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DIENFRANCHISED GRIEF IN QUEER COMPANIONSHIP AND CHOSEN FAMILY

Derek Lowell Corns

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DISENFRANCHISED GRIEF IN QUEER COMPANIONSHIP
AND CHOSEN FAMILY

A Project
Presented to the
Faculty of
California State University,
San Bernardino

In Partial Fulfillment
of the Requirements for the Degree
Master of Social Work

by
Derek Lowell Corns

May 2022

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ABSTRACT

This study examined the ways in which queer people experience disenfranchised grief when mourning the death of a loved one who also identified as queer/LGBTQIA2S+ and whose relationship with one another existed outside of cisgender/heteronormative frameworks. Research suggests that the life experiences as LGBTQIA2S+-identified people can vary in specific ways to those of cisgender heterosexual people, and in the occurrence of death and bereavement, such circumstances can be further complicated and disenfranchised by the types of relationships the bereaved and the deceased shared. Through interviews and qualitative data analysis, this study provided supportive and informative insight into social work practice by observing and discussing the ways in which queer people can experience grief disenfranchisement and demonstrated how social workers can better support the bereaved. Queer disenfranchised grief was demonstrated in the data through insufficient support demonstrated by witnesses to the participants' grief and inadequate understanding of the nature and significance of the participants' relationships to the deceased. The data suggests that social workers can better intervene with bereaved queer individuals and communities by up-to-date cultural competency on the complex and life-sustaining bonds queer people form with each other, and by creating and upholding inclusive community spaces for people to express their grief in validating ways.

DEDICATION

For Saint, in all your miraculous transformations.

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CHAPTER ONE

INTRODUCTION

Problem Formulation

Queer people turn to each other for validation – validation for their bodies, their genders, their sexualities, their life trajectories, traumas, and most certainly for kinship. Kinship for LGBTQIA2S+ (lesbian, gay, bisexual, transgender, queer/questioning, intersex, asexual, Two-spirit; used interchangeably with the term “queer” in this paper) is a life-sustaining experience (Prasad 2020). Queer people come into their identities knowing the risks of being rejected and marginalized for a variety of intersecting factors. Race, gender identity, economic background, access to resources, mental health, physical health, and dis/ability all play major roles in determining how a queer person moves through the world.

In 2020, 44 transgender and gender non-conforming (GNC) people were murdered in the United States (Human Rights Campaign, 2021). Most of these murders were of Black or Latinx transgender women. The American Academy of Pediatrics reported in 2018 that the rate of suicide attempts amongst male transgender adolescents is a terrifying 50.8% (Toomey et al, 2018). The Williams Institute at UCLA Law School published in a 2021 report that 46% of LGBTQIA2S+ people have experienced discrimination in the workplace in their lifetimes.

By considering these statistics and beyond, it can be assumed that for queer people, the chances of experiencing any form of discrimination and/or violence in one's lifetime is extremely high and unfortunately common. In consideration of violence and discrimination statistics, it seems almost inevitable that queer people will experience grief of several kinds during the span of a lifetime; the grief of biological family relationships torn asunder, the loss of a friend to suicide or murder, the bereavement of a lost adolescence due to gender dysphoria. For queer people, grief is not just experienced, it is expected; a sort of shadow looming on the horizon.

Grief and its fundamental emotional trenches is not pathologized in the DSM-V. Grief, in the context of death, is the mournful process that one experiences after losing a loved one. "Normal" experiences of grief are emotional pain, sadness, longing, confusion, denial, anger, anxiety, guilt, as well as positive emotions like gratitude, joy, and relief. There is no linearity to the grief process, falsely assumed by Western society after the emergence and popularity of Kübler-Ross's five stages of grief model in the 1970's (O'Conner, 2019). A one-dimensional experience of grief is rare, and periods of bereavement are an inevitable occurrence during a lifetime. The human experience of grief is complex and nuanced, and the ways in which any individual, group, or community grieves is highly determinant on a variety of intersecting factors – spirituality/religion, race, gender, class, sexuality, sociability, mental health, and access to resources (Liu et al, 2019). For LGBTQIA2S+ people, friendship can resemble that of

kinship – many queer people construct their own chosen families. Chosen families are made up of strong bonds amongst any marginalized individuals from similar or different life circumstances who support each other like any traditional biological family would. Chosen family is often made up of tiers of biologically-modelled relationships varying from person to person, especially those rejected by their families of origin (Radomska et al., 2020).

In grieving the loss of a queer chosen-family member or close friend, queer people may encounter the strange experience of disenfranchised grief. Disenfranchised grief (DG) is any experience of grief outside of societal norms, and the ways in which such grief is invalidated by those not experiencing it. Grief is a highly personal experience. For queer people who grew up with feelings of otherness or isolation, bereavement can be an amplified experience (Radomska et al., 2020). Before the national legalization of gay marriage in 2015 in the United States, many partners were not able to visit their significant other in the hospital before their death if the patient's family chose that (Curtin & Garrison, 2018). For those who are not legally married nor have the desire to be married but still have a partnership, this is still the case.

Queer relationships and bonding can be different for non-heteronormative and/or non-cisgender companionship. The lines of intimacy can be blurred for queer people – it is common for close friends to be ex-partners, current sexual partners, aromantic or asexual life partners, polyamorous relationships, as well

as traditional cisheteronormative roles such as platonic close friends, monogamous unmarried life partners, or traditionally married couples.

Purpose of the Study

The experience of grief is extremely complex and highly studied, but literature on disenfranchised grief specifically experienced by queer people is limited. It is necessary and important to critique common grief theories through the lens of queer disenfranchised grief in order to recognize what impact the complexities of queer identity, kinship, and marginalization have on the bereavement process.

