

Ultimate Coping Strategies: The Differences among Parents
of Murdered or Abducted, Long-Term Missing Children

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Abstract

The purpose of this study was to assess, through naturalistic inquiry, the differences between and relationships among coping strategies of parents of murdered or abducted, long-term missing children, where the offender was non-familial. Multiple data sources were used to examine two areas: The perceptible differences of coping among parents of murdered children in contrast to parents of abducted, long-term missing children; and the ways in which coping strategies of parents of murdered children differ from the coping strategies of parents of abducted, long-term missing children.

A single dominant theme emerged when analyzing the similarities and differences among the groups: The duration of expected coping was dependent upon the likelihood of the resolution of the ambiguity of the situation. The analysis identified that both groups suffered comparable bereavement manifestations, and utilized similar coping strategies, during times of ambiguous loss. The two groups mirrored each other emotionally until the time that parents of murdered children attained clarification of the ambiguous loss through outcome determination. At this point, parents of murdered children were then able to embark on the different emotional and physiological tracks toward the identifiable phases of resolution, which is grieving the loss of their child.

Ultimate Coping Strategies: The Differences Among Parents of Murdered or Abducted, Long-Term Missing Children

Introduction

The purpose of this phenomenological study was to assess, through naturalistic inquiry, the differences between and relationships among coping strategies of parents of murdered or abducted, long-term missing children, where the offender was non-familial. Multiple data sources were used to examine two areas: The perceptive differences of coping among parents of murdered children in contrast to parents of abducted, long-term missing children, where the offender was non-familial; and the ways in which coping strategies of parents of murdered children differ from the coping strategies of parents of abducted, long-term missing children, where the offender was non-familial.

This phenomenological study used a non-random, purposeful sample selected from contacts established through the National Center for Missing and Exploited Children/Florida Branch (NCMEC/FL). The sample included four participants where the child was the victim of a non-familial homicide and four participants where the child was the victim of a non-familial abduction and has not been recovered. An interview and observational approach, incorporating audio-recorded interviews of unstructured, in-depth and open-ended questions of each participant in a one-on-one setting, was utilized. Participant feedback, the verification of the researcher's interpretations and conclusions were conducted.

A single dominant theme emerged when analyzing the similarities and differences among the groups: The duration of expected coping was dependent upon the likelihood of the resolution of the ambiguity of the situation. Parents of abducted, long-term missing children associated effective coping strategies as those devised to sustain the parental survivor through long-term circumstances. In contrast, parents of murdered children, once they knew their child had died, responded with coping mechanisms to deal directly with the loss.

The analysis identified that both groups suffered comparable bereavement manifestations, and utilized similar coping strategies, during times of ambiguous loss. The two groups mirrored

each other emotionally until the time that parents of murdered children attained the first stage of resolution: clarification of the ambiguous loss through outcome determination. At this point, parents of murdered children were then able to embark on the different emotional and physiological tracks toward the identifiable stages of resolution, which is grieving the loss of their child.

The murder or abduction of a child is an experience that profoundly alters one's life. Parents of murdered and abducted, long-term missing children find themselves in a world turned upside down. The loss is complicated by a variety of consequences that are minimized through the use of coping strategies. It is not uncommon for the healing process to last months or years. Parents who are suddenly faced with the abduction or murder of a child encounter an immediate demand to respond to bereavement issues leading to coping strategies (Sprang, McNeil, & Wright, 1989).

The recent increase in public and legislative awareness has brought the issues of crimes against children to prominence. This increased awareness has resulted in some positive changes: public consciousness, better reporting procedures, improved investigative responsiveness and strengthened legislative reaction. "However, research concerning the abduction and murder of children remains scarce" (Boudreaux, M. C., Lord, W. D., & Dutra, R. L., 1997).

Purpose of the Research

The purpose of this phenomenological study was to assess, through naturalistic inquiry, the differences in coping strategies among parents of murdered or abducted, long-term missing children, where the offender was non-familial. This study further identified relationships between coping strategies among parents of murdered children or abducted, long-term missing children, where the offender was non-familial. The information obtained in this study identified what differences between the two groups exist in the bereavement process and identified specific coping strategies used by parental survivors. The data will, perhaps, encourage federal and private funding to create and sustain bereavement support groups. The study sought to answer two research questions: (1) What are the perceptive differences of coping among parents of

murdered children in contrast to parents of abducted, long-term missing children, where the offender was non-familial? (2) How do coping strategies of parents of murdered children differ from the coping strategies of parents of abducted, long-term missing children, where the offender was non-familial?

