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RESEARCH ARTICLE

SWALLOWING THE PAIN: THE EFFECT OF CONDOLENCE CULTURE ON TRAUMA AND GRIEF EXPERIENCE

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Abstract

Objective: The aim of this study was to examine the effects of the rituals that are considered appropriate by Turkish society during the condolence and mourning process of individuals who experience loss on the individual during and after the condolence and mourning process.

Method: This qualitative research is based on the interpretive phenomenological approach. A total of 22 participants who had lost a family member within the last five years and were identified as bereaved were included in the study.

Results: The data obtained from the participants were analyzed using the content analysis method and six themes were identified: Swallowing Pain, Idealized Rituals Creating Trauma, Cultural Mourning Rituals Transferred between Generations, Dreams Turning into Nightmares, Revived Traumatic Memories, and Rituals Affecting Cultural Beliefs and Life Functions.

Conclusion: These findings show that condolence and mourning rituals practiced after loss in Turkey negatively affect individuals' experiences of death, pain, and grief.

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Introduction

Thousands of deaths occur every day in almost every region of the world due to wars, migrations, disasters, terrorist attacks, disease, accidents, old age, etc. Death describes the systematic restructuring of a network of relationships and the emotional and embodied loss of an object of emotion and attachment. Although death is universal in its context, the expression of the pain of death is known to vary from culture to culture and from religion to religion. Death is therefore a major challenge for the living, who must deal with both the death of the individual and the need to act in the event of the death of another. While the unique solutions of different communities to death cannot be compared or generalized, each culture has developed its own unique ways of dealing with this problem (Cacciatore & DeFrain, 2015). One of these solutions is culture-specific mourning ceremonies and cultural rituals that societies adopt to make the grieving process less painful.

Rituals can be defined as structured ways of mourning and expressing grief after loss. Through rituals, we access the determinants of meaning attribution that involve the relationship with the deceased (Smid et al., 2018). According to cultural traditions, rituals can be performed at the time of death, at the time of farewell or burial, and at specific moments of remembrance. According to Turkish cultural traditions, rituals such as mourning, serving the deceased (such as distributing food, giving charity, praying, tying black hearts, avoiding joy of life and happiness, not doing enough self-care before the deceased reaches 40, avoiding sexual intercourse), distributing the deceased's clothes,

especially during the condolence process, while being happy and joyful is considered a right of the family members who come to condolence, the individuals who condole are deprived of this right and even criminalized. Although these rituals are of vital importance to societies, it should not be ignored that they have serious negative effects on the bereaved.

Failure to perform mourning rituals is often characteristic of the traumatic loss of loved ones and leads to feelings of guilt toward the deceased. It has even been emphasized that the lack of condolence and mourning rituals internalized by cultures affects pain and symptoms of posttraumatic stress disorder (Hinton et al., 2013). In this study, we question whether this finding occurs as a result of rituals required by societies or as a result of behaviors internalized by individuals. I believe it would be more appropriate to clarify this dilemma and then focus on the process. Indeed, there may be cultural explanations for the fact that in dreams, mourners see, feel, smell, and speak to the person they have lost. They may even feel strongly encouraged or incentivized by the deceased to perform certain actions, even though the rituals culturally required to be performed are considered traumatic by the bereaved. In addition, dreams may be interpreted as evidence that the deceased is in a poor mental state, which may indicate the need to perform virtuous actions (e.g., lamenting, making offerings, distributing clothing) and appropriate rituals (Cacciatore & DeFrain, 2015; Smid et al., 2018). Similarly, many death rituals allow the bereaved to settle accounts or convey apologies or gratitude to the deceased, and therefore, failure to perform the obvious mourning rituals creates a sense of guilt in the individual. In summary, although the desire and need of the bereaved to perform the rituals of condolence and mourning traumatizes them, it is seen that the obligation to perform these rituals (cultural dominance) arises in order to alleviate their own feelings of guilt.

Cultural dominance (the obligation to perform rituals of condolence and mourning) and incongruence can contribute to detachment, alienation, and mistrust, events that can exacerbate PTSD as well as Persistent Complex Bereavement Disorder (PCBD) and Prolonged Grief Disorder (PGD) following bereavement. In addition, the inability to perform culturally appropriate rituals related to death or bereavement is often characteristic of traumatic losses of loved ones. It is emphasized that this may also affect PCBD or PGD and PTSD symptoms. However, some research has shown that cultural traditions, beliefs, and values make a difference in how people express their pain and try to cope with it (Cowles, 1996). Therefore, the literature suggests that culture is also important in the lives of people with mental health problems. In particular, individuals and communities from immigrant, minority and indigenous backgrounds are affected by cultural dominance and its relationship to historical trauma, loss and intergenerational grief (Kirmayer, Gone & Moses, 2014).

