

## Mediating Role of Coping Strategies on the Symptoms of Complicated Grief and Psychological Well-Being during COVID-19 Pandemic<sup>1</sup>

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### Abstract

The COVID-19 pandemic altered the way people live. For safety reasons, the government of the Philippines imposed health guidelines that affected the grieving process of Filipinos, resulting in complicated bereavement; yet there is little research examining potential protective factors for grieving Filipinos. This study investigated the mediating role of coping strategies between complicated grief and psychological wellbeing among 200 bereaved Filipinos aged 18 to 67. The researchers employed random sampling to administer modified versions of the Inventory of Complicated Grief, Coping Strategies Scale, and Ryff's Psychological Well-being questionnaires. It was determined that the degree of complicated grief was low, the level of coping strategies was high, and coping mechanisms were frequently employed. The findings indicated that coping strategies fully mediated the relationship between symptoms of complicated grief and psychological well-being ( $\beta = -.493, t = 2.16, p = .03$ ). Implications and recommendations were discussed.

**Keywords:** *Grief, well-being, coping*

### Introduction

The World Health Organization (WHO) declared in March 2020 that the novel coronavirus or COVID-19 outbreak in China characterized a global pandemic (Cucinotta & Vanelli, 2020). COVID-19 is a contagious viral respiratory disease that led many countries, including the Philippines, to impose health protocols to contain the virus (i.e., wearing a mask, physical distancing, and a limited number of people at any social gathering). According to the Center for Strategic and International Studies, the Philippines has the 2nd highest COVID-19 death rate among Southeast Asian countries, with 34,672 deaths as of September 9, 2021. However, due to health protocols, the mourning rituals could not be performed, making the grieving process more difficult for bereaved families. For instance because of an abundance of caution, funeral homes in the Philippines pushed for cremation even when COVID-19 was unverified or not suspected, and burial and cremation processes had to be completed within 12 hours of death (Go & Docot, 2021; *Department of Health Website*, n.d.). COVID-19 related deaths usually ended up with cremation, with little to no chance to hold funeral services. In addition, families and friends living a distance away did not have the opportunity to attend the service because of travel restrictions or community quarantines.

Few studies suggested that normal grief might develop into complicated grief (CG) during the COVID-19 pandemic (Eisma & Tamminga, 2020; Goveas & Shear, 2020; Eisma et al., 2021; Chuqian & Tang 2021). It is difficult to pinpoint a specific time when "normal" grieving becomes CG as each person's experience is different. The main distinction is that feelings of sadness or anger fade over time with normal grief, and people resume their daily habits. A person with CG may feel trapped, unable to recuperate or return to their previous life indefinitely. Grief is the typical response to the loss of something meaningful, like a job or a relationship, whereas CG is usually the result of someone's death (Shear et al., 2011).

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People who lost someone during the COVID-19 pandemic experienced higher grief levels and prolonged grief than those who lost someone before it (Eisma & Tamminga, 2020). In addition, bereaved individuals felt more insecure and preoccupied if they lost someone due to COVID-19 (Han et al., 2021). According to Vahdani et al. (2020), grieving can be prolonged, difficult, and even traumatic if mourning rituals are not performed, resulting in complicated grief characterized by maladaptive thoughts, sentiments, emotions, and behaviors that exacerbate grief. Furthermore, Zhai and Du (2020) found that neglecting the needs of grieving individuals may result in poor mental and physical health.

Most of these studies emphasized how normal grief might become complicated grief as a result of a COVID-19 related death. However, there is limited research discussing possible protective factors from pathological grief. Moreover, few if any studies have been conducted in the Philippines about understanding the grieving process of Filipinos and how they cope with grief, given that no intervention programs exist in the Philippines yet. Therefore, this study aimed to examine the potential mediating effects of Filipino coping strategies on the symptoms of complicated grief, along with psychological well-being. In addition, this study aimed to identify what coping strategies worked best for bereaved Filipinos for both COVID- and non-COVID-related deaths. This study aimed to answer the following research questions:

### **Research Questions**

1. Is there a significant relationship between the following? (a) Symptoms of complicated grief and coping strategies, (b) symptoms of complicated grief and psychological well-being, and (c) coping strategies and psychological well-being.
2. Do coping strategies mediate the relationship between symptoms of complicated grief and psychological well-being among bereaved Filipinos?