Methodology

Based upon the complex nature of the human response to bereavement and coping, the research used a qualitative approach. Research in the area of homicide bereavement and related coping strategies has been quantitative. A majority of studies have been conducted through questionnaires and scales, followed by comparative analysis. Some studies have included interviews after completion of an analytic inventory (Lewis, 1997). A qualitative method was used in this study because the area of research has not been directly studied.

This phenomenological study used a non-random, purposeful sample. The sample was selected from contacts established through the National Center for Missing and Exploited Children/Florida Branch (NCMEC/FL). This nonprofit organization is located in Lake Park, Florida. Access to the particular sample identified for this study would be difficult under the best of circumstances. Yet, the first author's long-term relationship with the NCMEC/FL eliminated many obstacles to the study. The sample included four participants where the child was the victim of a non-familial homicide and four participants where the child was the victim of a non-familial abduction and had not been recovered. It was expected that the use of the NCMEC/FL, an internationally recognized organization committed to child advocacy, would increase the availability and cooperation of the obtainable sample.

After clearly identifying the operational definitions of the research, the NCMEC/FL provided assistance in isolating 25 cases applicable to the study. Investigative intake files, newspaper articles, and other pertinent data were reviewed to identify participants meeting the operational parameters. The sample for this study encompassed a range of victim characteristics based upon several major criteria, i.e. age of the victim; sex of the victim; time elapsed since the murder or abduction occurred; and geographic location. The range of characteristics is detailed in Table 1 and Table 2.

Table 1
Characteristics of the Abducted, Long-term Missing Group

Case	Parent	Victim	Age	Gender	Time Elapsed Since Incident	Geographic Location
A	Barbara	Doreen	8	Female	16 years	Florida
B	Joan	Bobby	11	Male	11 years	Minnesota
C	David	Emma	19	Female	6 years	Georgia
D	John	Lori	20	Female	11 years	Florida

Table 2
Characteristics of the Murdered Group

Case	Parent	Victim	Age	Gender	Time Elapsed Since Incident	Geographic Location
E	Lynn	Mary	4	Female	5 years	Florida
F	Natalie	Susan	8	Female	2 years	Florida
G	Samuel	Gina	12	Female	7 years	California
H	Larry	Robin	13	Female	2 years	California

Following a review of the prospective available sample, eight specific cases meeting the criteria of the study were identified. The NCMEC/FL then made informal telephone contact with each of these eight persons to inform them of the study and solicit interest in participation. The extent of information provided to each contact was limited to identifying the interviewer's professional and academic background, the content of the study and a projected time frame during which the interviews would be conducted.

The design of this study took into consideration the possibility that, due to the nature of the topic, a participant may wish to be excused prior to, or during, the interview. Two additional participants who met the research criteria were identified, and they agreed to participate. Had any of the eight original participants decided to withdraw from the study, these individuals would have been included in the research.

Other parental survivors met the criteria of the study, but did not become part of the sample for a variety of reasons. The predominant reason for exclusion was an inability to locate the parent through a last known address. Other reasons included those parents still under an umbrella of suspicion; an undisputed mental instability of the parent prior to the incident, aggravated further following the incident; no response to a contact letter provided by the NCMEC/FL; and the imminent commencement of a criminal trial.

Previous research (Lipschultz, 1999; Murphy, 1999; Poussaint, 1984) identified that the earliest stages of bereavement are wrought with emotional responses that interfere with coping strategies. Therefore, it was decided that the abduction or murder of the child must have occurred at least two years prior to the interview for this study.

Greatly reducing the available sample was an operational component critical to the focus of the study: A non-familial offender. Research consistently reveals two important facts. First, The National Studies of Missing, Abducted, Runaway, and Thrownaway Children (NISMAART), using data gathered from 1988, reports that family members commit the majority of child abductions; although the study identified that the number of non-familial abductions is still regrettably high. NISMAART also reports that, according to the legal definition of abduction, non-familial offenders abducted between 3200 and 4600 children during 1988. It was also reported that, according to the stereotypical definition of abduction, non-familial offenders abducted between 200 and 300 children during the same year (Finkelhor, Hotaling, & Sedlak, 1990). Second, the Washington State Attorney General's Office (1997) study reported there are an average of 100 child abduction-homicide cases investigated in the United States each year.

This study did not use questionnaires or tests. A qualitative interview and observational approach was chosen to give a voice to parents of murdered or abducted, long-term missing children. The narrative exploration and discovery may benefit those parents who, in the future, must live through the horrific loss of a child to murder or abduction without recovery.

