more progressive populations.

Between 2015 and 2019, two-thirds of American young adults became “increasingly supportive of transgender rights” and young adults’ conceptions of gender overall have become more fluid (Twenge, 2023). By 2021, “Gen Z was the only U.S. generation in which a majority believed there are more than two genders” (Twenge, 2023). College students are less likely than older populations to uniformly fall within the gender binary and when they do identify within it, their conceptions of what it means to be a man or a woman may be different from the traditional conceptions of gender held by older people. Young people are moving away from rigid gender norms because having more fluid concepts of gender leads to more “gender-equitable attitudes and healthier relationships” (Welti et al., 2021). Nonbinary people are completely excluded from the binary ideas of feminine or masculine grieving, but they still face bereavement like anyone else. Unfortunately, I was unable to find a nonbinary respondent in my own research.

Much of the gendered work on grieving does not specifically center on young people, but rather on men and women of all ages. The saturation of older respondents combined with outdated conceptions of gender leads to a disjunction between how my respondents conceive of gendered grieving and what had been previously established. Grieving was once a way of ‘doing’ gender, but now doing gender has taken new forms. Almost all my respondents’ responses would classify them as ‘blended’ grievers—showing both traditionally masculine and traditionally feminine responses to grief, meaning the college-aged generation may internalize gender socializations in less significant ways than previous generations.

Introducing “Intuitive Versus Instrumental” Grieving

Most literature surrounding gendered grieving expressions references or builds upon Kenneth J. Doka and Terry L. Martin’s theory of “intuitive versus instrumental grieving” (2000). Intuitive grieving, characterized as the ‘feminine’ way of grieving, is experienced in waves with expressions of emotional reactions that mirror the feelings inside and a focus on expressing those feelings and processing emotions. Instrumental grieving, characterized as the ‘masculine’ way,
focuses on thinking over feeling and responding actively to the grief through physical, cognitive, and behavioral ways of ‘doing.’ Though the grief patterns are assumed to fall on either side of the binary as stereotypes would suggest, grieving occurs along a continuum in which the average person experiences a ‘blended’ form of grief (Doka et al., 2010). Blended grievers are the most common form of griever, though American men tend to lean towards instrumental and American women towards intuitive (Doka et al., 2010). Situational factors can change a person’s grieving style and are particularly influenced by the type of loss and the person’s relationship to the deceased (Ferguson, 2024).

The differing ways of expression (instrumental versus intuitive) are not only limited to grief, but they also arise in language patterns more broadly. Outside of the bereavement context, men are more likely to use language more “instrumentally” as a way of “conveying information” whereas women tend to use emotionally expressive language and reference social networks more frequently (Stelzer et al., 2019). Furthermore, women use “positive emotion, anxiety, and sadness words” to express their feelings, while men tend to rely on “anger words” (Stelzer et al., 2019). Some of my respondents' descriptions of their feelings surrounding grief mimicked these language patterns. For example, one respondent told me:

“I don't let my emotions get the better of me at most times unless it's like anger or something. Like I don't let grief show that often.”

Along with language patterns, distinctions between masculine and feminine expressions of negative emotions follow a “gender-role-consistent pattern of emotion expression” under which men tend to prioritize “powerful” emotions such as anger and have limited tolerance for displays of vulnerability (Sharman et al., 2019). Women have the opposite impulse, leaning away from anger expressions as a way of conveying emotions (Sharman et al., 2019). The differences in emotion can be identified as early as preschool and are evident in children’s parental socialization (Chaplin et al., 2005).

All of the male respondents except Ken discussed feelings of anger in their grieving process. Their anger took different forms, sometimes at the deceased, sometimes at the other people in the discourse or of proximity to the situation, and sometimes at themselves. The nature of their friend’s death also seemed to play a role in who they directed their anger towards. Cash, whose friend died by suicide, felt a lot of anger towards the other students at his friend's school. After his friend’s passing, he learned that people had been bullying him and that his friend didn’t have a support system at college. Cash also felt like he had failed to fulfill his personal responsibility to support his friend, especially since he missed the last phone call from him, which made him partially blame himself for his friend’s passing. As a result, Cash felt that he didn’t deserve to move through his emotions:

“I guess a part of me thinks that I shouldn't use, like, a coping mechanism. Um, cause I do feel kind of like guilty about it.”

For Rizz, whose friend passed away from accidental drug-related causes, his feelings of anger were directed toward the deceased. In his grief, he twisted his feelings of sadness into feelings of anger by reframing his friend’s death as an incident that brought pain to everyone he had been close to. He shared:
“I was also kind of angry at him for dying. Doing what he did and like leaving everyone, me, his family. I kind of blamed him for a bit. I've had this thought process all the way up to, um, around three months of that, of [being] angry at him.”