Grief is commonly defined as the pain experienced after a significant loss, such as the death of a loved one (APA, 2020). In another definition, grief is a lifelong human experience due to the inevitability of attachment and loss, and the stronger the attachment, the more likely the individual is to have a strong grief response (Giblin & Hug, 2006). However, not all losses result in a strong grief response. While some survivors are able to resume their normal lives after a period of time, others seem to be stuck in a process that takes years or even decades to complete. In this context, bereavement disorder has been included in official diagnostic systems for the first time in recent years. Specifically, in the eleventh edition of the World Health Organization's (WHO) International Classification of Diseases (Killikelly&Maercker, 2017; WHO, 2018) and in the fifth edition of the American Psychiatric Association's (APA) Diagnostic and Statistical Manual of Mental Disorders (DSM-5) (APA, 2013). While the duration of grief can be the subject of complex personal and social negotiations, resulting in wide variability across cultures and individuals, the World Health Organization's statement is important:

"The grief response has persisted for an unusually long period of time (at least more than 6 months) after the loss and clearly exceeds the social, cultural, or religious norms expected for the individual's culture and context. Grief reactions that persist for prolonged periods of time within a normative grief period, given the individual's cultural and religious context, are considered normal grief reactions and are not diagnosed"(WHO, 2020).

With this in mind, the ICD-11 does indeed offer some caveats regarding the cultural dimensions of grief in the sections "Borders on Normality" and "Culture-Related Features". It is noted that people who share the cultural or religious perspective of the bereaved may be considered abnormal in their response or duration of response to the loss. It is also noted that cultural practices regarding the normative duration of grief, expression of emotions, rituals, concepts of the afterlife, stigma associated with certain types of death (e.g., suicide) may differ and mediate the likelihood of experiencing prolonged grief reactions as well as clinical symptoms (WHO, 2020).

The literature suggests that rituals have many potential benefits in supporting grief adjustment in individuals experiencing loss. Performing rituals has been found to facilitate the expression of feelings and emotions (Rando, 1985; Vale-Taylor, 2009), be useful in assessing life priorities, accepting loss, and controlling grief (Castle & Phillips, 2003), help maintain a meaningful connection with the deceased (Mroz&Bluck, 2018), and help control the changes and uncertainties that occur with loss (Norton & Gino, 2014). On the other hand, it has been emphasized that funeral rituals are also embodied and aesthetic experiences that mediate the meaning-making of grief and work to create positive memories, hope, and new meanings (Cann, 2018; Giblin& Hug, 2006). Based on these findings, authors may conclude that condolence and mourning rituals facilitate adjustment to the grieving process. However, cross-sectional studies do not provide information on the extent to which ritual performance alleviates grief reactions. Similarly, it is important to focus on whether the performance of condolence and mourning rituals by individuals who have experienced loss is a cultural compulsion (e.g., not to be excluded from society, not to be despised, not to feel guilty) or whether individuals perform them voluntarily.

The Objective of the Study

In the process of mourning and grieving, it is obviously important for individuals and society to perform certain rituals, but these rituals can also help individuals to express their feelings, to reduce the emptiness caused by the death and thus to relax, to have a positive effect on facing the loss, and to postpone the meaninglessness caused by the death, even if only for a while. It is even recognized that knowledge of the effects of different rituals is potentially useful for counselors and psychologists who assist the bereaved. However, there seems to be confusion about whether some rituals performed during the condolence and mourning process have negative effects on the individual. Particularly when considering Turkish cultural peculiarities, we see that the performance of mourning and funeral rites by individuals in the mourning process reflects a traditional understanding accepted by society. This reflection is widespread throughout the country. Accordingly, in this study, we used a qualitative study design to examine how rituals performed by bereaved individuals during the funeral and mourning process of their loved ones affect their grieving process. Specifically, we collected information on various aspects of the rituals performed during the condolence and mourning process in a group of recently bereaved individuals, including various grief indicators, psychological functioning, and various aspects of condolence. In this context, we focused on four rationales in this study: The first rationale is to investigate whether the performance of rituals considered appropriate by society (such as wailing, making a mess, asking for one's own death, rebelling against God) during the funeral (condolence) process causes a traumatic process in the individual. The fact that the mourning that should normally be experienced is not experienced due to rituals, causing individuals to bury their pain and swallow their pain due to this obligation. The second rationale is to investigate whether the rituals (such as distribution of food, distribution of the deceased's clothes, not cheering up before the 40th birthday, postponement of self-care, etc.) that must be compulsorily performed during the funeral (condolence) process cause the individual to postpone mourning. The third rationale was to investigate whether individuals' life functions and dream contents change as a result of the rituals during the condolence and mourning process, and whether they are willing to pass these rituals on to future generations. Finally, the fourth rationale was to study the impact of commemoration rituals, which vary from culture to culture during and after the mourning process of the deceased, on the individual (whether past traumas are revived during the commemoration process and the impact of this situation on the individual).

Method

Sample

This study explored the views of people who have lost a family member in the past year on the condolence and mourning rituals they perform during the condolence and mourning process. This qualitative research is based on an interpretive phenomenological approach. This technique examines the situation (condolence and mourning process) through the eyes of the individuals experiencing the loss. It aims to investigate the meanings that individuals encounter in their daily lives and to reach a new view of the universe by revealing the overlooked meanings of these encounters (Alase, 2017). In other words, this approach provides deeper data from the hidden and invisible experiences of individuals that are less accessible through other methods (Gerrish& Lacey, 2010). In order to better uncover hidden experiences, this study used an interpretive phenomenological approach to explore the situations and narratives of individuals who have experienced loss in relation to the rituals they perform during the condolence and mourning process.