The first author's professional background in law enforcement lent itself well to the proposed research design. With 15 years as an investigative specialist, he enjoyed the recognition in the criminal justice community for possessing a well-developed repertoire of

investigative, interview, and observational skills. He understood the need to develop and maintain a connection, or close relationship, with those being interviewed, while creating an atmosphere that was non-threatening, yet solicitous. Finally, he had over eight years of investigative background specifically focused on child exploitation and child abuse, receiving awards, both locally and nationally, for his efforts in this investigative arena.

Interviews are thought to be powerful instruments for exploring complicated emotions and experiences (MacLaren, 1980). Historically, individuals have made sense of their experiences through narrative reporting. Interviewing does not test a hypothesis. Instead, the utility of an interview is to enhance the understanding of what other people experience and to bring meaning to that experience (Bucholz, 1999).

The first author conducted audio-recorded interviews of each participant in a one-on-one setting. The audio recording was not meant to be intrusive, but was utilized to document and validate the research for future replication efforts. The interviews were comprised of unstructured, in-depth and open-ended questions. A search for common themes and patterns was conducted. Written informed consent was obtained prior to the initiation of all interview and observational phases.

Interview appointments were set once the consent forms had been signed. One participant, a parent of an abducted, long-term missing child, did withdraw from the study upon reviewing the informational contact letter. The participant's decision was based upon one specific word that appeared in the letter. That single word was murder. The word appeared in the context of the title of the dissertation. The inclusion of that single descriptor was enough to trigger an emotional response strong enough to withdraw from the study. A second participant failed to respond to the Consent Forms.

Low inference descriptors supported by field notes documented each participant's account of events. Interpretations were verified through participant feedback and conclusions were made (Johnson, 1997). Participant feedback was an extremely important component toward achieving interpretive validity. Areas of miscommunication were clarified through the use of member checks (Lincoln & Guba, 1985). All names and references to victims were changed to assure

confidentiality of the participants.

Results

The analysis identified the similarities and differences in mechanisms of perceptive coping between the two groups studied. Prior to identifying the specific differences of perceived coping strategies, one should note the very interesting patterns that developed through the analysis. The data for the analysis was derived directly from the interviews and field notes, and were diametrically associated using a Within-Case and Cross-Case Analysis.

Table 3
Coding

1. COPING STRATEGIES	3. EMOTIONAL RESPONSES
Ineffective Strategies Effective Strategies Substance Abuse or Use Advocacy Resolution Normalcy Faith	Blame Confusion Crying Anger Denial Depression Fear Frustration Guilt Shock Hope
2. SUPPORT MECHANISMS	4. WORK / EMPLOYMENT
Friends Professional: Police, Medical, Judicial, Support Groups Family: Immediate Other: Psychics, Strangers, Political	5. MEDIA
	Adversarial Supportive

The preliminary cross-case analysis assessed the role of support, emotional response, work, and the media. The analysis explored and interpreted the data, managed and synthesized ideas, and identified themes and patterns. This was accomplished through the close examination of each construct, utilizing a user's assessment of mostly beneficial (+) or mostly detrimental (-), to determine the influence on the parental survivor's ability to effectively cope. The cross-case analysis of coping strategies used by the groups, specifically responded to the research question,

“How do coping strategies of parents of murdered children differ from the coping strategies of parents of abducted, long-term missing children, where the offender was non-familial?”

The Role of Support Mechanisms

There were distinct differences between groups when observing the implication that support mechanisms have on influencing coping strategies. The experience of support from family between the two groups was in stark contrast to the interaction with friends and professionals were in stark contrast. PALTMC identified friends as a strong source of support. One PALTMC noted, “I had some close friends that carried me along as well.” Another concurred, “The truth is, you really find out who your friends are.” The interviews with PALTMC revealed that very few negative comments about the support of friends existed. The single negative comment came from David, who said, “I got support from my friends. One in every 10 friends; the other nine couldn’t face me. It’s not that they weren’t my friends. If they came, they just couldn’t handle it.” In contrast, POMC reported that friends, as a support mechanism, generally produced a negative influence on their ability to cope. One respondent was unable to indicate a single episode where friends were a source of coping, either beneficial or detrimental. Lynn recalled, “I didn’t even pay much attention to other people around me.” David, new to the neighborhood where the abduction occurred, stated, “We had very few friends.” Samuel did not indicate a single episode where friends were a source of coping, either beneficial or detrimental.