For FCN, his anger was directed towards other people in the community who he felt were co-opting his grief. He remembered many people speaking at the vigil for his friend who hadn’t had a close relationship with the deceased, some of whom had never even met him directly. FCN had a strong reaction to seeing these people take up the space which manifested as aggression towards them:

“That's another thing that was like, that also pissed me off. People that don't really know what the fuck they're talking about. Like I, like I said, the guy that got up and spoke, I literally told him to fuck off…As soon as he stopped speaking, my drunk self went up to him and said, I want you to know he fucking hated you and you shouldn't have said anything.”

Very few of the female respondents reported anger as being relevant to their grieving process, but Angela described feelings of anger as being highly relevant because she felt that her friend’s suicide had been preventable. She spent a lot of her initial grieving process trying to place the blame for what had happened on someone. She directed her anger towards the deceased, the school, or herself, depending on how she was feeling at a given time. As evident in the institutional failure section, she most heavily blamed the school and its lack of support services and care for students going through difficult times, saying: the “school fucked up heavy.” Given that Angela’s anger response doesn’t align with the previously established gendered responses of grieving, the data may also suggest that the nature of death is heavily influential on which emotions are felt strongest by survivors.

“Inclinations towards or away from feelings of anger or sadness not only manifest verbally but also through physical expressions of grief, such as crying. Though studies have indicated that women cry more frequently than men do, the difference in behavior is not innate (Sharman et al., 2019). Research suggests no difference between male and female crying expressions until around age 11, when we start to see a reduction in boy’s crying expressions 7 (Sharman et al., 2019). Creighton et al. (2013) found a correlation between young men suffering peer death and feelings of “stoicism.” Some of their respondents considered their stoicism to be “inbuilt” and they rationalized their lack of outward expressions of grief as “the male body self-regulating” an inability to cry (Creighton et al., 2013).

Similarly, for Ken, crying did not align with his rationalized grieving process in any sense. He shared that he never cried for his friend, but wasn’t quite sure why he felt so disconnected from his grief:

“I've cried a number, a very few number of times. Just not many times in my life, I think I haven't cried in a year or two. But for him, I don't think I've cried, no…I simply didn't have the energy to be sad or something. Yeah. I've done some

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7 Sharman et al. (2019) found that the changes between boys’ and girls’ crying patterns were largely a result of boys reducing their crying expressions, not girls increasing theirs.
reflecting on it, but not too much. I guess that was surprising to me. I thought, I thought I would feel more.”

Further, he credited his stoicism as the product of his socialization:

“I think there's ways you're kind of socialized, though, to some degree, for sure. And I think that guys do tend to be set up more into, like, the stoicism, like, you gotta be able to deal with it…I think in some degree I've internalized things from the people around me, just keeping it more to myself. I'm introverted to begin with.”

An individual’s conception of how they “should” act depending on their gender comes from repeated social roles along the gender binary, a process known as social role theory (Eagly et al., 2016). This socialization of roles generally support[s] and sustain[s] labor divisions (Eagly et al., 2016). Women are expected to take on a caretaking, feeling role and men are expected to prioritize the pursuit of capital in roles that require “physical strength, assertiveness, or leadership skills” (Eagly et al., 2016, p. 1). “Manly virtue” is determined by a man’s ability to control their emotions and remain strong regardless of circumstances (Creighton et al., 2013).

A few of the male respondents in my study discussed that outward expressions of grief were “weird” for them because they weren’t used to showing emotions openly and were especially unsettled by crying in front of their friends. FCN and Rizz referenced “toxic masculinity” when they explained their grieving patterns and how they had been socialized to grieve. The term was coined in 20th-century men’s movements but has since been applied more heavily to therapeutic practices, feminist movements, and social policy (Harrington, 2020). “Toxic masculinity” refers to hegemonic norms of masculinity that have negative impacts on the emotional and physical health for all people (Fleming et al., 2014). Today, the term has been adopted into everyday vernacular and is frequently used by individuals who consider others’ or their own vices to be the result of gender constraints (Harrington, 2020). FCN and Rizz reported that they don’t feel as comfortable crying because of the “toxic masculinity” they’ve internalized. FCN shared:

“That's another, like, toxic masculine trait I have is that I don't cry often. So when I cry, it's like... It's weird for me. I'm not used to it. But this is one of those moments where I just couldn't like hold it in or control myself. It was the first time I cried in a while.”