Participants

This study used the criterion sampling method, which is one of the purposive sampling methods commonly used in qualitative research. Criterion sampling is the study of all cases that meet a set of predetermined criteria. The criteria are either created by the researcher or a list of previously created criteria is used (Marshall & Rossman, 2014). In this study, the main criteria were the loss of a family member within the last year, being between the ages of 19 and 25, and scoring 25 or higher on the Grief Scale (Harkness et al., 2002; Prigerson et al., 1995). Thus, a total of 22 bereaved young adults (15 females and 7 males) were included in the study. Descriptive information about the participants is presented in Table 1.

Table 1: Information about Participants.

Sequence No.	Gender	Age	Educational Status	The Person He Lost	Cause of Loss	Mourning Points
1	Woman	23	University	Auntie	Heart attack	26
2	Male	22	University	Father	Kidney failure	29
3	Woman	23	University	Grandfather	Senile	25
4	Woman	24	University	Father	Heart attack	32
5	Woman	20	University	Grandmother	Senile	26
6	Woman	21	University	Uncle	Heart attack	30
7	Woman	23	University	Brother	Suffocation	41
8	Woman	24	University	Uncle	Heart attack	36
9	Woman	22	University	Uncle	Cancer	25
10	Male	20	University	Father	Traffic accident	45
11	Woman	25	University	Father	Heart attack	28
12	Male	22	University	Uncle	Cancer	30
13	Woman	24	University	Mom	Traffic accident	26
14	Woman	25	University	Auntie	Heart attack	36
15	Woman	23	University	Grandmother	Senile	28
16	Male	24	University	Uncle	Suicide	32
17	Woman	25	University	Brother	Suicide	38
18	Male	23	University	Uncle	Cancer	36
19	Male	22	University	Father	COVID-19	26
20	Woman	21	University	Father	Traffic accident	40
21	Male	24	University	Grandfather	Senile	32
22	Woman	22	University	Uncle	Heart attack	34

Data Collection Tools and Process

As part of the research, qualitative interviews were conducted with 22 participants who met the research criteria (who had lost a family member and scored at least 25 on the grief scale). In order to conduct in-depth interviews, a semi-structured interview form was prepared by an author who is an expert in grief, a mental health counselor, and a psychologist. Some questions included in this form are what are the culturally determined rituals associated with the grieving process? Do you think the experiences you had during the condolence process revived your past memories? How were the rituals you performed during the condolence and mourning process reflected in your dreams? What are the culturally determined rituals associated with remembering the dead?

Prior to data collection, a pilot interview was conducted (by the author) with 3 people who met the participant criteria to evaluate the interview form. After the pilot, no changes were made to the interview form, and the people who participated in the pilot were included in the study. After the pilot studies, in-depth interviews with the participants were started. In-depth interviews were considered the most appropriate method for understanding the experiences of people who have suffered a loss in relation to the process after the condolence and mourning rituals have been performed, as they allow a more detailed understanding of the effects of rituals related to the condolence and mourning process over time (Stroebe et al., 2003). All interviews were conducted face-to-face. In line with phenomenological research, participants were asked to provide detailed descriptions of their experiences. Each interview lasted about 40 minutes. All interviews were audio-recorded and later transcribed verbatim by the author. On the other hand, a grief scale was used to measure the participants' level of grief. Information about the scale is provided below

Traumatic Grief Scale (TGS): This scale was developed by Prigerson et al. (1995) to determine the level of traumatic grief in individuals who had experienced a traumatic loss of a relative 6 months or more previously. The scale was adapted to our language by Atak et al. (2012). The scale, which is a 5-point Likert type, consists of 19 questions and a single dimension. The Cronbach alpha coefficient was found to be 0.94 and the test-retest reliability was $r = .80$.

Data Analysis

In this study, the data obtained from the participants was analyzed using the content analysis method. Content analysis is a general term for a number of different strategies used to analyze text (Powers et al., 2010). Then, themes were created based on the content analysis. The strategy to ensure validity and reliability in qualitative research is expert review or expert review (Merriam, 2018). In addition, the obtained categories were explained using the verbatim statements of the interviewed participants in order to ensure the validity of the research (Yıldırım and Şimşek, 2006). On the other hand, in order to ensure the validity of the written interview questions prepared by the researcher and other experts, the form was presented to expert opinion in terms of understanding and coverage of the subject under study, and necessary corrections were made according to the feedback received. In terms of reliability, the transcriptions of the data, an issue highlighted by Creswell (2014), were checked by comparing them with the recordings. Some of the participants' responses to the questions are presented as direct quotations. In the direct quotes, information about the participants is given as participant number, participant group, and gender.

Results

In this section, the in-depth interviews with the participants were analyzed and the resulting themes are given. Themes obtained as a result of the analysis; it consists of 6 themes: Swallowing the pain, idealized rituals that create trauma, cultural mourning rituals transferred between generations, dreams that become nightmares, reviving traumatic memories, and rituals that influence cultural beliefs and life functions.

Theme 1: Swallowing the pain

Relatives who participated in the mourning process and whose goal was to share the pain of the deceased sabotaged the mourning process (according to cultural and ritual, the mourner has duties such as distributing food, taking care of the visiting relatives, receiving them, and seeing them off. In other words, it was observed that they expected a service instead of sharing the pain experienced during the condolence. They stated that the mourners, who wanted to get some relief and share their pain by establishing closeness and contact, buried their pain inside themselves and had to swallow their pain because of the culture of service.