When assessing the role of professional contact and intervention, the inverse held true. Although PALTMC perceived law enforcement as generally supportive, the majority of responses were negative, due to the belief that law enforcement was inadequately trained to handle abduction investigations. As time passed, there was concern that law enforcement may not want to work an older case – but would prefer a more current case that might have a higher chance of being solved. Joan testified, “I respect the effort they were putting out, and the organization,” but added her concern that if she were a police officer, she would not want to work an older case – but would prefer a more current case that might have a higher chance of being solved. David, dismally disenfranchised with the efforts of both government and law enforcement, had few kind words to say about law enforcement. “The police tried to manipulate me.” “It was like watching the

Keystone Cops.” “Nobody cares because they haven’t called me in three years.” Mourning is almost always made more complicated by repetitive and protracted interactions with the criminal justice system (Rando, 1993).

PALTMC reported consistently poor experiences with therapy and support groups. This was exacerbated when the therapy was court-ordered. Barbara lamented her involvement in court-ordered therapy: “The judge made us go. It didn’t help, no!” There was also an occasional commentary concerning the detrimental effects of support groups that often led to increased depression. And yet, a nationally recognized support organization received excellent evaluations. The impact of the criminal justice process was not discussed as an issue, as the ambiguous loss of one’s child eliminated involvement in the judicial criminal process.

In stark dissimilarity, POMC overwhelmingly found professional contact and intervention as beneficial to coping. Each of the professional groups, by and large, provided an atmosphere conducive to coping. Law enforcement, support groups, and the criminal justice system all provided channels leading to resolution. Detrimental effects were, more often than not, generated through moments of frustration on the part of the parental survivor and typically short-term in duration.

PALTMC reported interaction with family members as both beneficial and detrimental. Whereas some respondents feared losing even more, they would anchor themselves to what remained of the family unit. And yet, other respondents reported negative effects of the interaction. Joan reasoned, “We still had a family. We still have three other children. We still had our love for each other. I didn’t want to lose anything more.” And yet, other respondents reported negative effects of the interaction. David recalled, “I looked around me and I feel like I was all alone on this one.” Another respondent identified an extreme example of dealing with family that became an obstacle to coping, when the respondent’s ex-wife had a court declare his missing daughter legally deceased. The overwhelming ambiguity, in addition to the court decision, created great animosity and generated pronounced obstacles to coping.

Although POMC were able to identify the family as an occasional source of support, the common theme within this group was that the coping process was greatly diminished due to

intrinsic barriers. A common question that was asked was “How can I help someone else to cope when I cannot even cope myself?” and showed that the respondents were split on this issue.

Rando (1993) notes that POMC inherently experience the greatest number of factors known to contribute to complicated mourning. These include the uniqueness of the loss, self-blame and guilt, social isolation, and the intrinsically traumatic nature of the unexpected death of a child.

Yet, the vast majority of responses by POMC, with reference to family, were negative. There was a sense of polarization in that affected individuals were unable to adequately support each other during the ambiguous loss. Natalie remembered that her husband “wasn’t really giving me a whole lot of support.” Larry recollected the limited interaction with his wife: “It was like we were polarized.” Larry remembered how, in spite of a common goal of getting his daughter home safe, he and his wife were unable to adequately support each during the seven months his daughter was missing. There were no identifiable differences that impacted the coping process when dealing with other people. Both groups reported detrimental effects when dealing with psychics. “Those psychics made me crazy,” reported Joan. There was not a single reported incidence of valuable information obtained from the oft-used source of psychics. The support of the general public and strangers was well received, despite the occasional sense of intrusion when the parental survivor was approached unannounced.

The Role of Emotional Responses

There were distinct differences and similarities when assessing the role of the five dominant emotional responses. The National Organization of Parents of Murdered Children, Inc. (1998) identified the following five “thoughts on coping:” (1) Do not be surprised at the strong emotions that surface such as shock, disbelief, anger, frustration, denial, and the loss of faith in God and people. (2) Expect to feel numb, confused and depressed. It is normal to withdraw and keep your feelings internalized. (3) It is not uncommon to experience primal fear, suddenly believing the world is inherently unsafe and violent. (4) Understand that grief takes different paths for different survivors. Be easy on yourself and your expectations of yourself and others. (5) Seek out support.

The National Organization of Parents of Murdered Children, Inc. (1998) identified that

becoming involved with other survivors, who have endured a similar situation, will enhance the recovery process and channel emotions constructively. Parental survivors from each group endured an onslaught of negative emotional responses. Respondents experienced most of the emotional responses identified as customary to the bereavement process.