Rizz shared similar feelings:

“As a guy, I feel like the only time a person through societal norms expects a man to cry is when a death happens, like, of a brother. Or family member, something like that. Um, so it's kind of like interesting, really balanced, like kind of tippy-toeing around me trying to not show emotions and me showing emotions to people. So, as far as the masculinity portion of it, I would say a lot of toxic masculinity did affect me in that sense. Especially, like, considering the fact that I'm in a fraternity. It's very masculine, dominant. Everyone's taught to be hard, you know, that stereotypical frat boy thing.”
Though FCN and Rizz did share in their discomfort surrounding displays of emotion, they both viewed crying as a necessary and inevitable part of the grieving process for all people. Given their positionality as college students in 2024, the men were able to recognize their “toxic masculinity” and critique it. Their self-awareness indicates a readiness to engage with problematic gender stereotypes which is a relatively new viewpoint. Older grievers may not be able to recognize how they exhibit gender expressions and, if they are, they might not characterize them as detrimental to themselves, women, and nonbinary grievers, all of which can be negatively affected by constraining ideals of masculinity.

**Intuitive Grief Through Spoken Word (or Lack Thereof)**

According to Stelzer et al. (2019) there are notable differences in grief avoidance depending on an individual’s first-person pronoun use. Both women and men reported talking about their losses with others, but the women in my study shared their experiences more openly with people uninvolved. Most notably, only women (although not all) reached out to authority or institutional figures either through the form of school resources or mental health counseling. All but one of the men I studied reported keeping conversations among their immediate circles, i.e. their close family and friends, many of whom had learned of the losses around the same time they did.

While some of the respondents talked openly about their emotions, a few of the male respondents actively avoided talking about their grief and limited expressing it with others. Ken noted that confiding in people felt like he was emotionally burdening them, so he chose to keep to himself:

“If I feel like something's overwhelming, I'll talk to friends who are able to talk to me about it. Yeah. But, I don't want to, like, lay that on their shoulders. So it's a very, not fine line, it's quite a thick line, but like... Just be careful and then I didn't feel like it was so significant. As I said it hadn't impacted me very significantly emotionally.”

FCN also related to Ken’s hesitation to lean on others in times of emotional hardship:

“A lot of men can be very silent when they're grieving. Uh, they sometimes don't reach out and lean on other people. I feel like I do have some of that. Like, I definitely can compartmentalize my grief and just try to avoid it and ignore it or push it away with, like, alcohol use.”

A few of the male participants chose not to share what had happened with people uninvolved entirely. Ken’s loss occurred during the summer before coming to a new school, so he could decide how much to share about his experiences. Ken said that he only mentioned the loss one time during his college career thus far, when he felt that it was “relevant” to the conversation. Other than that one time, the interview was the only instance of him discussing his friend’s passing while on campus and his friends haven’t pressed him any further. Likewise, Cash didn’t tell his friends until a little while after the incident, at his fraternity’s bonfire during which each brother was expected to share something going on in their life that they were dealing with. He decided to share, knowing that there wouldn’t be time to linger on his comment given the format of the event:
“My fraternity had these, we call them fireside gatherings. And, uh, basically we all just kind of sit around and, um, like we go around in a circle and we basically just say whatever's on our mind. Um, and sometimes it gets like really deep, you know? So, um, so when it came around to me, I was just like, yeah, my, uh, one of my best friends from high school this week just killed himself. I mean I said that, and a lot of people were like, kind of like, immediately turned. They, like, usually during those, people will talk to you at the end. Yeah. So like, the moment I said it, some people were like, oh my god, like, I didn't know that. Then they like turned away. But we have to like, keep it moving so everybody can speak, otherwise it'll take, like, five hours. So then it ended in, I don't know. I don't really think anybody spoke to me afterwards.”

Though Cash ultimately decided to share his emotionality with those closest to him, he did so via a format that would prevent further discussion. It made him uncomfortable to engage in a dialogue surrounding such an emotional topic as grief, so he restricted the conversation to feature only his acknowledgment of what had happened with no opportunity for a response.

As mentioned in the section on institutional support, many respondents relied on friends and families to help them move through their grief, but female respondents did so at much higher rates than male respondents. Unlike some of the male respondents, Angela relied heavily on spending time with her friends and talking through her experiences with them. Her friends were vital to her recovery and sanity in such a toilsome period of her life. She watched television with them, ate meals with them, and cried with them, all while holding space for the deceased by keeping them alive in her memory. The other women in the study reported similar outcomes, oftentimes choosing to be with others during vulnerable moments rather than isolating themselves.

The female respondents tended to prioritize communal activities such as cooking a meal, going to the mall, working out with friends, etc. Charlotte noted that because she talks so openly with her friends about all things in her life, both positive and negative, sensitive and not, talking about grief also comes inherently. She told me:

“You're a girl, I'm sure you get, like, we talk about, like, everything, like, it was like, you're on the kitchen floor at one in the morning, like, talking to your girl best friends, and just everything comes out, so, I think for me, it was, it was just, like, inherent in being a girl that, like, we talk about everything, so, it always was pretty easy to talk about.”