This study voluntarily surveyed queer-identified people who have experienced a death circumstance within a queer kinship to examine what the most common factors of DG are for queer people and their chosen family/kin and/or friendship circles. Through the survey results, qualitative data was examined through a queer-feminist, anti-oppressive perspective, and potential clinical interventions were considered through Stroebe and Schut's dual process model of coping (1999) and Silverman and Klass's theory of continuing bonds (1996).

Significance of the Project for Social Work Practice

Social workers have always been on the front lines of providing grief support. However, the history of social work confronting specifically

LGBTQIA2S+ bereavement care lies heavily within social work's response to the AIDS crisis in the 1980's and 1990's. NSWAN, the National Social Work AIDS Network, emerged in San Francisco in 1996 and was founded by Michael Shernoff, MSW (Wright 2002). NSWAN provided national support in AIDS-related healthcare for social workers and published many scholarly articles over the years critical to social work services in queer communities. In clinical contexts, many LGBTQIA2S+ centers in the national currently offer grief support groups for queer people who are experiencing bereavement. Social workers, along with clinical psychotherapists, continue to be on the front lines for queer support. Social workers are key in researching and providing resources to people in need of support and intervention.

For this reason, it is critical for social workers to be culturally competent with the nuances of queer relationships, especially in the context of grief, and the ways in which the grief experience can be overlooked or not as seriously considered for queer bereaved individuals, their kin, and their communities. This study asked the question: what are the experiences of bereaved queer individuals who are experiencing the death of another queer person whose relationship existed outside of non-cisgender/heteronormative frameworks, and how can the awareness of these nuanced experiences inform social work practice when working with this population?

CHAPTER TWO

LITERATURE REVIEW

Introduction

Though literature that addresses specifically queer disenfranchised grief is limited, it is most certainly touched upon and can be cobbled together by way of reviewing literature that addresses queerness and the loss of queer companionship (friendship, kinship, intimacy, and everything in-between), disenfranchised grief theory, queerfeminist perspectives of death, dying, and bereavement, and anti-oppression perspectives. This paper also utilizes Stroebe and Schut's dual process model of coping (1999) and Silverman and Klass's theory of continuing bonds (1996) as the main theoretical models for intervening with queer disenfranchised grief.

Queer Companionship

A driving force for this research found its origins in Pavithra Prasad's 2020 essay, *In a Minor Key: Queer Kinship in Times of Grief*. Although an essay and not peer-reviewed research, the author examines the painful transition from biological family to chosen family, and the loss of members from both groups. Prasad describes the loss of a member of a queer family as a "communal ache", implying the magnitude of loss is experienced by both the individual and the nuances of a one-on-one companionship, and those of the circle of kin and community-at-large as their own bodies of grief – all intersecting at several points

(Prasad, 2020). Prasad continues to define queer grief as not just a direct response to death, but a response to “the violence of relational endings.” Here, Prasad highlights that through the shared yet individual experiences of marginalization, and the deep love and attentiveness it takes to find solace in trauma, it is common for all queer kinship to feel deeply rooted by way of shared life experiences – when one queer person dies, the very notion of triumphant queerness and trauma bonding is lost as well.

The history of Western queerness has found queer people fighting for their identities to not be pathologized. While disenfranchised grief begs for the complex relationships of marginalized people to be validated, recognized, intervened upon, and healed, the grief of queer companionship simultaneously begs to not be pathologized (Richards et al., 2000). While the AIDS crisis brought a roaring sense of grief, it also facilitated new ways of mourning in America: through the creation of the AIDS quilt and the powerful intervention of creative approaches to death, dying, and mourning, through the work of visual artists such as David Wojnarowicz, Felix Gonzalez-Torres, Sunil Gupta and AA Bronson. This era brought to light that queer people, through immense pain and grief, find new ways to sustain, thrive, and exist in a world that is stacked against them.

Disenfranchised Grief

McNutt and Yakushko (2013) state that society tends to deem an individual’s grief as illegitimate when marginalized identities and marginalized

types of relationships intersect. When those experiencing the aftermath and recovery from losing a loved one are faced with hatred and bigotry, healing can become increasingly complicated (Schupp, 2007).

There is immense research studying the psychological distress inflicted on queer people. *Heterosexism* speaks to the heterosexual, cisgender world-at-large's tendencies to establish heterosexual values and beliefs above those of the immensely broad LGBTQIA2S+ communities' cultural identifiers in combination with negative views and stereotypes of queer people that result in discriminatory actions and practices (Price & Herek, 1998).

The complicated process of grieving queer kinship can be further complicated when queer people are faced with emotional and psychological distress. How does one mourn in a healthy way when they are being told the person they lost was a sinner, "going to hell", or worse? One interviewee in David Weissman's 2011 documentary *We Were Here* states that a terminal AIDS patient's father in a hospital where he was a nurse told him that it was harder to accept that his son was gay than the fact that his son was dying. Mourning not just the loss of a loved one but mourning their trauma and the ways in which they were misunderstood and marginalized by society creates complex and deep psychic pain and a nuanced experience of grief.

McNutt and Yakushko define disenfranchised grief as bereavement from the death of a loved one being complicated by the influence of social stigmatization (McNutt & Yakushko, 2013). Their definition is fitting for the

context of this paper and will be referred to as such; however, disenfranchised grief can show up in other ways as well. A few examples of other forms of disenfranchised grief, considered here without the lens of queerness, are the impactful loss of a second cousin being disregarded because of the proximity of familial relationship; the death of a coworker being severely traumatizing but not being perceived as such because they weren't a close friend or family member, a miscarriage, or the severe impact of losing a pet. These are a few examples, but the broader definition of disenfranchised grief can be that of any impactful bereavement not commonly witnessed or understood as an impactful loss in relationship to the mourner, despite the depth of the mourner's grief (Price & Herek, 1998).