Two main themes appeared in the analysis. First, the order of dominance of the emotional responses differed across the groups. The PALTMC reported, from the most dominant to the least dominant emotional responses: frustration, depression, hope, anger and denial. In contrast, the POMC reported, from the most dominant to the least dominant emotional responses: hope, anger, denial, fear and depression. Secondly, the only emotional response experienced that was positive was that of hope. And yet, despite its positive attribute, hope was frequently identified as detrimental to the coping process. Samuel described how the hope influenced the coping process for him: "You convince yourself – the mind's an amazing thing. You convince yourself that you're right. The mind is an amazing thing." Notwithstanding one's desire to maintain hope, the mind is, nonetheless, logical and rational. Larry noted, "Obviously, if she is dead – it's best to know; because it's kind of ridiculous to have hope when there is no hope." This was a conflicting predicament faced by both groups, at least while searching for resolution. Boss (1999) calls this resistance to giving up hope an "understandable response" (p. 82). "Denial is neither something to avoid nor something to advocate ... (and) can be both functional and dysfunctional" (p. 92). A combination of optimism and realistic thinking allows individuals to move forward in spite of ambiguous loss (Boss, 1999).

The Role of Work/Employment

Respondents in both groups expressed work-related issues and employment as having a profound impact on the ability to cope. The general consensus among respondents was that it was difficult, if not impossible, to return to work following the murder or abduction of one's child. The issue of work or employment generated great stress for the respondents. The comments included the following: "I was even feeling guilty about work. I was trying to do a few hours work." "In the back of my mind, you're saying, cripes, if I lose my job, what am I going to do?" The comments included the feeling of guilt about returning to work.

Being self-employed brings additional negative ramifications. The level of work that can be accomplished might decline so drastically as to create an impending economic disaster. There was a tremendous fear that something significant may occur while away from home that could negatively impact the outcome. Some respondents were forced to return to work within a month or two. Other respondents took up to one year off from work or changed careers. These career changes included entirely new fields of employment or entrance into advocacy. Lynn angrily replied, "It took me a year to be able to go back to work. I used to be a problem solver. I couldn't go back to that job. You've got a problem? Hah, I don't care. Hello! I'm just trying to wake up today!" In spite of the difficulty in returning to work, the respondents agreed that returning to work when one was ready was beneficial to the coping process and a return to some sense of "normalcy."

The Role of the Media

The media played a significant role in how the parental survivor coped with the murder or ambiguous loss of his or her child. There was no disagreement from any of the respondents regarding the importance of "media investment," a term coined by Samuel in his effort to provide assistance to parents facing a similar situation. "If you can get the media to cover the story and you can get the various reporters on the job to become humanly invested in the subject – the children themselves – then they are going to find ways to help them to continue to come back." In spite of the aforementioned commonality, there was a distinct difference in the perception of the media. The PALTMC group identified considerably more positive contacts with the media than did the POMC group.

The negative contacts included an inherent distrust of the media or a general misunderstanding of the media process. The role of the media was occasionally portrayed as parasitic: The media needs the story; the parent needs the media. Lynn was fearful of what the media thought of her and how she would be depicted, as a grieving parent or a suspect cloaked in grief, reporting, "They were the only ones I was afraid of."

Although none of the respondents actively solicited the media at the onset of the investigations, there was little doubt that the role was critically necessary. Respondents typically

refused the initial requests for interviews, but succumbed to the need to develop a relationship with this resource. The association with the media was typically described as a double-edged sword. Respondents generally learned the expectations of the media and tried, diligently, to comply with those expectations. When the affiliation between the parent and media was favorable, the conduit to coping was wide. One respondent recalled, "They're always there; dependent upon the attitude that you take, or the way that you respond to them." Yet, in the midst of an undesirable relationship, the conduit to coping was considerably restrictive. "What I learned very quickly is, if you called the press and didn't have anything to say, they get real pissed."

Perceived Coping Strategies of POMC

The research looked at five other areas that would impact the subsequent ability to cope. These areas, addressed individually, were as follows: (1) substance use/abuse, (2) entrance into advocacy, (3) resolution, (4) normalcy, and (5) faith. The implications of these areas directly impacted the direction and ability to effectively cope with the murder or ambiguous loss of one's child. Through exploration and interpretation of the data, clear themes and patterns emerged.

All but one respondent identified that alcohol and controlled substance abuse was detrimental to the coping process. The individual who identified the benefits of marijuana use continued the use despite the legal ramifications. The lone respondent's experiences with marijuana were the exception, not the rule. The consensus among respondents was that alcohol and substance abuse could lead to dependency and an inability to maintain a sense of control and involvement.

Seventy-five percent of respondents from each group entered, at some level, the advocacy effort. The collective reason for becoming an advocate was to find meaning. Some advocacy efforts were conducted at the local level and others were administered at the national level. Involvement in advocacy was reported to greatly enhance the coping process. Yet, there were also testimonials of potential detrimental effects to maintaining a close, one-on-one advocate relationship. Immersion in the area of one-on-one advisement was reported to lead to physiological and psychological deterioration.

