

Lived Experiences of Parents with Prolonged Grief Disorder After Losing Their Child in Accidental Death

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Abstract

The qualitative research explored the lived experiences of parents with prolonged grief disorder who lost their child in an accidental death. This study helps us to understand the intense suffering experienced by parents following the death of a child in an accident, particularly in Pakistani society, where grief is commonly kept a secret. It demonstrates why parents who experience chronic grief require greater understanding and care. Through the purposive sampling technique, a sample of 5 participants was selected from hospitals in Rawalpindi and Islamabad. Participants were selected from two hospital settings: three from NIRM Hospital and two from Benazir Bhutto Hospital. Of these, three had been previously diagnosed by clinical psychologists, while the remaining two were assessed and diagnosed during my internship under the supervision of a clinical psychologist. Semi-structured, face-to-face in-depth interviews were conducted with research participants. The data were analyzed using interpretative phenomenological approaches. Four major superordinate themes were developed: Psychological and emotional distress, disturbed daily life functioning, spiritual challenges, and help-seeking behaviour. The results of this study can be utilized by mental health practitioners, grief counsellors, and legislators to develop more effective and better support systems for parents experiencing prolonged grief disorder.

Keywords: Prolonged Grief Disorder (PGD), Accidental Death, Interpretative Phenomenological Analysis (IPA), lived experiences.

Introduction

Prolonged grief disorder is defined as emotional numbness, facing difficulties comprehending the loss, continuous and extensive longing for the dead, and obsession with the death, disruption in daily functioning, that persists for more than a year after the death, according to the American Psychiatric Association (2022). Its intensity, length, and impact on functioning differ from those of normative mourning. PGD has been formally included in DSM-5 TR and ICD-11, highlighting its clinical significance and setting it apart from other types of depressive disorders or complicated bereavement (WHO, 2019). The experience of grief is an emotion that people go through when they lose someone or something significant to them (Enez, 2017). Every culture has its own unique perspective on it, and it can have a profound impact on various aspects of a person's life. Initially, it may feel excruciating, accompanied by profound sadness and a strong desire to retrieve the person or item that was lost (Lunderoff et al., 2017). Over time, this intense pain typically becomes less severe. Parents who lost their child to unexpected or unnatural causes are at higher risk of getting PGD than those parents who lost their child to natural causes, according to new research by Eisma et al. (2021). According to Dijk et al. (2025), parents who have lost a child in a traffic accident are more prone to mental health issues such as prolonged grief disorder. Duncan et al. (2015) conducted a study on parents who

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accidentally lose a child and experience feelings of regret and self-blame. These emotions typically peak shortly after the loss, although they tend to fade over time. According to Berrozpe et al. (2024), the loss might cause social disengagement and disrupt interpersonal interactions, particularly marital dynamics. According to Omerov et al. (2013), following an unintentional child loss, sorrow may show up somatically. 11 parents frequently report immune system, hunger, and sleep issues. Villazor et al. (2022) investigated that the accidental death of a child leads to intense grief, physical strain, and mental disparity in the parents. A systematic review by Polita et al. (2020) found out after losing a child, bereaved parents often have difficulties in their connections with others. Disagreements, stress, and bereavement can weaken spousal bonds, and ignoring surviving children might endanger family dynamics.

Cunningham et al. (2025) found that when people encounter opposing ideas or feelings, cognitive dissonance occurs. This contrast is especially noticeable when parents are grieving. Kim et al. (2015) found that parents lost hope and had no purpose in life after the tragic death of their child. Berrozpe et al. (2024) found that a child's unexpected loss causes intense, prolonged sadness that may continue for years. Feelings of loneliness result from the surrounding social environment's incomplete understanding of this sadness. According to research (Field et al., 2014), PGD is quite prevalent among parents who have an unexpected child loss, with rates ranging from 47.5% to 94%. However, the majority of medical instruments ignore the more profound mental, spiritual, and social aspects of grieving in favor of symptom-focused approaches.

Theoretical Framework

Five Stages of Grief by Kubler-Ross

The five stages of grief, which describe the various emotions that people may experience after losing a loved one, were outlined by Kubler-Ross in 1969. The phases are denial, anger, bargaining, depression, and acceptance (Vedadi et al., 2014). "Denial" can make individuals feel stunned and not think the loss is genuine. They feel angry or agitated and blame others or themselves while they are in "anger". "If only I had done something differently," people thought in "bargaining", expecting to alter the circumstances. People in "depression" feel incredibly depressed and hopeless. In "acceptance", people finally come to terms with the loss and make an effort to move on, even if they may still experience depression. Each person experiences grief uniquely, and these phases do not necessarily occur in that sequence.