Yusuf Bey, who did not have the opportunity to shed two tears for his father and say goodbye to him, expressed his situation as follows Immediately after my father's funeral, without experiencing our pain and grief, they told us to go to the stove, distribute tea, feed the people, and take care of the people. The people who come think that the place of condolence is a coffee house. They drink tea and get up, but the people who come are laughing, sitting with their friends, having fun. "My father died and I loved him very much, but you feel very bad at that moment because of this service and the behavior of those who came" (Male-2). Similarly, Mrs. Ceylan, who did not grieve for serving the relatives who came during the condolence process and who suffered from this loss, said, "I suffered seriously because of this. Because in that intense time, a person cannot be alone with his pain, and by keeping it inside, he marginalizes it and pushes it beyond. After some time, when the families and everyone else had gone home, I began to live in myself. But I could neither cry nor talk. "It was as if I was frozen" (Woman-1)

During the mourning process, it is not appropriate for the mourners to be happy, cheerful and laughing in their daily lives for a certain period of time (according to Turkish culture, this is an average of 40 days), according to the traditions of the culture. As a sign of respect for the deceased, mourners wear black for an average of 40 days, men do not shave their beards, and women do not wear colorful clothing. Individuals who act contrary to these behaviors (losers) are despised by society. This situation creates guilt in the individual who suffered the loss. It has even been said that it makes one feel as if one is betraying the deceased. It has been observed that the mourners who continue their lives in dilemmas, on the one hand, do not experience the pain of the loss and, on the other hand, suffer from the pain they do not experience, that is, they suffer from the agony of not being able to experience the pain.

For example, Mrs. Ebru explained her situation as follows: "Of course I was very angry at that time, I expressed that I hated people. My anger towards those people, I didn't want to see anyone, it seemed very fake to me, this support seemed very fake to me, but then a teacher of mine called me. For example, I couldn't express my feelings because I was so happy. But then I looked around and thought, "Do these

people despise my happiness? Do they find me strange? And so it was, the people around me looked at me strangely. "The culture dictated that I should be very dull or sad, in a sense, embittered by life" (Woman-7). Another participant, Can Bey, explained his situation as follows: "I could neither cry nor laugh. If I cried, society criticized me, saying it was a sin, and if I laughed, they said it was a sin to laugh at someone who had died. In short, I buried my pain inside. But I also experienced the agony of not being able to experience that pain. He said, "I postponed my grief because of the confusion of not knowing what to do" (Male-21).

During the condolence process, sometimes a lament is made for the deceased, and this lament seems to be equipped with the norms and rituals of the society. Sentences are uttered that express their wish and desire to die instead of the deceased. This is actually a process that can be seen as a reflection of the archaic superego. In a way, it is reflected as processes that are internalized by society and show feelings of guilt and shame in general. Mr. Emre describes the incident he experienced regarding this process; he described his mother as saying: "At the death of her brother, if God had taken my life instead of yours, if I had died instead of you, God, why is this happening to me? Why is it my child and the neighbor's child? God, take my life so I can get rid of this pain. (Man-10). EmreBey's mother's reactions to his brother's death may indicate that he felt both self-blame and shame. Among the frightening effects of trauma, the feeling of shame stands out for its complexity and depth. What happens here (the processes immediately after death) shows us that trauma is not only an external event, but also an ongoing process and a reflection of the shock process. However, it does not appear as a fundamental effect of the reactions of the individual who experienced the loss, but as a reflection of a ritual or cultural mourning. Similarly, Ms. Emine described her experience: "On the women's side, it's mostly about condolences. Both my aunts and my uncles used to scream and faint, and there were people who ran away and tried to kill themselves. "My father died, I have to die too" (Woman-20).

The best way to deal with the heavy burden of loss is to take full blame for the pain and hurt (caused by the rituals those who have lost must perform). We cannot know whether we deserve it or not, but although it is known that rituals harm our psychological process, they are not abandoned due to the influence of society. In a sense, although it is known that rituals cause trauma to the individual, these rituals cannot be ignored and have been adopted as processes that must be followed unconditionally. Mrs. Kübra described this process as follows: "Laughing and being happy during the mourning period and for the 40 days after the mourning period is against our culture. A few days after my uncle's death, my grandfather made a joke and we all laughed. My uncle's wife scolded us, saying, "Don't laugh, you're making me angry. I've given up my own pain, but don't you ever think about what society will say? As a result, my grandfather withdrew into his own shell for two days, sad and unhappy (Woman-17).

After death, one of the culture's obligatory rituals is the distribution of the deceased's belongings. Participants described this situation as the goods of the sinking ship. However, it was noted that destroying the memories of the deceased and seeing the distributed items on someone else is a traumatizing situation for the deceased. Destroying memories both prevents mourning and destroys the objects of connection. Yusuf Bey's statements about this situation are very telling: "Probably 15-20 days after the mourning, they collected all my father's belongings and so on. My aunt had a poor old neighbor. They gave her all the clothes. I was very much affected by this situation. In fact, one day I saw that old man, and he was wearing my father's pants. "I sat and cried for a long time" (Man-2).