Young women may also be more likely to maintain an emotional relationship or continued attachment to a deceased loved one after their passing, a grief concept known as “continuing bonds” (Thai et al., 2018; Goodall et al., 2022). Though earlier grief literature suggested detachment was a griever's ultimate goal after completing Kübler-Ross’ five stages, Dennis Klass, Phyllis R. Silverman, and Steven L. Nickman offered continuing bonds as an alternative. (Goodall et al., 2022). Grievers may use specific rituals to maintain an “ongoing inner relationship with a deceased person” such as prayers for the dead or physical actions like lighting a candle (Goodall et al., 2022). Emily was the only respondent who mentioned routinely talking to the deceased directly. She shared that talking to her friend gave her a sense of comfort and normalcy that had been difficult to find since he had passed away:
“Talking to him still is, or like, it's kind of therapeutic for me when I go to the tree where he crashed and there's a cross on it and people will leave stuff. So sometimes I'll go there and I feel like I just talk like normal and it kind of feels just therapeutic.”

**The Inclusivity of Instrumental Grief**

Like Doka et al. (2000) suggested, male respondents frequently preferred instrumental expressions of grief over intuitive ones. Rizz felt that putting energy towards producing something would be more beneficial than dwelling on his emotions. He told me: “I was like, you know what, I could either cry about him or make something of his legacy.” For Rizz, that meant dedicating more time to his schoolwork and to building community with the fraternity that he and his best friend were both members of prior to his death. Ken also put more time towards schoolwork, a coping mechanism he had first developed during the beginning of the COVID-19 quarantine period. He told me:

“I think the consistent demands of work, life, maintaining relationships, other things, don't really afford too much time [to talk about my loss].”

Cash felt similarly to the men who poured themselves into their schoolwork, saying that he’s not “somebody who likes to, you know, live in delusion” and found “a sense of purpose” through “helping others.” Following his friend’s death, Cash felt stuck, but he also felt extremely motivated to do something with his life because he lived. Since he couldn’t do anything to save his friend who passed away, Cash dedicated his time to mental health and suicide prevention work to try to save other people in similar positions. He spends a lot of his free time trying to give back by helping out with his local Fire Department which dedicates time and resources towards programs that improve the livelihoods of firefighters, a demographic particularly affected by depression and other debilitating mental health conditions.

Unlike intuitive grieving, however, which appeared primarily among female respondents and appeared limited among male respondents, respondents engaged in instrumental grieving regardless of gender. Nina reported that she’s always used schoolwork as a way to escape negative emotions, but felt like her reliance on distraction increased after her friend’s passing. She confided in me that out of her high school graduating class, it was largely agreed upon that her friend who passed away showed the most promise. Since he died, she felt a new responsibility to honor his drive and legacy and fulfill her high school’s need for a success story. However, Nina wasn’t the only female respondent who took an instrumental approach. Immediately following her friend’s death, Angela relied on friendships for stability and expression in ways that some of the men did not and expressed “that [it] was really tough to see other people just like, being normal as if like, my entire world, like, hadn't changed.” However, after a brief period, she too became task oriented. She started adopting instrumental grief methods so that thoughts of grief didn’t consume all of her time. She realized that she needed to focus on distractions like “sudoku” and “puzzles” to keep her mind off of what happened since she found it debilitating. Emily told me that she too found ways to distract herself, primarily by using schoolwork to cope. She took “19 credits that semester just to distract” herself so that she “would always be busy.” The other two female respondents, Charlotte and Sarah also said similar things about distraction through “doing” as important to their grieving processes in some capacity.
Instrumental Grief and the Lens of Race

Though his answers corresponded with other respondents who demonstrated instrumental grieving, FCN had a unique addition to his interpretation of his grief. He understood it through the intersection of three different identities: age, gender, and race, rather than only two. As the only Black respondent, FCN felt an intense pressure to resume work as normal shortly after his friend’s death, despite initial impulses to withdraw from his schoolwork and responsibilities, because of the pressures felt by Black men in America. He highlighted the extra pressure to keep working despite his loss as the product of America’s limits on Black success and an assumed ‘normalization’ of young death in the Black community. He shared:

“I guess, as a black man, I'm kind of a little bit more numb to death than some people. Because I'm in a community with people that have lost, like a lot of their friends growing up, and where death is just, like, more of an ever-present reality. So, like, even when I was going through the grieving process, there were people that were definitely sympathetic, but would remind me that this isn't uncommon in the country we live in.”