Conceptual Framework

This study investigates the lived experiences of parents with Prolonged Grief Disorder (PGD). Who loses a child to an unintentional death? It is highly distressing to lose a child in an unexpected accident, and it can result in more intense and complex grieving. Essential components of the framework include the events surrounding the tragic event, the parents' grieving process, coping mechanisms (such as religious or familial support), and their attempts to make meaning of the loss. It also examines how societal and cultural factors influence their grief process. The study is guided by this conceptual framework, which emphasizes the associations between the unexpected loss, prolonged grief, emotional effect, coping, and meaning-making. Examining all aspects of grieving parents is helpful, with a concentration on how their daily lives are affected by the loss, as well as their inner emotions. This framework helps direct the research by outlining topics to include in the interviews and provides a guide to understanding the parents' perspectives.

Rationale of the Study

Existing literature predominantly focuses on diagnosis, symptoms, treatment, and prevalence, with limited attention given to subjective or lived experiences of parents with prolonged grief

disorder (Lunderoff et al., 2017; Boelen & Lenferink, 2020). Most existing studies are conducted in the Western context, with limited focus on Pakistani Socio-Cultural dynamics. Most of the research focuses on parents who lose children due to chronic disease (Smith et al., 2020). This research aims to close that gap. It will look at the lived experiences of parents who had PGD after losing a child. Using a qualitative approach, the study will examine how parents perceive their loss, how their sorrow evolves, and what coping mechanisms they employ.

Objectives

1. To explore the lived experiences of parents with Prolonged Grief Disorder (PGD) after losing their child in accidental death.
2. To explore the coping strategies adopted by bereaved parents with PGD in response to the child's accidental death.

Research Questions

1. How do parents with prolonged grief disorder experience and make meaning of the accidental death of their child?
2. What coping strategies do these parents adopt to deal with their prolonged grief after their child's accidental death?

Methodology

Research Design

To investigate the subjective experiences of parents who lost their child unexpectedly and have prolonged grief disorder, the interpretative phenomenological approach was employed in this study. According to Gagura (2024), this approach pays close attention to people's words and emotional expressions to gain a deeper insight and a more meaningful understanding of their experiences. To gain a deeper understanding of individual thoughts and patterns, semi-structured interviews are employed.

Participants

A total of five participants were selected, which included three mothers and two fathers, using a purposive sampling technique. Three participants were recruited from NIRM Hospital in Islamabad, and two were chosen from Benazir Bhutto Hospital in Rawalpindi. Among the five participants, three had already been diagnosed by licensed clinical psychologists before the study. The remaining two participants were assessed and formally diagnosed during my internship period, which was conducted under the supervision of an experienced clinical psychologist to maintain diagnostic accuracy and reliability. Recruitment was carried out in collaboration with clinical staff at both hospitals, with participants identified through hospital records or during the internship assessment process. Ethical considerations, including informed consent, were strictly followed throughout the recruitment and diagnostic procedures, thereby ensuring the inclusion of both previously diagnosed and newly assessed individuals within the sample. The sample included both mother and father who have been diagnosed with Prolonged Grief Disorder after losing a child. Parents who do not meet the criteria for prolonged grief disorder and who lost a child due to natural causes were excluded. The demographic characteristic of the participants is given below:

Table 1: Demographic Characteristics of the Participants

P. No	Age	Gender	Socio-economic Status	Ethnicity	Residence	Noof Children	Years Since the Incident Occured
P1	45	Female	Middle Class	Punjabi	Rwp	3	1.6
P2	49	Female	Middle Class	Pathan	Rwp	4	2
P3	45	Male	Upper-Middle Class	Punjabi	Isl	2	1
P4	39	Male	Middle Class	Punjabi	Isl	5	3
P5	35	Female	Upper-Middle Class	Pathan	Isl	2	1.8

Note: P. No: Participant number, Rwp: Rawalpindi, Isl: Islamabad

Interview Guide

A structured interviewed approach was used to collect the lived experiences of parents with prolonged grief disorder after losing their child in accidental death. This approach allowed for extensive, in-depth responses while guaranteeing consistency. Semi-structured interviews, where the interviewer and respondent collaborate to gain a shared knowledge and viewpoint (Kakilla, 2021). An interview protocol with ten core questions was developed, covering participant experiences, initial grieving, parent-child relationship, personal memories, disruption in daily functioning, changes in social and spiritual relationships, future outlook, and self-perception. The interview guide was created in Urdu, the participants' native tongue, to facilitate communication and make them feel at ease.