### **Methodology**

#### ***Research Design***

This study utilized a descriptive-correlational research design to look for relationships between variables without using a control variable. Through descriptive statistics, identifying coping styles as helpful or not was made possible. The ultimate goal of descriptive statistics is to find new meaning, explain what already exists, identify the frequency with which something happens, and categorize data (Walker, 2005). In addition, this study included the structural equation modelling (SEM) approach. It is a sophisticated statistical technique used in behavioral science that combines a measurement model and a structural model into a single statistical test (Hoe, 2008; Hox & Bechger, 1998). In SEM statistical models, paths represent the causal relationships—proposed relationships between variables representing causal and consequential constructs of a theoretical proposition (Lowry & Gaskin, 2014). The advantage of SEM is that it allows researchers to specify and estimate more complex path models, including intervening variables between the independent and dependent variables, and latent factors (Hox & Bechger, 1998). The researchers used a descriptive-correlational approach with SEM, as it intentionally aimed to explore the prospective relationships among the coping strategies, symptoms of complicated grief, and psychological well-being variables.

#### ***Population and Sampling Techniques***

The population for this research study were 200 Filipinos who were 18–67 years old and had experienced the death of a loved one during the COVID-19 pandemic. The age range was a natural outcome of the snowball sampling technique. Contacting respondents was via social media. The selection of participants was through a purposive sampling procedure, also known as judgmental, selective, or subjective sampling. It is a non-probability sampling technique that relies on the researchers' judgment to select the participants based on the characteristics of a population and the objective of the study. This type of sampling can be useful when researchers need to reach a targeted sample quickly, and sampling for proportionality is not the primary concern (Crossman, 2019).

Further, snowball sampling was used in this study. According to Sharma (2017), snowball sampling is a non-probability sampling technique in which the study participants recruit people they know to participate in the study. Thus, the number of participants seems to enlarge like a rolling snowball. This sampling technique is commonly used when the target population is difficult to approach.

### ***Instrumentation***

The researchers employed structured questionnaires as their instruments to collect data and help ensure the validity and reliability of the research study. The researchers utilized three (3) standardized questionnaires in this study: The Inventory of Complicated Grief (ICG), Coping Strategies Scale, and Psychological Well-being Scale (PWB).

#### ***Inventory of Complicated Grief (ICG)***

This instrument examined pathological grieving indicators such as anger, disbelief, and hallucinations. The test consists of 19 first-person statements that describe a client's immediate bereavement-related thoughts and behaviors. Internal consistency was excellent, with an alpha coefficient of 0.94. In the same study, the test-retest reliability was 0.80. This scale also has a clinical cut off point that has been well-validated. Clients with a score of more than 25 are at high risk of requiring clinical care.

The scale and verbal interpretation of the Symptoms of Complicated Grief had a 5-point Likert scale with responses ranging from *Never* (1) to *Always* (5), and verbal interpretations.

#### ***Coping Strategies Scale***

This measurement tool examined Filipinos' stress coping strategies and provides a coping dispositional profile that aids in coping behavior assessment. The measured variables are cognitive reappraisal, social support, religiosity, recreation, problem-solving, tolerance, emotional release, over-activity, and substance use. This scale's inter-item consistency adds to its reliability, and SPSS reliability analysis confirmed it. The degree of interrelatedness or homogeneity of items on a scale is inter-item consistency. The items in each domain represent the same coping strategy construct. High inter-item consistency implies high reliability. Construct validity uses confirmatory factor analysis. The Ways of Coping Questionnaire and COPE Inventory items in each Filipino Coping Strategies Scale domain was associated with the corresponding items in related areas of the scale. The correlations between the domains determine convergent validity. Pearson correlation demonstrated statistically significant correlations between the domains of the three coping measures. Positive correlations ranging from low to high confirmed the domain constructs' validity. The Filipino Coping Strategies Scale's overall Cronbach's alpha was .716.

The scale and verbal interpretation of Coping Strategies has a 4-point Likert scale, with responses ranging from *Never* (1) to *Always* (4), and verbal interpretations ranging from Not Utilized to Highly Utilized.