Queerfeminist and Anti-Oppressive Perspectives of Death

Radomska, Mehrabi, and Lykke (2020) call for a reconceptualization of death, dying, and bereavement in ways that skew from traditional Western practices and beliefs about death. The authors term this "norm-critical" perspective as *queer death studies* (QDS), which examines the ways in which hierarchical, patriarchal, hetero-centrist, Western death studies ignore the complex and fervent life and loss experiences of queer people can facilitate new and transformative, radical perspective on death, dying, and bereavement. The authors note that the 20th century, a "century of death", has created stringent, sterile, and melancholic Western attitudes towards coping with loss, and leaves little to no room for the simultaneous immense pain of loss and the desires for

complete and total celebrations of life for both those who are dead and those who are still living Radomska, Mehrabi, and Lykke (2020). The authors critique the factors of who is deemed appropriately mournable through a Western American Christian context: “citizenship, migrant status, geopolitical positioning, racialization, class, gender, sexuality, ability, and other markers of hierarchical difference” (Radomska, Mehrabi, and Lykke, 2020, p. 82). They prompt the questions: who do we get to grieve aloud? Who do we grieve in private shame because we fear others would attempt to negate our experiences?

Theories Guiding Conceptualization

The Dual Process Model

Stroebe & Schut’s dual process model of coping with bereavement (DPM) was created with the intention of examining the ways in which an individual copes with their loss, versus examining the entire phenomenology of bereavement (Stroebe & Schut, 1999). The authors describe two simultaneous processes of coping with bereavement: loss-oriented and restoration-oriented, and note that people undulate frequently between both processes as they manage their grief. The loss-oriented process focuses on coping with the various aspects of loss in relation to the death of a loved one. Here is where many traditional Western grief models lie, as it is necessary for a person to process what exactly has been lost -- the wholeness of the dead person, the shared relationship between the living and the dead, the finality of death, the impossible

desire to have more time together, and integration of this reality into the survivor's continuing life (Strobe & Schut, 1999). The restoration-oriented process examines the ways in which a person can grieve unproductively, and how that can be counter-acted. It should be noted that in both processes, the approach does not focus on the desired outcome, but the process of coping itself – what happens on the way through the murky waters of grief. Examples of restoration include tough but necessary tasks such as sorting through the deceased's belongings in order to adjust to a living space without the deceased, or taking over responsibilities that were once handled by the deceased. The oscillation of the dual process model can facilitate a sense of progress, but it must be considered that there is no definitive end to grief – it is a lifelong fluid experience – but grief will always grow as the individual grows and adapts.

Continuing Bonds

Silverman and Klass's 1996 theory of continuing bonds examines the nonlinearity of grief. Continuing bonds theory states that there is no end to grief. However, there is perpetual opportunity for the bereaved to reexamine, redefine, experience, and enjoy with a refreshed, positive bond with the deceased for the rest of the bereaved's lifespan. Continuing Bonds theory (CB) encourages the importance of maintaining a connection with the deceased, as opposed to moving on from, or severing ties with, memories of and a sense of relationship with the dead. CB disregards the common, deeply melancholic and deeply mournful guidelines on what is appropriate grief and what is not, and moves

away from the pathological outlooks on deep grief. It acknowledges that grieving a loved one is of the most human experiences there is, and that love, meaning-making, and the preservation and expansion of memory and bonds will help individuals, groups, and communities redefine notions of grief in a positive, constructive light and integrate love, tenderness, and fondness to coexist with pain, sadness, and profound change.

Summary

There are several important aspects of defining and exploring what queer disenfranchised grief can look like. Intersectional biopsychosocial considerations of the bereaved individual and the relationship(s) they are grieving can give immense insight into the difficult and shifted reality the bereaved is facing. Literature that is written from a queerfeminist and/or anti-oppressive perspective points towards the urge to redefine grief out of the contexts of cisheteronormative, heterosexist patriarchal Western culture.

Disenfranchised grief in regards to queer companionship is marginalized grief. Through considering the immense impact of the AIDS crisis on queer grief, it can be witnessed that queer people have adapted to life and death in the margins through celebration, art, and expansive intersectional love.

Through the application of the Dual-Process model and Continuing Bonds theory, those mourning a queer companion and experiencing disenfranchised grief, individuals, chosen kin circles, and communities have the opportunity to

transform what feels ignored or lessened by the world as a celebratory grief that does not need external validation to thrive.

CHAPTER THREE

METHODS

Introduction

The purpose of this study was to the ways in which disenfranchised grief is experienced by queer people in the aftermath of a queer death and the impacts such circumstances has on how queer people reflect on their social support in periods of bereavement. In this chapter, the study design, sampling method, data collection and measurement tool, protection of human subjects, and procedures will be discussed.

Study Design

In order to assess the ways in which grief becomes disenfranchised for queer people bereaving loved ones whose relationships exist outside of cisheternormative systems, the study consisted of a questionnaire-based interview with individuals who chose to sign-up for the study after understanding and acknowledging their willingness to access their grief in order to participate. This formal acknowledgement, as well as a collection of demographics and interview scheduling option was collected via a Google Form document. Every participant was interviewed via Zoom.

Participation will be voluntary, and the advertisement was made on various queer grief forums, such as the LGBT Loss forum at Grief in Common (Grief in Common, 2021) and several grief-related LGBTQIA2S+ (lesbian, gay,

bisexual, transgender/nonbinary, queer/questioning, intersex, asexual, Two-Spirit) forums on Reddit. Physical flyers were sent to various organizations in the United States, outside of the Inland Empire area in California.