Later, FCN expanded on this same idea:

“I think there's a very masculine urge, especially like a Black masculine urge to just keep the grind going. Never stop, never give yourself space to grieve. Really. Just like, give yourself a date and get right back to doing whatever you do… Like if you didn't have that mindset, you wouldn't really get places.”

FCN felt like the racialized constraints in our country don’t allow Black men to take the space they need to heal because they can’t afford to waste that time. Falling behind isn’t an option for Black men because they aren’t awarded the same privileges as other demographics of grievers. Though FCN felt race was relevant to expressions of grief, no other respondents expressed their race as being important to understanding their grieving processes.

The Choice to “Rationalize” Grieving

Though all respondents should some form of instrumental grieving, many exhibited a preference towards rationalization more specifically. Rationalization refers to a specific aspect of instrumental grieving in which the individual conceptualizes their grief through an objective lens rather than an emotional one. Doka et al. (2000) associated rationalization more heavily with masculine forms of grieving, but I found evidence of rationalization among most of my respondents, regardless of their gender identity. Even when they weren’t directly prompted with a question focusing on “rationalization,” many of the respondents used some form of the word to characterize their grieving patterns or described a line of thought that could be considered a rationalization of grief even when they didn’t use the word directly. Ken told me:

“I always kind of thought of myself as a not super emotional person, I tend to rationalize things very strongly, and I guess counter to what you'd probably expect the next sentence to be, I think I was even more rationally approaching it than usual.”
Others said similar things such as:

“I tend to try to rationalize my grief and rationalize death and stuff like that.”

“I guess that's, like, my default mode, to rationalize…I'm rationalizing it all the time. I just think that's what happens to people [experiencing grief].”

“Definitely, I do [try to rationalize things] and I think that's like a large part of what kind of hindered my, like, religious beliefs too. Just because you're so at a loss of the reasoning, and I still have yet to find a reason, and I probably never will, but rationalizing it does not work.”

Looking at their losses through an objective lens allowed respondents to continue the actions necessary to their daily lives. Though some found themselves incapacitated by their losses in the beginning, most eventually realized that they had to cut themselves off from their emotions to some extent to function. All of the respondents are college students with constant responsibilities and workloads. Many were also in the second half of their college careers which may mean an even heavier workload. Despite debilitating losses, the respondents shared in their aspirations of staying on top of their work and not falling behind their peers, whether that impulse was motivated by financial reasons, gendered conceptions of one’s drive, or a desire to stay with their already established social circles.

Dissonant Grieving

Since conceptions of how grievers should act are outdated, individuals’ expressions of grief often don’t match their gender orientation. Doka et al. (2010) also offer a third type of grieving: dissonant grief, for people whose natural experience of grief doesn’t align with societal expectations for how they should be grieving. Since grief expressions are considered heavily gendered, they are policed by other members of peoples’ social circles and membership to a group can be contingent on embodying the socially assigned displays of grieving (Creighton et al., 2013). A misalignment between expectations for their expressions of grief either from familial, cultural, or peer pressures can lead to feelings of guilt and shame or, more drastically, alienation from a group (Doka et al., 2010; Creighton et al., 2013). FCN noted some shame around not fitting into gender expectations precisely, saying:

“I think there's a lot of toxic masculinity going into like how men grieve and just preconceptions of how men are supposed to grieve. Like we're supposed to be the stronger figure in the grieving process. We're supposed to be the person people are there to lean on. And if you break out of that, then you can feel lesser as a man or other people can look at you differently.”

Some respondents reported feeling the burden of fulfilling the grief roles that seemed to be assigned to them. As the only girl in her friend group, Sarah felt like the bulk of caretaking labor fell to her. This was a job she felt capable of doing well, but she questioned the reasons why everyone assumed it to be her job. She recalled:
“I'm the only girl in the friend group, and this may be a projection, but I think there was also, like, a little bit of feeling like it was somehow my job, or that people were expecting of me, like that sort of, like, caring role, so I was just, like, much more involved in the immediate end. You know caring for and dealing with like, reaction to what was happening. Like, it was in part my job to tell people he had died.”

Later in the interview, I asked if she felt like gender played a role in her personal grieving process or if she only felt that it was projected onto her. She shared that she normally considers herself to be a very rational person and doesn’t feel like she is a particularly emotional person especially in comparison to other women. She concluded that she did feel an impulse to take a traditionally feminine role in group settings, but didn’t feel the effects of gender socialization when she was alone:

“I honestly don’t think [gender roles] played that much of a role in terms of like my personal grieving, and I have no way of knowing whether, like, this is like a whole broader question about gender, but like whether or not it did in this situation I felt, like, really responsible to make sure everyone was okay.”