Procedure

Participants were gathered from Rawalpindi and Islamabad once the interview methodology was developed. Only those who willingly consented to participate in the study were included. A demographic sheet and informed consent form were given to each participant, and it was made clear that the interviews would be audio recorded. Interviews were carried out from about 60 to 120 minutes. Participants were told that they might leave the research at any time and without giving a reason. Privacy and confidentiality were rigorously upheld to guarantee ethical norms. To ensure the comfort and privacy of participants, interviews were held in private settings. For further examinations, the interviews were transcribed and translated from native language into English. Personal and non-verbal cues were also recorded throughout data collection, and data were anonymised at the transcribing stage.

Interpretative Phenomenological Analysis (IPA)

Interview data was analyzed using Interpretative Phenomenological Analysis (IPA) to understand the meanings and emotions of each participant. Three key concepts form the basis of Interpretative Phenomenological Analysis (IPA). According to Smith et al. (2022), phenomenology is the study of how individuals perceive and react to life experiences. Analyzing others' words to determine their meaning is the goal of hermeneutics. The process of paying close attention to each individual's story rather than drawing broad generalizations about an extensive group is idiography. All five stages of IPA were used to understand how individuals perceived their own experience: familiarization, first noting, generating themes, connecting themes, and moving to the next case.

Results

Table 2: List of Super-ordinate, Sub-ordinate Themes and Emergent Themes of All Participants

Superordinate Themes	Subordinate Themes	Emergent Themes
Psychological and Emotional Distress	- Initial Response	-Disbelief and Shock
		-Difficulty in comprehending what happened
	-Emotional Response	-Intense Sadness and Hopelessness
		-Guilt and Helplessness
	-Physical Response	-Feelings of numbness, constant headaches, loss of appetite, and disturbed sleep
Disturbed Daily Life Functioning	-Social Response	- Social Isolation and Loneliness
	-Parents day to day life changed	-Struggled with everyday task and concentration difficulties
	-Decline in Familial Role	-Try to run away from responsibilities
Spiritual Challenges	-Spiritual Isolation	-Withdrawal from spiritual practices
	-Spiritual Questioning	-Feelings of injustice from Allah
Help Seeking Behaviour	-Support from Psychologist	-Gained emotional strength after the therapy
	-Support from Islamic Scholar	-Acceptance of Allah plans

Interview transcripts were closely examined to identify recurring themes and concepts based on respondents' statements and beliefs. Many of them made identical statements, despite their responses varying slightly. Using a unique technique known as Interpretative Phenomenological Analysis (Smith et al., 2022), four superordinates were identified. The superordinate themes included: Psychological and emotional distress, disturbed daily life functioning, spiritual challenges, and help-seeking behaviour and meaning-making.

Psychological and Emotional Distress

The emotional and psychological suffering of parents after their child's death is explained in this theme. Most participants reported difficulty in comprehending the situation. Confusion, frustration, and guilt were prevalent emotions that made managing things more challenging. Some of the participants reported that they experienced a range of emotions, from shock to intense grief and sadness. Most participants reported being unable to stop crying. Most of the participants experienced loss of social connections, social isolation, and loneliness.

One of the participants reported feelings of intense sadness, self-blame, guilt, and hopelessness:

My daughter's voice is always ringing in my ears, as if she is still calling out to me. Every time I think I could have tried to do something to save her, I blame myself. Since that day, life has become meaningless, and I have yet to experience what happiness is. I would cry like a child, because I cannot forget her. She is a piece of my heart. That day was the worst day for me. [P5]

Another participant shared her emotional distress, feelings of remorse, triggering memories, and hopelessness:

It all seemed like a nightmare. I was crying, screaming, and I could not understand anything. I am responsible for using the faulty cylinder. I

should have done another thorough inspection. I cannot forgive myself for failing to protect her – the bath towel she used that morning is still hanging, and her little slippers are still by the bathroom – I lost interest in life after my daughter passed away when I woke up. Every day I feel empty and useless. [P2]

One participant shared that his physical health deteriorated after her son's death:

I cannot sleep at night thinking about my son, I do not feel like talking, my brain does not work right - I feel like I cannot move because I feel my body is stuck. I feel like something heavy is pushing on me, and my chest feels tight. I feel like I am holding on to it and cannot let go. I am exhausted. [P3]