Volunteers were asked to be eighteen years or older, and self-identified as LGBTQIA2S+. The person they are grieving must also have been self-identified as a member of the LGBTQIA2S+ community. The intention of the study was to examine the ways in which queer relationships could be invalidated during periods of bereavement for the sole purpose of the nature of the relationship. Since the study was volunteer-based, exploratory, and qualitative, there were no definitive black-and-white conclusions that would be made, but rather, the ways in which queer people experience support after losing a loved one was discussed. This study did not intend to set parameters for the ways in which queer people should or should not experience their grief. The intentions of the study were to reflect to social workers the ways in which significant emotional bonds between queer people have the potential to be marginalized when the relationships need validation the most. Participants were not asked specific details of their grief experience; they were asked to reflect on their experiences with the witnesses to their grief: friends, family, partners, co-workers, or anyone else close to them during their periods of bereavement. The term “witness” was explained to the participants at the beginning of each interview, and examples of who are not considered witnesses as well, which included any form of structured/professional support such as therapy or support groups.

When working with queer bereaved individuals, several factors were considered. What was the relationship defined as? How close were the bonds between the living and the deceased? Had the relationship been invalidated by anyone? If so, how? How important was it for the relationship to be understood and validated in order to feel comfortable mourning socially? What kind of support was received by the participant by their witnesses? Had the participants' identities consciously affected their process of grieving? All these questions contribute to the experience of disenfranchised grief in positive or negative ways, and each question corresponded to the next. Some of these questions were asked explicitly in the interviews, while others were explored in the data analysis.

The limits of the format of this study relied heavily in its volunteership. However, since this study's focus was limited in its published research, seeking several routes for participants was necessary. Online perusing for the topic of queer grief support is limited in its results, and most people who contribute to forums were openly grieving their significant other. Knowing that grief is an incredibly personal, private, and unique experience for every bereaved individual meant that asking people to share openly about painful aspects of their grief (in this case, disenfranchisement and invalidation) was asking a lot, emotionally. Participants were told that they could end the interview at any moment. No direct quotes from the open-ended questions are shared in the study results. The submitted answers are only examined by the researcher and generalized accumulative data is pulled from the answers received.

Sampling

The sampling for this study was non-probability convenience sampling. Participation was on a volunteer-basis and sought out in LGBTQIA2S+-focused grief support groups as well as non-specified general grief support groups online, and a call for participation via social media platforms and physical flyers designed and facilitated by the researcher. Originally, the minimum goal for the research was thirty volunteers in order for generalized qualitative data with commonalities in the results to be pulled. However, the research only ended up with six participants. Despite the small sample group, the interviews were lengthy and highly insightful. In addition, the researcher asked that bereaved participants whose death event was within the last six months not participate. This was to guarantee that sufficient time (six or more months) had passed since the death event, wherein the participant had time to process and reflect on their grief experience with their witnesses.

Data Collection and Instruments

Google Forms was utilized to collect acknowledgement of participation, interview scheduling, and participant demographics. The demographics collected were age, gender identity, pronouns, sexual orientation, and ethnicity. The intention of collecting these demographics was for the sake of potential

observable patterns emerging in any of these demographic categories in the data coding process.

During the recorded interview, a qualitative, open-ended questionnaire written by the researcher and adapted from St. Clair's *Witnessing of Disenfranchised Grief* (2013) Likert scale quantitative measurement tool was used. Some of these scaling questions were directly converted to open-ended questions, such as from:

The witness understood the full extent of my loss (strongly agree, agree, unsure, disagree, strongly disagree) (St. Clair, 2013)

to:

Do you feel as though witnesses to your loss understood the full extent of it? Why or why not?

Twenty questions in total were written for the interviews, and some asked for similar information:

*How did the witnesses validate or not validate your right to grieve?
In what ways did you feel you were sufficiently supported by your witnesses?*

Participants were told at the beginning of the interview that questions were designed this way on purpose in order to be thorough in both thought and responses. Participants were told that any question could be skipped over, and the interviews could be ended at any time they wanted.

Once the recorded interviews were completed, the audio files were pulled from the video files, and the video files were permanently deleted. Once all interviews were transcribed, the audio from the interviews was permanently deleted as well. For the sake of data coding and analysis, the transcriptions were deleted once the data coding and processing for the research project was brought to completion in full.

Procedures

An announcement clearly outlining the intent and purpose of the study and its qualifiers to participate was posted on multiple platforms (such as Grief in Common and Reddit). Additionally, a flyer containing image and text was created to be posted on visual-based social media platforms such as Instagram and Twitter, as well as in-person at various organizations and community centers. Each posting contained a direct link to the Google Form containing the participants' contact information (e-mail address), informed consent, demographic information, interview expectations, acknowledgement of the research participation qualifiers, and willingness to participate. Once the information was received from each participant, the researcher scheduled interviews and shared a Zoom link with the participants.

Protection of Human Subjects

The identities of the participants will never be recognized, or sought after, nor will the researcher participate in any of the forums relating to the context of the study in order to guarantee complete anonymity of the study's subjects. The only participant information required in the survey was the acknowledgement of collection of participant demographics, and email address associated with the participant's Google Form submission.

Participants were asked to participate only if their loss was considered non-cisheteronormative (described as either monogamous partner/spouse, or blood relative) and that the death event occurred no less than six months previous. The date of the participant's loss, details surrounding the circumstances of the death, or any other nonrelevant information were not asked or expected to be disclosed by the participants and relied solely on the participant's voluntary sharing of the information. Such details were not involved in the data analysis process. Submitted forms were numbered/lettered as a means of identification for data coding, processing and analysis. Only the generalized and analyzed data was saved, in the form of the final version of the research project itself.

At the conclusion of the interview, participants received a verbal statement from the interviewer that the participant would immediately receive a debriefing statement including support resources to their email address at the conclusion of the interview session. The list of resources linked to various crisis hotlines, as

well as links to grief and bereavement support networks. The study protocol was approved by the California State University San Bernardino Institutional Review Board.

Data Analysis

The researcher used qualitative content analysis in examining and coding the research study data. The researcher looked for arising patterns or variance when comparing the responses from each participant to each interview question. If there were words or phrases used by several participants, that was noted as well. Since demographic information was shared voluntarily by participants, it was considered only in the instance that significant similarities or significant differences in participant responses transpired. The data analysis reflects the common experiences of disenfranchisement of grief in the participants and produced implications for social work cultural competency.