Though some felt forced into the roles they were assigned to, a few of my respondents actively rejected the gendered expectations of grieving. Cash said that even though “guys aren't like supposed to show emotions or whatever,” he “stopped caring about, you know, societal bullshit like a long time ago” and Nina talked about how she wanted to move away from “female” expressions of grief after seeing her mother and sister react in “overly emotional” ways. She said:

“My sister and my mother both tend to be incredibly emotional, and so it was annoying to me because I was like, not that it wasn't valid for them to be sad, but it was like they would be sad and they would bring it up…and my dad does not show any emotion at all, which is like, very gender typical, I would say. Yeah. But I always really like, hated how emotional my mom and sister were, and like, I never really felt like I, as a child, I don’t know but I didn't really open up to them. And so in a weird way I feel like sometimes my actions are not aligned with like what would be like typically assumed of my gender. ”

It wasn’t until Nina was in an art class and chose to give her project a grief focus that she felt like she was expressing her grief in a feminine way. Though she found the process “cathartic,” she also felt self-conscious when her professor pointed out that she took a “very emotional approach,” as she had been very against leaning into her emotional impulses:

“With my like art project and my professor putting it out, that felt very gendered even though like one of the other [two] people in my class was a girl. Mine was not super emotional, but it was like, more than the two others and [I was] choosing to do grief. I know I feel the need to care of people more, and sometimes I do that to a degree that I don't take care of myself, but I really try, both consciously and unconsciously, to reject the very emotional stereotypical female reaction.”
Nina’s “gendered expression” in her art made her feel uncomfortable because it undermined her dedicated attempt to refrain from grief displays that could be interpreted as “emotional” or as an “overreaction.” Nina’s responses indicated an internalization of misogynistic norms that synonymize emotional expression with weakness. Emotional expression is not inherently negative, but when it becomes associated with femininity, it can get mischaracterized as such (Eagly et al., 2000).

**Potential Inadequacies of the Gendered Lens**

It is important to note that some studies have found “no gender differences…between bereaved students on measures of psychological distress” (Lawrence et al., 2006, p. 323). These findings do not mean that the way of expressing grief is the same among genders, but it does indicate that all genders experience feelings of grief profoundly. Studies that find women experience feelings of grief more strongly need to consider that women may be more open to expressing their feelings of grief than men. Another study, Olaleye et al. (2022), found a statistically significant difference between male and female college students, with the female students experiencing greater impacts of all six holistic grieving effects: emotional, cognitive, physical, behavioral, interpersonal, and spiritual. Male college students may also be experiencing the six holistic grief effects strongly but may have more difficulty expressing such. In examining grief through the lens of gender, researchers must be careful not to undervalue its impacts, but also not reaffirm the problematic nature of the gender binary which has detrimental effects on all grievers. Young grievers of today are cognizant of the role they play in its reaffirmation, and they often work to dismantle the negative associations of masculinity and femininity.
Conclusion

Summarizing the Data

While certain grief theories corroborated the experiences of the college students I interviewed, such as grieving through instrumental or intuitive methods, the increased use of drugs and alcohol in response to bereavement, the highly personalized experience of grief, etc., others failed to capture how young adults grieving peer death are unique within these frameworks.

My research showed patterns of grieving coinciding with theories of gender and religion concerning grief in existing literature, but these were still distinct from how broader populations engage with gender and religion during their grieving process. Though young people often expressed their grief in gendered ways, the way they understood their role in gendered grieving differs from older populations. Interviewees were quick to point out gender stereotypes in their behavior and the behavior of others, critiquing them as products of the gender binary. For example, when some of the male respondents experienced unhealthy grief responses, they were able to recognize them as such while also linking their behavior to “toxic masculinity.” Their grief responses are still gendered, but the recognition and self-reflexivity to understand the behavior was a noted difference.

Similarly, religion was relevant to respondents’ grieving processes, but in a seemingly diminished role than the existing grief literature may have predicted. Respondents who turned to religion did so not from an increase in belief, but as a return to a form of self-comfort learned in childhood. Religion could temporarily offer a coping mechanism for grieving, but as the grief subsided so did respondents’ religious inclinations. While religion remains relevant to grief work, it manifests differently for young adults in 2024 who are experiencing an increasingly secularized world and don’t seem inclined to bolster their spirituality.