#### ***Psychological Well-Being Scale (PWB)***

This a theoretically based tool that measures many aspects of psychological well-being. It measures six aspects of well-being and happiness, but only 3 were used: namely, autonomy, personal growth, and self-acceptance. Researchers then reverse-coded 21 elements so that higher scores implied greater happiness, and then computed different subscale scores by adding all items in each subscale together. The test-retest reliability coefficients for a subsample of the individuals across six weeks were also high (.81–.88). The factor correlations in the pure six-factor model (in absolute values) ranged from moderate to substantial, .03 to .67. The shorter scales with 20-item parent scales usually have between .70 and .89 reliability. It includes positive and negative items on each scale (Ryff & Keyes, 1995 p. 720). The questionnaire was shortened to seven questions from an 18-item questionnaire and underwent a reliability study.

The scale and verbal interpretation for psychological well-being has a 7-point Likert scale with responses ranging from *Strongly Agree* (1) to *Strongly Disagree* (7), and verbal interpretations ranging from *Very Adequate* to *Very Poor*.

### **Ethical Considerations**

The Ethical Review Board of the Adventist University of the Philippines approved this study. The researchers guaranteed confidentiality to all participants. They informed the participants about the study's benefits, effects, and purpose. Participants' safety was valued, and no harm was done to them, whether psychological, physical, emotional, or mental. The informed consent form also included information on the population criteria. In the event of any unforeseen events, the researchers' phone numbers and emails were provided so that they could assist the respondents at any moment. The participants had the right to withdraw, and no information was used against them.

### **Statistical Treatment of Data**

To answer the main problem of this study, the researchers utilized means, standard deviations, frequency tables, Pearson correlation analysis, linear regression for descriptive analysis, and SmartPLS to analyze the data collected.

## **Results and Discussions**

### **Symptoms of Complicated Grief and Coping Strategies**

Table 1 presents the correlation analysis to answer the research question: Is there a significant relationship between the symptoms of complicated grief and coping strategies, symptoms of complicated grief and psychological well-being, psychological well-being and coping strategies?

**Table 1** *Correlation Between Symptoms of Complicated Grief and Coping Strategies*

Coping Strategies	Correlation with Complicated Grief	
	<i>r</i>	<i>p</i>
Cognitive Reappraisal	-.187**	.008
Social Support	-.014	.843
Problem Solving	-.191**	.007
Religiosity	-.085	.230
Tolerance	.022	.761
Emotional Release	.215**	.002
Overactivity	.184**	.009
Recreation	-.123	.082
Substance Use	.236**	.001

\* *p* = .05 (2-tailed), \*\* *p* = .01 (2-tailed).

Table 1 indicates that when the bereaved Filipinos used coping strategies, specifically cognitive reappraisal and problem-solving, they were less likely to experience CG. It also implies that when the bereaved Filipinos use coping strategies, specifically emotional release, over-activity, and substance use, they are more likely to experience CG.

In general, positive associations were found between putative maladaptive emotion regulation strategies (e.g., emotional avoidance) and complicated grief, and negative associations were seen between putative adaptive emotion regulation strategies (cognitive reappraisal, acceptance, and problem-solving) and complicated grief (Eisma & Stroebe, 2021).

Based on a qualitative study conducted by Chuqian and Tang (2021), another participant was overworked and abusing alcohol to avoid remembering his loss. Psychological characteristics linked to the deceased and contextual factors appeared to be risk factors. Moreover, CG has sensible emotional releases such as anger and loneliness (Stroebe et al., 2007). Furthermore, individuals who used substances were more likely to suffer complicated grieving later in life, especially if their substance intake escalated prior to the loss (Parisi et al., 2019).

### **Symptoms of Complicated Grief and Psychological Well-Being**

Table 2 presents the correlation analysis to answer the research question: Is there a significant relationship between the symptoms of complicated grief and coping strategies, symptoms of complicated grief and psychological well-being, psychological well-being and coping strategies?

**Table 2** *Correlation Between Symptoms of Complicated Grief and Psychological Well-Being*

Psychological Well-Being	Correlation with Complicated Grief	
	<i>R</i>	<i>p</i>
Autonomy	-.087	.219
Personal Growth	-.186**	.009
Self-Acceptance	-.171*	.015

\* *p* = .05 (2-tailed), \*\* *p* = .01 (2-tailed).