Summary

This study explored the ways in which queer people experience grief when grieving those they considered to be a companion (non-spouse/partner or blood relative). By use of the Experience of Queer Disenfranchised Grief Questionnaire, the qualitative data highlights the phenomena of the participants' experiences of disenfranchised grief. The researcher closely studied and analyzed the survey and questionnaire submissions in order to discuss common

themes and process ways in which queer people experiencing disenfranchised grief can be better supported by social workers.

CHAPTER FOUR

RESULTS

Introduction

Chapter four discusses data themes used as frameworks and derived from data analysis. Six participants were interviewed for data collection and are the only sources of data in this study. No participants knew each other and grieved in separate communities. A set of themes were predetermined to search for in the data, which are pulled from the interview questions, as well as new themes that arose while analyzing the data. The primary data utilized in this study was interview-based qualitative data, as well as some gathered demographics.

Demographic Analysis

The six participants in this study ranged from ages 28 to 46. Four participants identified as Caucasian, one as Latinx, and one as Native American. Three participants identified as gay, and three identified as queer. Four participants identified as cisgender male, one as transgender female, and one as non-binary/gender non-conforming. As defined by the participants: one participant (Participant A) lost an ex-boyfriend who remained a friend, one participant (Participant B) lost an ex-boyfriend a month after they broke up and defined by the participant as their one true love, one participant (Participant C)

lost a best friend who was defined by the participant as their "twin flame" or soulmate, one participant (Participant D) lost their "lover, partner, friend, and collaborator", one participant (Participant E) lost their boyfriend, and one (Participant F) lost their chosen daughter.

Inductive Themes

Disenfranchisement

Disenfranchisement is defined for the sake of this research as whenever the participant would note instances in which their grief was disenfranchised by some external force, mainly by their witnesses, whether that was by action or words. Four participants reported experiencing disenfranchisement during their periods of bereavement. Participants B and D shared on their relationships being invalidated directly by either their family members, friends, or the family members of the deceased. Participant D was told directly that it's "time to move on" by family members and had close friends that were also friends with the deceased withhold information about the deceased's life and experiences leading up to their death. Participant D had friends share with them that they were sick of being asked how the participant was doing. This participant noted that since the person they lost was a partner from an open relationship, that their loved ones did not regard their relationship as valid as their sibling's marriage.

Participant E was left out of his deceased boyfriend's funeral and memorial service entirely, purposefully excluded by his family. The participant

noted that he knew his boyfriend's family blamed him for their son's death. Soon after, he distanced himself from most of the friends in their circle and moved to a different city.

Participant B shared that their father distanced himself from the participant in the wake of their ex-boyfriend's death, noting that it made them aware of their father's instilled homophobia, because they had witnessed him being compassionate and present in other death circumstances. The participant noted that their father never "respected [their] grief." Participant B noted that their group of friends was fractured in the wake of the death event because some friends spiraled into addiction and distanced themselves.

Participants B and D shared feelings of being "too much" for their witnesses to handle, and that they were told multiple times by their witnesses that they were acting "crazy" or that the witnesses were concerned, without providing adequate compassion or support to the participant. The participants reported that this impacted their sense of self while grieving significantly.

Validation and Received Support

Validation occurred when a participant would express their grief being adequately recognized in compassionate and/or empathetic ways by their witnesses. Participants A and C received high levels of support and validation from their witnesses, with little to no reported experiences of direct disenfranchisement. Participant C who noted that they and their deceased loved one were members of a group of nightlife-oriented queers in New York, received

many offers from close friends to have food prepared or delivered, assistance with errands and bills, and a generic sense of abundant support.

Participant A noted that their friends shared a support network that felt sufficiently egalitarian in terms of balancing and distributing support amongst each other. This group of friends held several ceremonies and gatherings in remembrance of the loved one they lost. Conversations amongst these two participants in the study shared an air of ease when seeking and receiving support. Both participants used the word “natural” when describing this mutual exchange while grieving. Participant C shared that they were solely validated by the mutual friends who knew their loved one but did not receive support from anyone else in their life that did not know their loved one.

Seeking Support

Participants made a distinction between the instances when they would seek out support from their witnesses, rather than being approached about their grief. Participants D, E, and F purposefully did not seek support from their witnesses and admitted to self-isolating. All three reported shutting down any notion of support from their witnesses aside from condolences. Participant D reported negative responses after seeking support from their witnesses, who were mutual loved ones of the deceased. This participant attributed this due to the friends’ collaborative projects with the deceased and that they chose to focus on their creative projects rather than showing support to the participant. When this participant reached out to their family for support, the family replied that it

was “time to move on”. Participant B acknowledged that they would persistently seek support from their witnesses that demonstrated their discomfort until they felt they were adequately supported, because they did not know what else to do to receive the support that they needed.

Advice

Participants were asked in the interview what advice they would give to people that are witnesses to a queer person’s queer grief. Four common approaches were shared amongst the participants: ask questions, reach out, validate, and create space for the grief. Several participants shared that check-in questions such as “how are you doing?” could come off as overly obvious, whereas questions like “want to go for a walk?” or “do you want to have dinner with me?” would provide comfort; in other words, offering presence and comfort rather than having to respond to prying questions brought the most peace and ease.

All participants acknowledged some sort of avoidance in their grief experience, either from the participants or their witnesses. All participants recommended checking-in on the bereaved, and some participants noted that it felt easy to self-isolate during the most intense periods of grief. Participant F shared that it is impossible for anyone to understand the full extent of someone else’s pain, that every experience of grief is unique, even if five people are grieving the same person, because it is not just contingent on the nature and history of the relationship, but also influenced heavily by the person’s entire life

experiences, traumas, and resiliencies. Keeping this in mind, the participant noted, can bring witnesses comfort, and relieve them of the responsibility that they must understand every single aspect of someone's grief in order to suitably bring them comfort. Participants C, E, and F noted that it is impossible to take away the pain of grief from someone, that it is a necessary life experience, but the important thing is to let the bereaved know that they are loved and supported. Participant F added, it is no one's responsibility to "fix" or "cure" someone's grief.