The data I collected seemed to mostly corroborate the existing research on the other two topics: substance use and institutional failure, in that both were highly relevant to college-aged populations and posed detrimental risks to their well-being, but despite aligning with existing literature, both the substance use and institutional failure sections were far less exhausted in the literature than the other two topics. This is most likely because of their specificity as niche topics which makes them more relevant to college students specifically, as opposed to the greater population. As explained previously, studies specifically focusing on the struggles of college students are infrequent. Though I found very interesting findings for the two topics, I believe that these sections would have been more developed if I had a better base of literature to ground my findings in. Then, I could better compare my respondents’ experiences against the broader population. In terms of institutional support, respondents found services to be lacking, primarily due to their rationalization which made them impersonal, inaccessible, and untrustworthy in the eyes of the respondents. To make up for institutional failures respondents used friend networks and activities to distract themselves, but some grievers also increased their use of alcohol and/or marijuana to minimize their emotionality. Though increases in alcohol and drugs have been associated with grief work previously, young grievers offer a new way of classifying their substance use. Instead of viewing their usage as problematic, they considered it medicalized, exhibiting behavior and using language consistent with “self-medication.”

One key takeaway from examining the data holistically that was not highlighted earlier in my paper was the sense of a “false immortality” among young adult grievers of peer death which made their grief distinct, even from other young grievers. Respondents continually harked on feelings that their peers “weren’t supposed to die” given their young age which made their deaths
more difficult to understand and process. Sarah, who experienced two different unexpected losses in a short time without ever experiencing loss before, found the grieving processes of each highly dissimilar. One of her losses was the mother of two boys whom Sarah spent much time with growing up, and the other was her friend from her on-campus club. Despite being arguably closer with her family friend, she found it more difficult to grieve her peer as she was subconsciously more comfortable with death at an older age. Additionally, her relationship with her peer as “only a club friend” made her feel unjustified in her grief. Her intense feelings troubled her as a result since she couldn’t understand why she felt so strongly. She told me:

“I also don't not cry a lot, so it was kind of surprising [that I cried three times for him and none for my family friend]. And also I think my inability to get my brain to think about other things was kind of surprising. Again, because it's not like we were best friends so I don't think I would have expected that.”

Multiple other respondents shared similar sentiments to Sarah, expressing how surprised they were by their difficulty conceptualizing their peer’s death. FCN shared that peer loss “knocks you in the face when it's someone personal and you really don't expect it. Yeah, you really don't expect it.” And Charlotte shared:

“You don't think of a 20-year-old passing and, if you do think so, or at least for myself, it’s of that route of like things that you can diagnose and see, like disease and illness with mental health. So I think it just came a lot more as a shock and it kind of made me re-evaluate that death isn't just a thing for old people. Which like, of course I knew that before, but it's a lot more obvious and a lot more startling when it happens to someone who is literally your exact age.”

One of the ways peer death is so difficult for young grievers to process is because of its unexpected nature. Despite knowing very little about death generally, the little bit of knowledge that respondents did have on how to deal with grief was unhelpful since the person who passed away was their age. Their proximity to the deceased caused them to face their own mortality, often for the first time, a highly destabilizing experience, especially in conjunction with the grief they feel for their friend.

**Research Limitations and Potential Future Study**

While I found patterns among my respondents and their particular experiences, my subset is not necessarily indicative of the greater college-aged population in the United States. Though experiencing loss can lead to profound effects for anyone experiencing it, different groups are more likely to have experienced loss at varying frequencies. My data set was identified primarily from personal connections and connections from social circles close to mine which homogenizes the responses. All respondents were grieving their first close peer loss, so they often didn’t have any experiences with grieving a young person or a premature death. This inexperience isn’t typical for some other populations within the United States. One of my respondents hinted at this difference when he explained that his experience of peer death may be different from other college students as a Black man. He shared that death is regarded as more frequent in the Black community which may differentiate the responses to loss in Black communities from the responses most of my respondents experienced at primarily white institutions.
While other wealthy countries have seen steady declines in their mortality rates for young people, the mortality rate in the United States has remained unchanged or increased for every age group, with “poverty, race/ethnicity, gender, parental education, family structure, and regional location” as key indicators for one’s mortality risk (Population Reference Bureau, 2022). Economic and racial disparities are clear: Black and Mexican-American young adults are at a greater risk of death than white young adults and young adults raised in low-income households or have parents with low levels of education also face higher risks (Population Reference Bureau, 2022). My study highlighted the experiences of students at wealthy institutions achieving higher education degrees, which grants them a certain level of privilege even when they may not have been raised in wealthy communities previously. Undoubtedly, their positionality influences their conceptions of peer loss and the resources available for them to deal with their tragedies.