Table 2 implies that when bereaved Filipinos have personal growth and self-acceptance, they are less likely to experience CG.

The grieving process in some studies led to Personal Growth Theory, where personal growth refers to the process of being constructively transformed by a traumatic incident, as opposed to a sense of accomplishment or contentment with returning to normalcy (Hogan et al., 2010). Furthermore, individuals who have reached acceptance as the final stage of grieving can live in peace with their loss (Ristriyani et al., 2018).

### **Coping Strategies and Psychological Well-Being**

Table 3 presents the correlation analysis to answer the research question: Is there a significant relationship between the symptoms of complicated grief and coping strategies, symptoms of complicated grief and psychological well-being, coping strategies and psychological well-being?

Table 3 below shows that among the coping strategies subscale, seven have a significant correlation with the psychological well-being of the bereaved Filipinos. However, the correlation differs in each aspect of psychological well-being, namely, autonomy, personal growth, and self-acceptance.

**Table 3** *Correlation Between Coping Strategies and Psychological Well-Being*

Coping Strategies	Correlation with Psychological Well-Being					
	Autonomy		Personal Growth		Self-Acceptance	
	<i>r</i>	<i>p</i>	<i>R</i>	<i>p</i>	<i>r</i>	<i>p</i>
Cognitive Reappraisal	.307**	.000	.347**	.000	.475**	.000
Social Support	.158*	.026	.343**	.000	.391**	.000
Problem Solving	.319**	.000	.390**	.000	.425**	.000
Religiosity	.138	.051	.368**	.000	.488**	.000
Tolerance	.136	.056	.289**	.000	.140*	.048
Emotional Release	.057	.422	-.009	.898	-.002	.982
Overactivity	-.042	.557	-.154*	.029	-.184**	.009
Recreation	.280**	.000	.453**	.000	.459**	.000
Substance Use	.061	.389	-.020	.776	-.001	.994

\* *p* = .05 (2-tailed), \*\* *p* = .01 (2-tailed).

The results in Table 3 indicate that when bereaved Filipinos used coping strategies, specifically cognitive reappraisal, problem-solving, social support, and recreation, they were more likely to have autonomy, personal growth, and self-acceptance. It also implied that when bereaved Filipinos used religiosity and tolerance as their coping strategies, they were more likely to have personal growth and self-acceptance, while the use of over-activity implied that they were less likely to have personal growth and self-acceptance.

Concerning the impact of coping strategies on psychological well-being, Halstead et al. (2017) asserted that individuals who use problem-solving and social support coping strategies in dealing with stressors may incur fewer psychological costs. This may reflect the good faith and religiosity that are highly prevalent in our community. Additionally, participants who displayed high levels of reappraisal were found to have reported less anger than those who did not (Juang et al., 2016). In the study of Iwasaki et al. (2002), recreation and leisure activities reduced self-reported levels of stress and contributed to both physical and mental health in various contexts and among individuals. Some studies indicated the ability to accept uncertainty, which could be due to an increased tolerance of uncertainty when living with a long-term health problem (Kurita et al., 2013).

However, individuals who habitually are overactive may contribute to their own psychological distress, along with their unwillingness to rely on others for support (Andrews et al., 2015), and poorer psychological health (Callaghan & Morrissey, 1993; Kashdan & Rottenberg, 2010).

The results in Table 4 indicate a significant direct effect of grief on coping strategies and coping strategies on psychological well-being. It demonstrated that the more symptoms of complicated grief one experiences, the less effective are the coping strategies. However, less effective coping strategies lead to lower psychological well-being. This is consistent with previous studies suggesting that coping strategies could lead to lower psychological well-being (Peña & Ritzer, 2017; Shambraw et al., 2021).

**Table 4** Mediation Analysis Results on the Role of Coping Strategies on Complicated Grief and Psychological Wellbeing

Effects	Coefficients	t	p	Interpretation
Direct Effects				
CG -> PWB	-.164	1.108	.268	Not Significant
CG -> CS	-.646	2.240	.025	Significant
CS -> PWB	.763	6.273	.000	Significant
Total Effect				
CG -> PWB	-.657	2.283	.023	Significant
Indirect Effect				
CG -> CS -> PWB	-.493	2.159	.031	Significant; Full Mediation

*Legend.* CG – Complicated Grief, CS – Coping Strategies, PWB – Psychological Well-Being

Further, the total effect of complicated grief on psychological well-being was significant. However, excluding the mediating variable, the (direct) effect of complicated grief on psychological well-being was not significant. Finally, the indirect effect of complicated grief on psychological well-being through coping strategies was significant. This shows that coping strategies fully mediated the relationship between complicated grief and psychological well-being.