Deductive Themes

Mutual Witnessing

A theme arose from those participants who grieved within groups of people, chosen family units or otherwise, who shared relationships with the deceased loved one. Mutual witnessing is defined here by the researcher as instances where participants shared that they were not the only ones amongst their group of witnesses who both experienced bereavement and shared or neglected support after their loved one's death. Mutual witnessing in this data reports several instances where the participant reciprocated witnessing with other members of their community in uplifting, sustainable, and collaborative ways.

Participant A had several *in memoriam* ceremonies that involved both spiritual and celebratory aspects: performed rituals, recitals of art, food and drink. These processes involved close friends of the deceased and encouraged all

participants to share and perform. Participants A, B, and C had multiple friends from the same circle that they would process their grief with.

Participants B and D shared their experience of mutual witnessing as negative; several friendships were frayed, as some people closed down emotionally or spiraled into various addictions. Additionally, these witnesses were reported as having conflicted perspectives on the relationships of others with the deceased, creating unnecessary conflict during extreme emotional pain amongst close friends.

Distance

Distance occurred both physically and emotionally amongst participants and their witnesses. In three instances, participants physically distanced themselves; two due to recognition of their unhealthy and unsupportive environment, the third in order to obtain “breathing room” and introspection despite feeling adequately supported by their witnesses. Some degree of emotional distance occurred during the participants’ bereavement periods, whether their overall experiences with their witnesses were reported as positive or negative.

Summary

Disenfranchisement, validation and received support, seeking support, advice, mutual witnessing, and distance were all main themes of the research data. Four of these themes were expected from the research question, and

themes of mutual witnessing and distance emerged from the collected data. All these themes derive not from grief itself, but from the exchange between the bereaved and their witnesses. This study observed the social aspects of bereavement amongst queer people experiencing the loss of a queer loved one. No participant reported explicitly harmful queerphobia contributing to their grief, but some invalidation occurred when the participants noted that they thought the full extent and significance of their relationships were not understood by their witnesses.

CHAPTER FIVE

DISCUSSION

Introduction

Thoughts on the disenfranchised experiences of queer bereavement and the implications for social work practice, policy, and research, deduced from the research data and literature review, will be discussed in this chapter. Limitations of the study will also be acknowledged.

Discussion

This study's intention was to examine the ways in which queer bereavement can be negatively impacted by grief disenfranchisement, and how social workers can intervene to ease the complications and discomfort this can cause individuals, groups, and communities.

Those interviewed for this study had varied experiences of their grief, experiencing the entire spectrum of support and validation, whether it was immense or completely absent. The presence of kinship during bereavement was a life-sustaining force for several participants in this study, as acknowledged by Prasad (2020). No participants had a wholly positive or negative experience of their grief processes, but some did have fully negative reports or fully positive reports on the ways in which they were supported or not supported by their witnesses. Those who received adequate support from their witnesses shared, in

their own ways, some newfound sense of meaning or life purpose. The death of a loved one, especially a life-affirming companion, is one of the most intensely turbulent, powerful, and transformative experiences humans experience in a lifetime. There is some relief or reassurance in knowing that horror has been faced and that they had survived it. Multiple participants shared on this wisdom.

Some participants were driven to dark moments in their lives, sharing on their suicidality during the worst moments of their grief. While some have positive experiences of support during bereavement, others may have benefitted from significant, compassionate, competent intervention. Grief can awaken a person's reasons for surviving. When someone does not have foundational emotional resiliency and tools for coping, grief can lead one down a dark and confusing path. All of one's life skills, traumas, spirituality, and approaches to sustaining one's livelihood come into play. A participant summarized this as the "huge existential curriculum for grief." These factors create varying grief experiences in every individual.

Grief can become disenfranchised when the bereaved individual's relationship to the deceased is not traditionally validated. In this study, there were varying types of non-cisheteronormative relationships: chosen family, former lovers and partners that remained close, a participant's second boyfriend in an already established long-term relationship, a best-friend-with-benefits. The complications of nontraditional relationships came into play for every participant, whether it was because of their sexuality or the type of relationship. Those who

had negative experiences were met with a lack of support by the witnesses who did not understand the significance of the relationship. Any person sharing their grief with others deserves to have their grief validated. This small gesture can show support by a witness, even without further adequate support being provided.

The death of a loved one is most certainly a life-altering experience for all people, and it is rare someone who lives long, full life can escape grief's reach. When you exist as a marginalized person, any life-altering circumstance can be stressful due to the barriers to adequate care and support most marginalized people and communities experience to some degree. For queer people, this often shows up as both their identities and relationships being invalidated, and their needs being met somehow being perceived as less-than-worthy when their livelihood partially rests in the hands of policymakers.

Richards et al. (2000) notes that the AIDS crisis brought queer mourning to the forefront of American media in the late 1980's onward. Yet, we still witness queer people fighting for gender rights, recognition, and acceptance, while the murder rates of transgender and GNC people continue to spike (Human Rights Campaign, 2021). This is a frightening fact, and queer bereavement remains a casual statistic on nightly news. Queer millennials were born into the epicenter and mournful wake of the AIDS epidemic; an entire generation born into the notion that to be queer could also mean to be dead. Grief is embedded in queer culture.