Mrs. Ebru's situation is similar: "Before we entered the house, my brother's clothes were lying around; his shirt, his pants, his towel and his jacket. My uncle's daughter immediately packed my brother's suitcase and after that I was looking for the suitcase for a week or two, but when I got home I was looking for the suitcase. I'm worried about what will happen if I see it on someone else. In fact, it happened. He had a friend in the village, he was very close to him, and my mother gave him my brother's jacket. He wore it sometimes and passed by our house. When young people walk by, I see a jacket on them, I recognize it as my brother's jacket. She described it as, "If this is what the culture thinks is appropriate for me, I do not accept that culture and I condemn it" (Woman-7).

Theme 2: Idealized Rituals Create Trauma

It is known that the social culture and rituals of individuals who have experienced loss, especially during the condolence process, traumatize the individual, but despite the fact that the negative effects of these rituals are known, they are not abandoned. On the contrary, these rituals are glorified and idealized. In the past, I used to adopt these rituals in mourning (mourning in a traumatizing way, mourning for a long time, being happy was considered a crime, laughing was perceived as a betrayal of the lost), but over time I realized that these rituals negatively affected the mental state of both myself and my relatives around me (Male-10). In addition, we see that mourning is

experienced culturally (the issue that cultural mourning has always been a longing and unifying role for individuals or societies became controversial) and the rituals that reflect this culture in life are glorified (Woman-4). For this reason, some participants stated that traumatizing rituals both perpetuate the past and represent the ostentatious side of societies:

"In our country, older family members go to the extent of glorifying these things because they cannot break away from something they saw in the past. This is how we saw it, this is how it should be. You know, everybody around should see something this big. You know, they make it more about showing off than about their pain. Like we do our weddings for 3 days and 3 nights, we invite everybody, they take it to that level, like everybody can hear it. You know, funerals should be as big as weddings, they should be as loud, everybody should hear them. You know, look, somebody died, how good was it? How well did they do? You know, we shouldn't talk about funerals either" (Male-9).

One of the rituals that is considered to be a cultural characteristic of the deceased during the condolence and mourning process is lamentation. There is a belief that lamenting means that the deceased is very much loved, and that the more lamenting, the more society accepts them. If there is no mourning after someone dies, he is perceived as someone who is loved and not valued by society. Therefore, even though the rituals are traumatizing (it manifests itself in the form of self-harm, confusion, and sometimes even wishing one's own death during the process of lamenting), they continue to be kept alive and glorified. FatmaHanım described these traumatizing rituals as follows:

This is the case of my mother, my father and me. It is not right for me to live in a way that harms me. In our culture, however, mourning is experienced violently. Even though this situation is sad and tiring, it looks like it's going to be this way. But it is not something that lasts for 5 or 10 years. Something that has been going on for centuries is changing our culture in this way. It's not going to end anytime soon. A certain thing will continue for at least another 50-100 years. After all, I am part of society. It is as if we are normalizing our traumas and passing them on to the next generations. For better or worse, that's the way I grew up. Yes, it's ridiculous, but I'm looking at it from a different perspective, I'm opening up a different place, maybe later it will seem very normal to me too (Woman-3).

Similarly, Ms. Suna, I personally feel anger, not pride. It gets on my nerves. I don't like it. Some of his actions may even seem ignorant. Maybe my perspective is wrong, I don't know. Something that seems normal to my family may seem ignorant to me. Or there are many things that seem like superstition (Woman-14).

Theme 3: Cultural Mourning Rituals Transmitted Between Generations

The new generation does not want these rituals, also called cultural mourning, which create cultural trauma in individuals, to be passed on to the next generations. Of course, the question is, do cultural mourning and its rituals create cultural trauma? What has been said seems to confirm this question. Mrs. Ceylan describes the situation as follows

I don't think it should be transmitted. A person wants to experience his pain at that moment (during the condolence and mourning process). But this culture does not allow that. Especially the food culture, the mourning culture and the service culture drive me crazy and I do not want it to be passed on to future generations (Woman-22).

Black holes are essentially dead stars; when enough massive stars run out of fuel, they collapse in on themselves and form a black hole. These black holes created in life seem to traumatize life. In other words, it seems that keeping some rituals of the culture alive just to keep the culture alive makes the pain of loss even worse. FatmaHanım describes the situation as follows

I don't want to. My parents probably don't want it either. But we inevitably merge with this culture. In other words, this culture dissolves us in this way. Like a black hole (Woman-3).

Events that are transmitted from generation to generation can occur within or between individuals or cultures. While the stress of a ritual can be transmitted to the next generation by distorting the content of the ritual or the way the ritual is performed, the ritual can also be transmitted through a common belief system adopted by the family and culture. For example, while Ms. Suna embraces and approves of some features of the culture because of her beliefs, she generally does not like some features that other participants find traumatizing:

Reading the Koran, reading the Fatihah with every guest, distributing food on the weekend, it can be nice to do something for the lost person. I want to pass this on to my children. These are beautiful things. I want to reflect religious things to my children, but I don't want to reflect other bad things to my children. In our

traditions there is the following in the condolence process. Washing and hanging laundry seems like a shame. It all seems ridiculous to me. You know, should people smell their laundry? (Woman-4).