The overall results indicate that complicated grief did not directly affect psychological well-being. Instead, higher levels of complicated grief could lead to less effective coping strategies, which would in turn result in a lower level of psychological well-being. It further suggests that more effective coping strategies do not lead to higher psychological well-being alone. Instead, it is necessary to have lower levels of complicated grief to utilize good coping strategies that lead to higher levels of psychological well-being.

This study provides new empirical evidence that complicated grief symptomology could make a bereaved person use unhealthy coping strategies. In contrast, a cross-sectional study suggested that specific coping strategies caused by closeness to the deceased led to complicated grief. Approach coping was associated with symptoms of complicated grief (Buqo et al., 2020). In addition, Schnider et al. (2007) also suggested that avoidant emotional coping predicted symptomology of complicated grief. Avoidant coping can be beneficial, but it could also become dangerous if it persists and negatively impacts the bereaved person's general wellness. Grieving individuals would therefore benefit from having to process the pain properly, and allow themselves to face the present moment rather than being stuck in the past forever.

Overall, the statistical analysis performed in this chapter suggests that the hypotheses were rejected except for the second hypothesis. The findings emphasized a relationship between coping strategies, symptoms of complicated grief, and psychological well-being, with significant differences in terms of the relationship and age of the deceased loved one, and the age and gender of the bereaved, but not the type of death. Additionally, only coping strategies were found to predict psychological well-being. Finally, the study found that coping strategies fully mediated the relationship between symptoms of complicated grief and psychological well-being.

## Conclusions

The COVID-19 pandemic disrupted many living patterns, including the grieving process, which led to increased incidences of complicated grief. Despite that, this study found that bereaved Filipinos had lower levels of complicated grief symptomology and higher levels of psychological well-being. In addition, this study confirmed that Filipinos commonly use adaptive coping strategies in times of grieving. Further, the results supported the notion that the higher the psychological well-being, the lower the level of complicated grief symptomology. Results also show that coping strategies were associated with higher levels of either psychological well-being or complicated grief symptomatology.

Coping strategies vary in terms of gender, age, and relationship. Interestingly, the immediate family of the deceased used more efficient coping strategies than friends and other family members despite higher complicated grief symptomology. In comparison with Bowlby's attachment style theory, the immediate family could still utilize adaptive coping strategies regardless of attachment styles. Surprisingly, there were no differences between COVID and non-COVID-related deaths. Contrary to our assumption, COVID-related deaths were not inclined to higher levels of complicated grief symptomology.

Moreover, the results demonstrated that coping strategies predict psychological well-being. That is, bereaved Filipinos who use healthy coping strategies will also be high in psychological well-being. Finally, as the results show full mediation of coping strategies, it is appropriate to conclude that coping strategies promote higher psychological well-being. This implies that grief intervention programs should assist the bereaved in using healthy coping strategies. For instance, mental health professionals could help alleviate the symptoms of prolonged grief disorder by improving the problem-solving skills of the bereaved, improving their ability to accept their emotions and the situation, and using therapies that aim to reconstruct their thought patterns.

Nonetheless, generalizability of these findings might be limited due to the nature of the non-probability sampling methods used, which may have resulted in an under-representation of some coping strategies. In addition, the participants were primarily female and young adults, which could have affected the results. Despite its limitations, this study still contributes to the existing knowledge that bereaved Filipinos during the COVID-19 pandemic had high psychological well-being due to the coping strategies they used, and not because of a lack of complicated grief symptoms. Thus, this study highlights the importance of coping strategies as effective interventions for bereaved Filipinos to enhance their psychological well-being during their grieving periods. Future researchers are encouraged to increase the sample size or replicate the study with different respondents and additional variables in different locations or environments. To increase quality and reliability, they could employ a mixed-methods strategy. In addition, an interview approach should be included in the instrument.

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