Another participant reported his disturbed social life, loneliness, and loss of social ties:

"I have locked myself in the house, I do not see anyone anymore, and I feel lonely even in social situations. Now, I prefer to be alone. Talking to others seems burdensome. I feel more at ease when I am alone. I stay away from people. Social activities no longer capture my attention." [P4]

One participant shared her experience of denial, "I still wait for him to get home. Perhaps there is a misunderstanding; he is alive and somewhere. My heart will not believe he is really dead." [P1]

Disturbed Daily Life Functioning

Parents talked about how their daily lives got difficult after losing their child. Most of the participants reported that they felt emotionally numb and that their capacity to handle daily tasks had decreased. Some participants reported that basic tasks, such as running the home or caring for other children, were too overwhelming and were frequently neglected. Some of the participants reported that they were unable to concentrate on their jobs or everyday responsibilities after the loss of their child. They were feeling exhausted and did not want to do anything. One of the participants reported a decline in familial and occupational roles:

I am broken after the death of my daughter and do not feel like doing anything. I no longer feel like doing the work that used to bring me joy. I have left all my work. I have sat within the four walls of a house. I am running away from my responsibilities - I am always taking bribes from the office. My work schedule has deteriorated. I am not able to do the daily tasks now. [P3]

Another participant reported that she struggled with everyday tasks and concentration difficulties, "I cannot concentrate at work. It has become difficult for me to perform my daily duties because I frequently forget things. I also have trouble sleeping." [P1]

One participant reported a decline in familiar and occupational roles:

I am having trouble focusing on my work. Everything seems meaningless, and I have no desire to achieve anything. I sit around, not even listening to my kids like I used to. I do not spend as much time with them as I used to. Everything is still going on at home, but I am just depressed. I used to love my job, but I no longer do. I keep thinking, but I am unable to motivate myself to take action. Now that everything has changed, I am not even sure what to think about myself. = [P4]

One of the participants reported that she lost interest in her household chores, felt exhausted:

Ever since my daughter left me, I have not felt like doing anything. I have household responsibilities, but I struggle to handle them. I am unable to care for my other children. I do not feel like getting out of bed in the

morning. I have given up on everything. A strange atmosphere has developed at home. [P1]

Spiritual Challenges

Participants' religious faith and beliefs after child loss are discussed in this theme. Some parents reported feeling disconnected from their beliefs and stopped praying. Some participants reported that they continued to ask questions to Allah because they were unable to figure out why this had happened. They questioned why, because they had done nothing wrong. It was difficult for many to accept, and they thought it was unfair.

One of the participants reported spiritual decline and internal struggle over Allah's justice and humanity, "my faith in Allah was gone. I lacked the confidence to stand up during prayer. Why didn't he save her, I wondered, if he is merciful? My devotion to Allah was gone as I became confused and distressed." [P3]

Another participant reported spiritual isolation from Allah, "I lost interest in prayer, and my relationship with Allah deteriorated. I kept asking why, but I did not get any answers." [P5]

Another participant reported that her spiritual decline and questioned Allah about the injustice to her:

"Why did you take my child?" is a question I kept asking Allah after losing my child in a car accident. I used to have complete faith in Islam, but now I have some reservations. I feel as if my prayers have been in vain, and I do not understand anything anymore. "- I can no longer find peace in my worship that used to keep me engaged- My heart feels so empty that I do not feel the need to ask Allah for anything anymore." [P1]

Another participant stated that she started to doubt Allah's decisions, "I repeatedly asked God what I had done to deserve this. Why would he do this to my daughter? My feelings for religion were cold. When I prayed, I felt nothing." [P2]

Help Seeking Behaviour

Some of the participants reported that they sought help from a mental health professional because they were unable to cope with their suffering on their own. They needed a sympathetic ear and support. Speaking with the expert helped them feel better. Most participants seek consultation and direction from Islamic scholars. Their faith grew stronger as a result of the Islamic scholar.