Similarly, Ms. Halenur explained her situation as follows: I do not intend to pass on not only this culture, but any culture, to my children. I don't and won't follow any of the rules they impose. I'm doing what feels right to me. There are some cultures that can be transmitted, like love and respect, that can be transmitted, I can transmit it. But when you experience death, condolence, or birth, what kind of people are you going to take care of in your state of birth? In our culture, guests come and prepare food for the guests. I don't plan to do that, or even if I offer condolences, I don't plan to offer food or service. He comes and offers his condolences and leaves.

Theme 4: Dreams turn into nightmares

It is very common to have anxious and fearful dreams during times of death and loss. This is because the brain processes emotional events as dreams. So it is not surprising that nightmares are common during difficult times. Sometimes you remember, sometimes you don't. You fall from a height, you run away from someone or something. Sometimes you even find yourself in adventures reminiscent of action movies. Such dreams, which are not very entertaining, trigger the release of adrenaline, and you may wake up sweating with heart palpitations. It is usually not easy to get back to sleep. It may be considered normal to have such dreams from time to time. However, if it is repeated frequently and is considered a nightmare, it probably indicates that there is a major stress factor. Similarly, what is experienced during the condolence and mourning process, what rituals should be performed for the deceased, or the performance of rituals related to the deceased (mourning in a violent and self-destructive way) seem to be reflected in dreams in the later period:

During that very painful period, I dreamed that my sister was being swallowed by a snake, I threw myself on the ground, and I cried so much, I screamed so much. "Oh my God, what more do you want from me? I have suffered so much because of my brother and I say take my sister too" and I faint (Woman -7).

Some of the situations that the participants saw and experienced during the condolence process appear in their dreams. In Turkey (in some regions), excessive crying is not tolerated, as the crying of grieving family members during and after the condolence process is considered to cause pain to the deceased. Mrs. Ceylan, who lost her aunt, described her experience in her dream as follows

My aunt had died and my uncle was crying under the blanket (because it is not allowed to cry openly during the condolence process, it is considered a crime). Then suddenly my uncle, wearing a shroud, ran somewhere and ran away (Woman-1).

Dreams of the deceased are known to lead not only to concerns about the spiritual state of the deceased, but also to fears that the dream is dangerous to the dreamer. During the lamentation and mourning process (a ritual called "yellow lamentation" is performed so that family members can relax spiritually), the situation that the deceased will encounter in the grave (torment in the grave) is described. FatmaHanım, one of the participants, explained that she was impressed by the descriptions of the condolence and mourning process and that this situation was reflected in her dreams:

I see my mother and father in my dream. My mother is dying, my father is dying. They are suffering in the grave. Then I wonder how my grandfather is suffering in the grave. Suddenly I find myself on a very high place. I don't know if I should call it a building or a mountain, but suddenly I see my mother throwing herself off. But it doesn't seem like my mother is doing it on purpose. Just because I was afraid at that moment, it was as if a force made me face that fear. Suddenly he jumped and I woke up delirious (Woman-3).

Theme 5: Traumatic memories resurrected

Remembering can be particularly intense and frightening, as rituals commemorating the lost bring back past traumatic memories. It can feel like you're back in the past, reliving reality. Mrs. Ebru, one of the participants, explained the situation she encountered during the commemoration of her lost brother as follows

According to our rituals, the commemoration lasts about three days. On the first holiday after the loss, everywhere was full of people. The first holiday is called the Black Holiday. What I experienced here brought back to life, down to the smallest detail, what I experienced during the condolence process. It even reminded me of some of the negative things I experienced in my childhood. I think that commemorations should not be so exaggerated (Woman-17).

Traumatic memories can arise at an unexpected moment, on an important day (death years, commemorations), or by looking at a hidden object of connection to the lost relationship. However, while the memories that arise in the situations described in the previous sentence are considered normal, it is known that the revived memories of encountering a traumatic situation traumatize the individual more and their effects last for a long time. One of the participants, Mr. Yusuf, explained the situation he experienced while remembering his lost father on the 40th day as follows:

When I was little, a neighbor of ours died. His daughter stood up and said, "I am going to kill myself. She even threw herself on the street in front of cars. On the 40th day after my father's death, my aunt got up and threw herself on the road, and at that moment I remembered our neighbor's situation. When I was little, because I was so scared, I wondered if one of us would die, would we be like that? About 10-15 years passed, and when my aunt did that, I was very afraid of her (Male-2).

Similarly, Mrs. Suna explained her situation as follows: "My sister's rebellion reminded me of my mother's rebellion. My older sister also had cancer, and she is a genetics teacher in our family. My eldest sister died because of it, of course I was little at that time, about 3 years old. At that moment I remember trying to calm my mother down. She described it as, "Most likely, my sister's appearance reminds me of my mother" (Woman-4).

In some regions, the use of certain items perceived as belonging to the state is prohibited due to various beliefs. The prevailing belief is that the use of prohibited items is also haram. Ms. Ceylan's family did not accept the fact that her aunt, who died in the hospital, was wrapped in a shroud provided by the municipality. Ms. Ceylan, who was surprised by the situation, explained her sadness and shock at the moment as follows

My aunt was taken to the hospital and died there. At home, my aunt had a shroud that she had bought for herself. Because of the shock of the loss, the shroud could not be taken to the hospital. He was wrapped in the hospital, but since we thought that government property was haram, he took off that shroud and put on my aunt's shroud. I couldn't understand this situation for a long time. Every time I go to his grave, I remember what I experienced that day and I am impressed for a long time (Woman-1).