Both POMC and PALTMC aspired to obtain resolution of the ambiguity of the situation,

regardless of the outcome. POMC described a sense of feeling significantly better off than PALTMC, in that knowing the outcome permitted a faster return to some form of “normalcy.” There was no hard evidence that identified a specific time frame for this process. Whereas PALTMC were left in an indeterminate state while seeking answers to the ambiguous loss, the recovery of a child’s remains merely closed one door to resolution, but opened others.

POMC reported that once their child’s remains were recovered, different areas that needed resolution surfaced. Some examples provided by respondents included the identification of an offender, the arrest of the offender, the judicial process, and the expectation of justice. Respondents were only able to articulate “normalcy” in terms of their lives at this moment in time. “Normalcy” before the abduction or murder was reportedly very unlike “normalcy” at the time of the interview.

Faith appeared to play a conflicting role in the search for answers and a return to some sense of “normalcy.” Seventy-five percent of the respondents identified that they believed in a spiritual being. In all but one case where the respondent identified a belief in God, faith was both a source of comfort and distress. Two respondents, one from each group, expressed an absence of faith and rejected any connection to the incident or the outcome. In spite of conflict generated by the loss of one’s child, the respondents who identified a connection to faith prior to the loss ultimately sustained their belief in a spiritual being.

Coping Strategies

The PALTMC and POMC were able to identify what they perceived as ineffective and effective coping strategies (see Table 4). Respondents from both groups identified more effective strategies than ineffective strategies. A single, dominant theme emerged when analyzing the similarities and differences among the groups: The duration of expected coping was dependent upon the likelihood of resolution of the ambiguous loss.

PALTMC identified strategies associated with effective coping with the need to stay involved in the investigation and to remain emotionally balanced for the irrefutable emotional ebb and flow. They also noted the importance of pacing one’s self for the long haul and to develop the psychological and physiological capacity to maintain hope, despite diminishing odds.

Table 4
Cross-Case Analysis of Coping Strategies: Similarities and Differences

Similarities	Maintain What You Still Have: Family, Marriage Become Involved in an Advocacy Effort Accept Emotional Responses as Normal Interact with Others in a Similar Situation Find Meaning in the Loss Avoid Alcohol and Controlled Substance Abuse	
Differences	<u>PALTMC</u>	<u>POMC</u>
	Discover a Sense of Control/Involvement Stay Emotionally Level Pace Yourself Maintain Hope	Participate in Bereavement Support Groups Accept That Pain is Unique to Individuals Learn to Forgive

POMC who, in this study, had acquired resolution of the ambiguous loss, associated effective coping mechanisms with dealing directly with the loss and involvement in bereavement support groups. They also mentioned that accepting that grief and pain are unique to individuals and learning to forgive provided an avenue toward effective coping.

Respondents reported that parental survivors should attempt to maintain what still remains of family, marriage, employment and social connections. Respondents also encouraged that a return to some form of “normalcy” is incumbent upon maintaining important relationships. Association with advocacy efforts was reported to provide a means to the discovery of meaning in the loss, suggesting that advocacy provided a more purposeful function to everyday life and responsibilities. This finding reflects Boss’ (1999) work with PALTMC who expressed the belief that their losses would influence other parents to increase safety precautions with their own children. People cannot alter the tragedy of their own losses, but “they resolve to make meaning out of the chaos by lowering risks of such loss for others” (Boss, 1999, p. 120).

Respondents reported that it was appropriate, and helpful, to cry, to scream, to be angry, or to release whatever emotional response was attempting to emerge. Interaction with other parental survivors was typically identified as beneficial to effective coping, discovering they were not alone in dealing with the loss. It was reported to be beneficial to speak with someone who had suffered a similar loss and survived.

Alcohol and substance abuse was identified as an ineffective approach to coping that

interfered with the ability to cope. Although few respondents could speak from first-hand experience, most were able to discuss contact with other parental survivors who suffered dependency due to alcohol or controlled substance abuse. The accounts graphically illustrated how alcohol and substance abuse became an obstacle to effective coping and a return to “normalcy.”

Discussion

The discussion of the results addresses the two research questions drawn from the purpose of the study. The first research question asked what are the perceptive differences of coping among parents of murdered children (POMC) in contrast to parents of abducted, long-term missing children (PALTMC), where the offender was non-familial? The perceptive differences were identified through the actual words of each respondent. In actuality, their perceptions of coping were not only perceived, but were their bona fide methods of coping.