Despite the potential limitations in my data, the findings still revealed interesting commonalities among my participants, some of which I had time to highlight and others that could be explored in further study. In reviewing my data, I primarily identified two possible follow-up studies that could be conducted to better understand college students’ grief patterns. The first would be a more in-depth study on the use of marijuana as a self-medicating practice. Despite its growing popularity, the prevailing stigma against speaking about marijuana use limits both researchers' willingness to devote resources towards studies and respondents’ willingness to participate in studies that may implicate them in drug usage. Despite practices of self-medication being evident in my data, I found difficulties situating my data in greater research which may have restricted my analysis.

Another opportunity for further research would be a study of grieving under the scope of social media use. Many theories of bereavement were developed prior to the widespread use of social media, so they lack an important aspect to consider: technology. The development of the digital footprint is recent, but the social media accounts of young adults dying today may remain up for multiple years before their inactivity leads to their deletion. Furthermore, those who live on after the deceased can post tributes in dedication to their loved ones on their accounts or create whole new accounts in the name of the deceased to circulate images and stories, so their memory isn’t forgotten. The increasing prevalence of these posts means people tangentially related to the deceased will learn of their passing via social media, creating a new disconnected way of mourning that wasn’t possible previously. Though not new, we increasingly take more photos and videos of higher quality which allow the deceased to live on in some digital form.

Final Thoughts

Though it is apparent across the literature that the systems we have in place are insufficient for supporting young grievers, there is little consensus on what meaningful support actually looks like, much less concrete plans for what institutions can give them to make the process easier. The systems are failing young adults and their self-appointed replacements for institutional or religious help can only work so well for so long.

Further research should be done to better understand what would be beneficial for this specific group of grievers who are often excluded from conversations about what it means to grieve. Their combination of identities both as young grievers and as grievers experiencing peer death make them even more underrepresented in literature and theory than if they only carried one of the two identities. Their identities as young adults exclude them from both child and adult grief work which may leave them unsupported, in a precarious in-between state, and the specificity of

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8 Young people living in southern states are at higher risk of death (Population Reference Bureau, 2022).
peer death is often characterized as less significant than other forms of loss, making them feel unjustified in their grief. Furthermore, the group’s inclination towards secularization and their expanding understandings of gender expression are unique to their generation which may alienate them further from older grievers.

Additionally, my studied demographic is often learning how to process death for the first time while under disorienting circumstances of change and instability affecting all those undergoing monumental transitions even without the stresses of grieving. Separated from childhood support systems but not yet well-situated as functioning adults, young grievers of peer death are left without resources that adequately address their needs since their institutions routinely fail them. Without robust institutional support systems, young grievers attempt to console themselves with unsustainable coping mechanisms such as substance use and isolation, which may have detrimental effects on both their mental and physical health.
Works Cited


Appendix

Interview Schedule

Background Information
1. Demographic identities – What identities are most salient to you?
   a. Are there any aspects of your identity that most influenced your grieving processes?
2. Can you tell me about the person you lost?
   a. What was your relationship?
3. How did they die/How long ago?
4. Have you ever experienced a loss before?
   a. If so, how did that loss differ from your experience with peer-to-peer loss?
5. Can you reflect a little bit about what the grieving process has been like for you?

Overall
1. What has surprised you the most following your loss?
   a. Have any parts of this experience been surprising to you?
2. What brought you the most comfort after their death?
   a. What are your coping mechanisms?
3. What about your lifestyle changed to accommodate such a loss?
4. Did their death notably change your behaviors in certain ways that you have not yet mentioned?
5. Would you say you have specific rituals for death or for grieving?
   a. What are your perceptions of how communities you’ve been a part of have approached death through rituals?
6. Do you have a specific object or place that you have a special connection with concerning your loss/grieving process?
7. How do you think your gender identity plays a role in your grieving process?

Spirituality and Religion
1. What are your cultural practices and rituals towards death and how would you define them?
   a. In your family or culture, how did you learn to deal with death?
2. Has your attitude towards spirituality changed following your loss? Or how did your relationship with religion change?
3. Have you had any profound experiences that you believe to be a connection with the divine?
   a. Do you believe in the supernatural?

Social and/or Retreating
1. How did your social interactions change following their passing?
   a. Did you find your relationships with other people changed after their death?
   b. How did the loss of your peer change the way you interacted with your other relationships? For example, your friends? Your family?
      i. How does surrounding yourself with others make you feel?
   c. Did you find yourself going out more? Retreating inward?
2. Did your substance usage change following their death?
a. Have you had any experiences with self-medication?
3. Did you join any new clubs or groups after the loss?

Institutional
1. How did your school approach your loss?
a. What counseling and loss services did they provide you with?
b. How did they adjust your workload and class expectations?
c. If the death occurred while the student was on campus, how did the school shape the rhetoric of their death?
2. Did you seek out counseling or therapy services?
a. Were they helpful? Why or why not?

Ending
1. Is there anything else you would like to share with me?