Recommendations

Social Work Practice

The key components for informed social work intervention and practice with bereaved queers on micro, mezzo, and macro levels are foundational knowledge on grief intervention, up-to-date cultural competency for the LGBTQIA2S+ community, compassion, empathy, validation of experience. If social workers can harness all these components, adequate support can be provided. The two main interventions for bereaved individuals and groups are Stroebe and Schut's (1999) dual process model of coping with bereavement (DPM) and Silverman and Klass's (1996) theory of continuing bonds (CB). Both DPM and CB suggest interventions that focus on developing emotional coping skills and the memorialization of the dead person, as opposed to a false notion that grief is something to "get over" in Western civilization. This false notion creates turmoil for the bereaved. The reality is grief is something to integrate into our lives; a mutable force that can inform our entire perspective on reality and spirituality. For queer people, integration of identity can be a daily practice, especially those who must keep their physical safety and mental health at the forefront of their conscious mind.

Queer people have been doing the work of transforming Western perspectives on grief for decades by way of artmaking and activism. There is an established sense of intersectionality, boldness, and receptiveness in many

queer communities and subcultures. Grief has inspired radical change and restorative justice in Western queer culture, consistently reflecting on what can facilitate the most uplifting and supportive legislative changes for all. The main goals of DPM and CB share this vision as well: coping with loss, preserving and expanding memories, making new meaning in one's life, and the potential to change the lives of others. Social workers can compassionately facilitate these types of interventions in a grieving queer person's life. Understanding the historical lineage of these skills, tools, and actions can help give context to possible community roots and resources that the grieving person can potentially find connection within.

On a macro level of practice, more space within communities for people to share openly about their grief should be created. It is important for any individual to have access to sufficient grief support. Communities should ensure that there are several open-door grief groups available every week for community members to access, free of charge. Closed, therapeutic, evidence-based support groups should exist as well. Public ceremonies for mourning, such as candlelight vigils are necessary in helping people cope and find community in the aftermath of tragedy. Art therapy can help children explore their feelings around death. Social workers can facilitate the establishment of these events and programs.

Social workers can help normalize death, dying, and bereavement in their practices. For many people, grief is almost a taboo subject to be avoided. The thought of dying and the thought of losing loved ones can be terrifying and

deeply existential for people to consider. It is important when doing grief support work that social workers confront their own projections and feelings about death and loss in order to avoid significant countertransference. This can better equip social workers to facilitate healing, growth, and reframing in their clients.

Policy

Bereavement leave for any significant relationship, as defined by the bereaved, should be something that every working person has access to, without needing to prove that significance to their workplace. Robson and Walter (2013) argue that “social norms about the legitimacy of bereavement are not binary (yes-no), but are scalar or hierarchical, or even more complex still.” According to California AB 1949 (“Employees: bereavement leave,” 2021):

“Family member” means a spouse or a child, parent, sibling, grandparent, grandchild, domestic partner, or parent-in-law as defined in Section 12945.2.

This bill is for a five-day leave within the three months following the death. There is no possible tool of measuring the future longevity/severity of a person’s grief. Certainly, there is also no legal protection for queer people’s job security if they are mourning the loss of anyone that is not legal or biological family, such as a best friend/former ex, a friend-with-benefits, or chosen sibling.

Unless already established by way of power of attorney, no end-of-life decision-making can be made by non-bio-legal family. In the event of an emergency, most non-cisheteronormative close relationships can intervene in

death circumstances. Policy change could facilitate potential routes that establish easier access to such decision-making be made readily available in tragic circumstances to eliminate any bureaucracy-based conflict with queer people and access to the details and decisions surrounding the death.

Social workers can organize and lobby for policy change that protects all bereaved individuals, without needing to be legally or biologically tied to the deceased or prove the significance of the relationship to the person they lost.

Research

There is ample research on LGBTQIA2S+ cultural competency, as well as queer grief in a historical context, but little is published on the intricacies of queer loss outside the loss of one primary partner. The field needs a lot of research to back up its significance and expansive potential. The Queer Death Studies Network (QDSN) was established November 2016: “The network constitutes a space for researchers, students, artists, activists, and other practitioners who critically and (self) reflexively investigate and challenge conventional normativites, assumptions, expectations, and regimes of truths that are brought to life and made evident by death, dying, and mourning,” (Queer Death Studies Network, 2020.) It is assuring to know that QDSN takes a holistic approach to being change agents, and that quality is something that is certainly needed in shifting the paradigm for Western grief and its associated attitudes, behavior, legislation, and support.

Limitations

Recruitment for this study was limited to its volunteership, and as a result, the sample size was small, consisting of six participants. The requirements that both the person participating in the study and the person they lost must identify as queer or under the LBGTQIA2S+ umbrella narrowed the scope of possible participants. Considering the limited reach, lack of funding for participation incentives, and sensitive nature of the topic, a large number of volunteers was not expected. However, the topic is significant and urgent, especially during the COVID-19 pandemic, in a time where grief and its representation in the media has significantly spiked and violence against queer people is the most visible it has ever been.

Conclusions

Prasad's (2020) description of the loss of a queer loved one as a "communal ache" rings true throughout the study's data. Communal aching emerged in several ways: through individual/privatized grief, mutual witnessing, disenfranchisement, emotional distance, yearning for support, emergence of addiction, and severed ties amongst queer chosen family and community members. Pain is unavoidable in the grief process, and it is experienced both internally and externally, within the frameworks of reality and existentially. Queer griefwork can look many ways and adequate cultural competency includes staying current with LBGTQIA2S+ terminology, and increasing aware of queer grief's historical lineage, intersecting factors, and non-cisheteronormative notions

of family, love, and intimacy. Through compassionate efforts, empathy, validation, competency, and education, social workers can provide sufficient support for bereaved queer individuals, groups, and communities experiencing grief disenfranchisement and contribute to the expanding lens of how grief can be experienced and validated.

APPENDIX A
EXPERIENCE OF QUEER DISENFRANCHISED GRIEF QUESTIONNAIRE

Adapted from the Witnessing of Disenfranchised Grief measurement tool, developed by Jean S. St. Clair in 2013.