The second research question asked how do coping strategies of parents of murdered children differ from the coping strategies of parents of abducted, long-term missing children, where the offender was non-familial? The analysis took into account not only the differences but also the similarities of coping strategies used by parental survivors. Assessing the similarities permitted a more thorough analysis of the data.

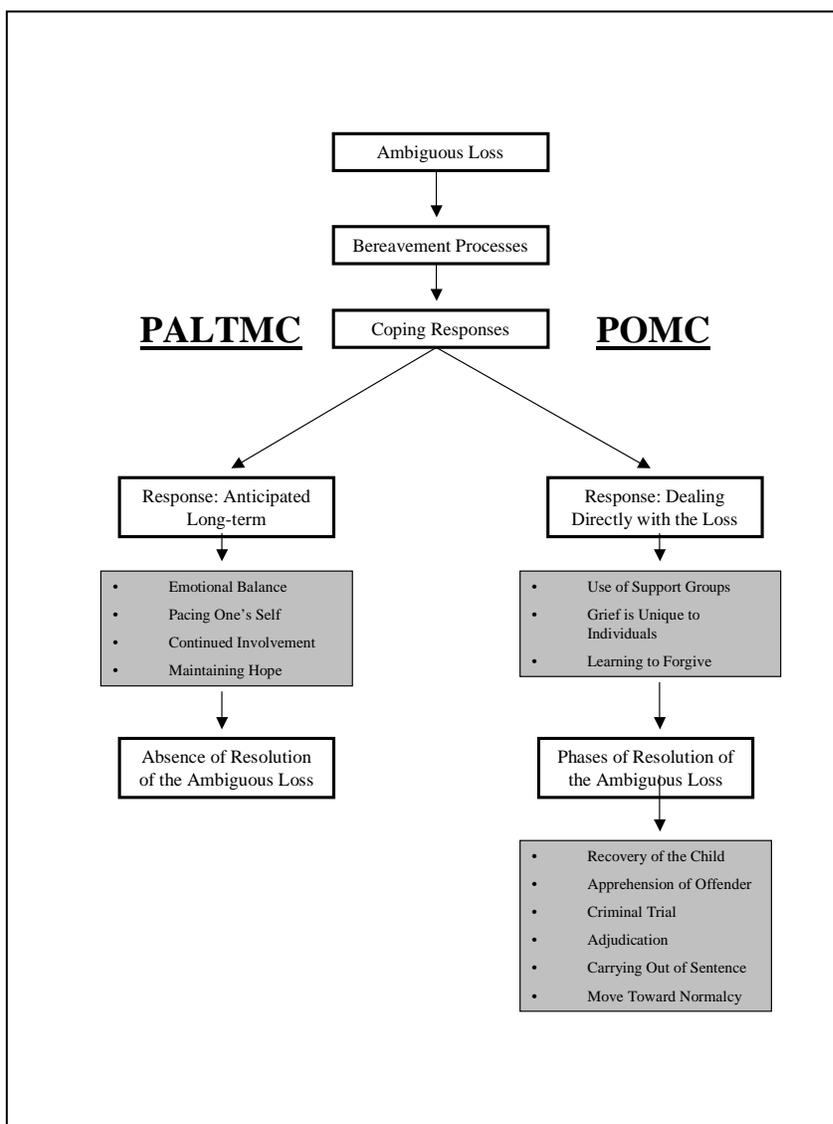
A single, dominant theme emerged when analyzing the similarities and differences among the groups: The duration of expected coping was dependent upon the likelihood of the resolution of the ambiguity of the loss (see Figure 1). PALTMC identified coping mechanisms devised to sustain the parental survivor through long-term circumstances. Respondents in this group identified the need to stay involved in the investigation, to remain emotionally stable for the undeniable emotional ebb and flow, to pace one’s self for the long haul and to develop the psychological and physiological capacity to maintain hope, despite diminishing odds. These strategies were associated with effective coping.

In contrast, POMC, who, in this study, had resolved the ambiguous loss, responded with coping mechanisms not attainable by PALTMC: strategies employed to deal directly with the deaths of their children. Respondents in this group associated involvement in bereavement

support groups, acceptance that grief and pain are unique to individuals, and learning to forgive, with effective coping.

Figure 1

The Impact of Resolution on Coping Mechanisms



Similarities among the respondents also emerged. In spite of the acquired resolution, respondents reported that parental survivors should attempt to maintain what still remains: Family, marriage, employment and socialization. These matters are at great risk during periods of

ambiguity and loss. Respondents resoundingly encouraged that a return to “normalcy” is dependent upon maintaining these important relationships. Involvement in advocacy was reported to provide a means to the discovery of meaning in the loss. Respondents sought to eliminate randomness, and suggested that advocacy provided a more purposeful function to everyday life and responsibilities.