Theme 6: Rituals Affect Cultural Beliefs and Life Functions

Some rituals bring about cultural disruptions, may lead to the disintegration of small groups, communities or societies, and the severing of ties with generations. Therefore, it can be said that the negative effects of the culture that brings a society together and the rituals that form it cause both the loss of culture and the institutional and individual identity of individuals in the society. In particular, it may cause the bond between old societies and new generations to be broken and the character of the cultural unity in the society to deteriorate. Can Bey's experience regarding this issue is noteworthy:

I loved life very much. I want to spend time joyfully and let life flow, but right now it's the opposite. When I see the negative things in the condolences, I get scared and worried about whether this is what I want to experience. Do they call it the fear of death or the fear of the afterlife? I don't know if it's fear of hell, I'm so confused. I really can't do the things I used to enjoy doing now. Then I say, "Are these the things that I believe in, that I will protect, and that I will pass on to my children?" Frankly, this process shook my faith and set me back spiritually (Male-12).

Traumatizing rituals sometimes strain cultures so much that, without intervention, there may be little to rebuild after a crisis. If we ignore the cultural losses resulting from rituals and the cultural traumas that occur as a result, it is seen as a common concern that new generations will no longer have faith in the religious beliefs and life philosophies that provide the unity of society, and they will begin to experience deeper spiritual problems. For example, what Ms. Kendiur experienced is very meaningful:

It also alienated me from people in my social relationships. Normally, when I came to class, I would greet everyone and say, "You are beautiful, you are very handsome, etc." After that period, I became introverted. After turning inward, I discovered loneliness. I started to like loneliness a little more, this time I can't spend much time with my close friends. Those noises, those voices are suffocating me. I just want to be alone. I want to stand alone. This gives me more pleasure, but it also hurts. My experiences also appear in my dreams for no reason (Woman-15).

Discussion

After the loss of a loved one, a funeral (condolence) ceremony is usually held. During the condolence process and in the months and years following the condolence and mourning process, the bereaved often use a variety of

condolence and mourning rituals to cope with the loss. Intuitively, these rituals are thought to contribute to condolence and mourning harmony. However, scientific research on this topic is scarce. In the absence of research on the negative effects of condolence and mourning rituals on individuals, this study examines whether the rituals deemed appropriate by cultures during the condolence and mourning process traumatize individuals. As a result of the data obtained from the study, six themes were identified: Swallowing the pain, idealized rituals that create trauma, cultural mourning rituals that are transmitted between generations, dreams that become nightmares, reviving traumatic memories, and rituals that affect cultural beliefs and life functions.

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In the theme of swallowing pain, they explained that individuals could not experience their pain and grief and kept their pain inside for reasons such as serving those who came to express condolences during the mourning process, crying is perceived as betraying the lost, and being happy or cheerful is despised by society. The basic function of the condolence and mourning process is to allow the bereaved to express their grief. However, it seems that the rituals of cultures prevent the expression of this pain. Since this is a process that is passed down from generation to generation and becomes the stereotypical behavior of cultures, it is necessary to adopt and implement it. Research shows that there is a small but positive relationship between the condolence process and positive affect shortly after the loss, but there is no significant relationship between the (positive) perception of condolence and grief reactions, negative affect, and general functioning (Mitima-Verloop, Mooren&Boelen, 2021). On the other hand, Castle and Phillips (2003) suggest that performing rituals related to the loss of a loved one is beneficial primarily for evaluating priorities in life, accepting the loss, and gaining more control over grief. However, it has been observed that the rituals performed for the benefit cited in the research (which appears to be a temporary state of well-being) negatively affect the individual rather than providing benefit to the individual in both the condolence and mourning processes. In this regard, it can be said that the studies that have been conducted have focused only on the positive well-being associated with the condolence process and have not focused on how the rituals performed during this process affect mental health later in life. In the current study, it was found that performing rituals as deemed appropriate by the culture during the condolence and mourning process had negative effects on the mental health of the individual. In fact, it is emphasized that mourning rituals are very obvious and not performing these rituals creates a sense of guilt (Hinton et al., 2013). As it can be understood from here, not fulfilling the rituals creates a feeling of guilt. It can be said that there is a social dynamic behind the feeling of guilt and that acting against society can pull the individual towards the rigid superego. Although it is known that rituals cause harm, they cannot be abandoned due to the influence of society and there is an obligation to perform them.