In the questions below, the term “witness” refers to those emotionally close with you, or around you the most, who were aware of your grief, such as friends, family, co-workers, acquaintances or similar relationships. Witnesses are not members of support groups, therapists, or other forms of supervised and/or structured support.

1. Please describe the nature of the relationship with the loved one you lost.
2. If you had to choose a label for your relationship with the loved one you grieve, what would it be?
3. Please tell me about your witnesses and your relationship with them – friends, family, partners, etc.
4. Please describe your experience of seeking support from your witnesses.
5. What were some specific examples that witnesses said or did that negatively impacted your experience of grief?
6. Do you feel as though witnesses to your loss understood the full extent of it? Why or why not?
7. How did the witnesses validate or not validate your right to grieve?
8. In what ways did you feel you were sufficiently supported by your witnesses?
9. In what ways did you feel you were not sufficiently supported by your witnesses?
10. In what ways did witnesses reflect back to you the ways in which they understood, or related to your grief? How?
11. Describe your comfort level with expressing your grief freely to your witnesses.

12. How would people express to you what their comfort level was in being a witness to your grief?
13. Do your witnesses ever bring up your loss without you bringing it up first? In other words, do they initiate checking in on you, or bring up memories or ask questions.
14. How did you notice the communication with your witnesses change before and after the death event?
15. To what extent do you feel you were supported by your witnesses through emotional support (ex: active listening, reflection)?
16. To what extent do you feel you were supported by your witnesses or action-based support (ex: bringing you food, driving you to appointments)?
17. Based on your experiences with your witnesses, what aspects of their support (or lack of support) would you perform differently, in the instance that you are a witness to someone else's grief?
18. What advice would you give to others in showing up as better witnesses to queer loved ones experiencing loss?
19. Aside from your witnesses, please list other forms of grief support you experienced – i.e., grief support groups, therapists, self-help books, podcasts, etc.
20. Is there anything else you would like to share with me regarding your grief experience?

APPENDIX B
INFORMED CONSENT

Derek Lowell Corns, Researcher

Dr. Laurie Smith, Research Supervisor, Social Work

California State University San Bernardino

You are being asked to participate in the study *Disenfranchised Grief in Queer Companionship and Chosen Family*, conducted by graduate student Derek Lowell Corns under the supervision of Dr. Laurie Smith, Professor for the School of Social Work at California State University, San Bernardino. This study will ask participants to share in their experiences with witnesses to their grief following the death of a loved one. By signing this form, you consent to participation in this study after meeting the qualifications as outlined below.

Purpose: This study intends to examine the ways in which the grief of queer people who experience the death of a queer/LGBTQIA2S+ loved one can be disenfranchised. By recognizing such ways, the researcher will make considerations about the importance of LGBTQIA2S+ cultural competency within the field of social work that is intended to support bereaved individuals.

Description: Participants in this study will be interviewed by the researcher. All questions pertain to the participant's experience of grief and the ways it was validated or invalidated by those who were witnesses to the participant's grief. The interviews will be conducted using the online meeting software Zoom. Participants can choose to decline to answer any questions asked by the researcher. Participants have the right to end the interview at any time, for any reason.

Confidentiality: With the consent of the participant (you), the interview will be recorded on Zoom. The researcher will be on-screen, but the participant is not required to have their camera turned on. The interview will be recorded for the purpose of transcription. Once the interview is transcribed, all existing copies of

the audio/visual components of the interview will be permanently deleted from the researcher's password-protected computer hard drive. Any traces of your name (through e-mail or any other communication) will be immediately replaced with a number or letter to label the transcription with. Demographic data is collected before the interview for the purpose of data processing and analysis only. No direct quotes will be pulled from the interview; rather, data will be coded in order to evaluate similarities and differences in participants' responses.

Duration: The duration of the interview should be no longer than forty-five minutes. The interviewer will monitor the time to ensure it does not exceed participant expectations.

Risks: The questions in this interview may require the participant to access uncomfortable memories regarding the support the participant received during their bereavement period. However, the participant will never be asked any questions regarding the circumstances or date of the corresponding death event of the person being grieved. Due to the sensitive nature of these questions, the participant can end the interview at any moment. You as the participant will receive a debriefing statement including resources for further support.

Benefits: There are no direct or apparent benefits to the participants of this study.

Contact: Should any questions regarding this study arise, please contact Derek Lowell Corns by email at 007424320@coyote.csusb.edu or Dr. Laurie Smith by email at lsmith@csusb.edu.

APPENDIX C
DEBRIEFING STATEMENT

The purpose of this study is to examine the ways in which queer people experience disenfranchised grief when mourning the death of a loved one who also identified as queer/LGBTQIA2S+ and whose relationship with one another existed outside of cisgender/heteronormative frameworks. Research suggests that the life experiences as LGBTQIA2S+-identified people can vary in specific ways to those of cisgender heterosexual people, and in the occurrence of death and bereavement, such circumstances can be further complicated and disenfranchised by the types of relationships the bereaved and the deceased shared. Queer people deserve the dignity of having their grief validated, no matter how unfamiliar the nature of the relationship may have been to those around them. This study will provide supportive and informative insight into social work practice by discussing the ways in which queer people can experience grief, and therefore how social workers can better support the bereaved.

Should you, the participant, find yourself wanting or needing support after this interview, or any time in the future, please utilize any of the applicable LGBTQIA2S+ affirmative resources listed below:

- The Trevor Project: (866) 488-7386
- Trans Lifeline: (877) 565-8860
- National Suicide Prevention Lifeline: (800) 273-8255
- Crisis Text Line: Text START to 741-741
- Grief in Common, <http://griefincommon.com>
- National Alliance on Mental Illness, <http://nami.org>
- National Mental Health Association, <http://mentalhealthamerica.net>

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