Another commonality was the acceptance of emotional responses as normal. Respondents reported that it was appropriate, and beneficial, to cry, to scream, to be angry, or to release whatever emotional response was attempting to emerge. Each group also conveyed that interaction with other parental survivors was typically beneficial to effective coping. More than one respondent articulated the great relief in discovering they were not the only ones enduring this loss – that they were not alone. Respondents also noted how important it was to speak with someone who truly understood the situation, and that strength could be derived from seeing that others had suffered a similar loss and survived.

Consensus among respondents was that alcohol and substance abuse could lead to dependency and an inability to maintain a sense of control and involvement. Even if unable to speak of the detrimental effects from first-hand experience, most respondents were able to knowledgeably discuss contact with other parental survivors who suffered emotional and physical dependency due to alcohol or controlled substance abuse. The accounts clearly depicted individuals who faced tremendous obstacles to effective coping and a return to “normalcy.”

Limitations of Sample Size

The study is not without limitations. Sample size was a key limitation. This research was limited to eight parental survivors, a small sample, yet still within qualitative standards. The first researcher identified, at the inception of the study, the difficulty in acquiring a sample meeting the operational requirements of the research. It was not only necessary to find a referral base for recruitment, but it was also essential to identify parental survivors who were willing to share the intimate experience of their losses.

Qualitative research, being highly subjective, is designed to look beyond the quantitative percentages to gain an understanding of respondent’s feelings and perspectives. In light of the

fact that the nature of this inquiry is exploratory, these insights are best obtained through the use of smaller, highly targeted samples.

Conclusion

Respondents, in this study, characteristically sought the answer to two questions: Am I normal? Have I coped? The answer to these questions requires a redefinition of common terms. General definitions, when applied to parents of murdered or abducted, long-term missing children, provide a distorted insight into the emotional, physiological and psychological impact actually endured as a result of the event. The term “normal” requires redefining. Respondents do live normal lives, yet they are vastly different from the lives of parents who have not endured the loss of children to abduction or murder. The traditional definition of “normalcy” does not apply. Joan illustrated the point with frustration, stating, “It isn’t normal. That is all I can say. I don’t know what ‘normal’ is, but what I live is not normal.”

In assessing whether parental survivors have coped, the answer is obtained directly from the source: John noted, with directness, “I’m coping because I’m here. Am I where I ought to be? I don’t know.” The mere fact that a parental survivor is able to function, at whatever level, in everyday life and participate in a study such as this is descriptive of the ability to cope. When one respondent was asked what was the most effective coping strategy that they used, the reply was, “Your assumption is that there was one – and I don’t know that there is.” Effective or ineffective, coping takes place. Even ineffective coping is enough to get a parental survivor through a single day, or a single moment.

Finally, the analysis identified that both groups suffered comparable bereavement manifestations, and utilized similar coping strategies, during times of ambiguous loss. The two groups mirrored each other emotionally until the time that parents of murdered children attained the first stage of “resolution”: clarification of the ambiguous loss through outcome determination. At this point, parents of murdered children were then able to embark on the different emotional and physiological track toward the identifiable stages after resolution of the ambiguous loss.

This sort of “resolution,” absent for parents of abducted, long-term missing children, occurs in stages for parents of murdered children. One typically associates resolution with a final

determination. Yet, parents of murdered children go through identifiable stages in this process. Being unprepared for these stages can have serious emotional and psychological implications.

The initial desire for “resolution” requires finding out what happened to one’s child. In this study, parents of murdered children endured ambiguity for as little as one week, and as long as seven months. There was a presumption by parental survivors that “resolution” of the ambiguity would result upon the physical recovery of the child victim. Yet, parents of murdered children identified several stages that followed the recovery of the body. In cases of child abduction resulting in homicide followed by the recovery of the victim’s body, these stages typically include a unique sequence: identification of the offender, the criminal trial and adjudication, the carrying out of the judicial sentence, and the struggle to move forward to normalcy. As each of the stages is met, parental survivors once again fully experienced the manifestations of bereavement and were forced to reestablish strategies to effective coping. As Boss (1999) states, “ Ambiguous loss is devastating and can have lasting traumatic effects. But with support and resilience some people use the experience to learn how to live in different circumstances through life, balancing the ability to grieve what was lost with the recognition of what is still possible” (p. 135).

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