It is noted that defenses are generally used after trauma and to block the emotions arising from the experience (Terr, 1990). It is not the use per se, but the rigid use of more cognitively distorting defenses that creates difficulties (Reich, 1945). The defenses used require more intense cognitive distortion because the cognitive components of the trauma are completely disconnected from the negative emotions that result from it. For example, identification with the aggressor (Ferenczi, 1980) greatly distorts the experience so that some positive emotional responses are associated with the trauma, as opposed to emotions such as fear, shame, guilt, and sadness that arise from the trauma. In this context, trauma-inducing rituals can be idealized. Although rituals vary across cultures, they share a common component of social connectedness (Weir, 2020). Funeral rituals provide an opportunity for collective remembrance and recognition of the deceased and serve as a stage for mourners (Holloway et al., 2013). On the other hand, traditions, rituals, and ceremonies that continue after death have been described as important therapeutic protocols, and funeral rituals are used to communicate with the deceased, alleviate the pain of loss, and provide closure and healing (Lowe et al., 2020). However, this study found that grieving individuals had difficulty crying and expressing their inner feelings. This is because the condolence and mourning rituals of the cultures do not allow the individual to cry due to the loss and do not tolerate this situation. In this case, it has been found that individuals either postpone the pain they are experiencing or become numb to the pain. The strange thing is that the individual

continues to glorify and experience the cultural mourning rituals even though the rituals are harming or traumatizing the individual. Their funeral rituals are an extreme but determined example of mourning. The funeral ceremony is a way of channeling the personal experience of pain into a socio-cultural framework. For example, it is said that the only way for a woman to be praised is to submit to her husband, which reaffirms the patriarchal social order (Fludernik, 1999).

Events that are transmitted from generation to generation can occur within or between individuals or cultures. While a parent's traumatic stress can be transmitted to the next generation through impairment of the parent's ability to parent, it can also be transmitted through a shared belief system adopted by the parent, family, or even culture (Stamm et al., 2004). Similarly, they show that contemporary actions emerge from critical historical events that continue to guide thought and action across generations, even after the traumatic event has occurred. They also show that defeats and humiliating moments have long-term effects on national identities (Mock, 2012). Considering the data from the current study, cultural rituals related to condolence and mourning require viewing trauma and loss through time and space. This perspective suggests that trauma is an intergenerational legacy (Danieli, 1998). This time-space perspective allows rituals and their resulting trauma and cultural effects to be viewed not as PTSD per se, but as events so powerful that their legacy remains evident across generations.

In the study, it was observed that the rituals used during the condolence and mourning process (such as lamenting, lamenting in a way that hurts oneself, lamenting in a way that rebels against God, distributing the belongings of the lost person, etc.) were reflected in dreams, and over time these dreams emerged in the form of nightmares. When grief experiences exacerbate PTSD, a cycle of escalating exacerbation can occur. Because an increase in PTSD may increase nightmares, which may well take the form of mourning dreams, and thus grief dreams. It is stated that seeing the deceased person in a dream can cause a great fear of a dangerous encounter with the lost person, which causes fear and arousal that can trigger the memory of the trauma (Avcı&Yıldırım, 2022; Hinton et al., 2013). Therefore, it can be said that the rituals performed during the condolence and mourning process induce fear and anxiety in the individual and affect later stages of life. As a result of concerns about the spiritual state of the deceased, mourning often involves religious rituals such as the ritual of giving gifts, daily food offerings, lighting candles and incense, and a ritual of grateful remembrance. Because of cultural beliefs about the fate of the deceased, mourning often seems to take the form of dreams of the deceased, which then lead to certain religious actions; and through dreams, mourning issues enter the social sphere and become a shared concern, leading to a family assessment of the spiritual state of the deceased and the actions that need to be taken (Hinton et al., 2013).

In the current study, it was observed that painfully remembering the deceased (e.g., burning yellow laments in Turkish culture, listing the characteristics of the deceased in the laments) during the condolence and mourning process triggered similar or different traumas experienced by the individual in the past. One study found that painful remembrance of the deceased often triggered trauma recall and rarely triggered flashbacks (Hinton et al., 2013). Another study found that previous loss experiences can be associated with the current traumatic loss, increasing its negative salience. It is suggested that matching triggers, i.e., reminders of trauma and grief, can reawaken memories of the traumatic loss and/or the deceased (Boelen and Smid, 2017). It has even been noted that re-experiencing a traumatic event can include thoughts, images, flashbacks, dreams, emotions, somatic sensations, and behavioral enactments (Levy, 2000).

It has been found that the pain experienced during the condolence and mourning process, and the performance of rituals deemed socially appropriate to alleviate this pain, disrupts the individual's life functions in many areas. It has been observed that the deterioration of the individual's life functions and psychological well-being also reduces commitment to culturally specific beliefs. Research has found that painful reminders of what was lost during the mourning process cause physical dysfunction and somatic symptoms (Hinton et al., 2013). In fact, a study of Cambodians in the mourning process suggested that somatic symptoms such as blurred vision and dizziness were largely related to local mourning and that experiencing these symptoms during the acute phase was a significant cause of the complaints (Caspi et al., 1998).

Future studies could further examine how cultural beliefs about the dead and condolence and mourning rituals alter the course of grief. They could also examine whether cultural mourning creates cultural trauma and whether mourning is a more central aspect of the response to trauma. On the other hand, it can also be examined whether the rituals performed during the condolence and mourning process are due to the individual's own free will or due to obligations imposed by society that must be fulfilled even if the individual is unwilling.

A limitation of this study is that the researchers were flexible with the participants and allowed them to answer as much as they wanted during the interview. Such interaction could introduce bias and affect the reliability of our results. To avoid such bias, we suggest that future similar studies should conduct long-term observations and interviews with participants, while also checking whether the results obtained are accepted by the informants as representative of what they think and feel.

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