One of the participants reported fear of stigmatization and emotional strength after therapy:

In our culture, seeking mental health treatment is sometimes seen as a sign of weakness or madness. I finally committed to going to therapy sessions, even though the pain had become unbearable. At first, it was strange and uncomfortable, but I started to feel lighter. After talking about it, I will not claim that everything is fine today, but those sessions gave me the courage to deal with my suffering, at least getting some help does not indicate that you are trying to survive." [P4]

Another participant expressed her emotional battle with her scar and sought therapy for support: "A psychologist helped me make sense of my loss. I started praying again and slept better. However, every time I look at her clothes, I still cry. The pain is still there, although it is less intense today." [P2]

Another participant shared his positive experience with an Islamic scholar:

The scholar, after patiently listening to my suffering, gave me some advice. He told me that everything that happens in this world is the will of Allah. He made it clear that we should bear these difficulties and sufferings with patience because they are tests from Allah. I gradually understood that no

matter how difficult the situations are, I should maintain my patience and have faith in Allah's wisdom. [P3]

Discussion

The current study was carried out in order to investigate the subjective experiences of parents who suffered from Prolonged Grief Disorder (PGD) after their child died accidentally. The following four superordinate themes emerged after analysis: psychological and emotional distress, disturbed daily life functioning, spiritual challenges, and help-seeking behavior and meaning-making.

Psychological and emotional distress emerged as a superordinate theme where participants reported initial response, emotional response, physical response, and social response. These findings were supported by a recent review by Zhang et al. (2024), who found that parents experience a severe emotional shock when their child passes away unexpectedly. Participants frequently expressed feelings of regret, guilt, and self-blame. These results were aligned with those of Das et al. (2021), who found similar experiences of frequently blaming themselves or medical personnel for not preventing the death. Internalized guilt like this exacerbates emotional pain and impedes psychological healing. Parents' physical health has deteriorated after their child's death. Most participants complained about sleep issues, appetite issues, weakness, headaches, and fatigue. A recent study by Lancel et al. (2020) found that a significant number of bereaved people experience sleep disruptions, and the severity of their sorrow is strongly correlated with sleep issues. Parents are deeply affected by the unexpected death of a child, which frequently results in social isolation, loneliness, loss of social ties, and unsupportive family members. These findings were supported by Liu et al. (2023), who found that many Chinese parents purposely cut themselves off from social networks after losing their only child. These findings were supported by attachment theory (Bowlby, 1982), which explains that parents develop a strong emotional bond with their children, essential to their emotional health and sense of security. When a child dies unexpectedly, this primary attachment breaks down, leading to severe emotional suffering and sadness. This loss affects the parents' emotions, physical well-being, and social interactions.

Disturbed daily life functioning emerged as a superordinate theme where participants reported their everyday lives had significantly changed. Many of them were lost and disturbed. Basic household chores, such as cooking and cleaning, were extremely challenging. These findings were supported by Wang et al. (2018), who found that these parents' everyday functioning and general quality of life were negatively impacted after child loss. Another review of Berrozpe, Cantero-García, and Caro-Cañizares (2024) also supported these findings, which discovered that bereaved parents frequently had a diminished familial role, evidenced by their withdrawal from everyday duties, difficulty making routine and family decisions, and incapacity to concentrate on caregiving duties. These findings were supported by Kubler-Ross' theory (1969), which explains that parents experience phases such as depression and denial after child loss. They avoid tasks while they are in denial, and they struggle to concentrate or complete everyday chores when they are depressed. This demonstrates how grief impacts their day-to-day functioning and focus.

Spiritual challenges emerged as a superordinate theme where participants reported spiritual isolation and spiritual questioning. Parents reported faith issues and wondered why God took their child away after losing a child. Their faith seems weakened and shattered as a result. These findings were supported by Aydin et al. (2025), who discovered that there is a decline in religious participation, expressing sentiments of rage and doubting religion after child loss. These findings were supported by existential theory (Frankl, 2006), which posits that human beings require a sense of purpose in life, especially under challenging conditions. Parents feel lost and start to doubt their values after losing a child. They feel isolated in their beliefs and

experience spiritual suffering as a result. After such a loss, this theory helps explain why parents feel this way.

Help-seeking behaviour emerged as a superordinate theme, where participants reported seeking help from psychologists and Islamic scholars. Many parents first felt quite conflicted and hesitant about seeking professional help. Jordan and Litz supported these findings. (2014), who found that when parents do attend therapy, they frequently say that the first few sessions are tough. Due to mistrust, embarrassment, or reluctance to express deep sadness, they often keep their personal experiences to themselves. Parents found peace after advice from the religious scholar. These findings were supported by Biancalani et al. (2022), who revealed that faith helped many people cope with their losses and served as a protective factor. These findings were supported by the Biopsychosocial-spiritual model (Sulmasy, 2002), which explains that one's physical, mental, social, and spiritual needs are key components of recovery. Parents often consult psychologists for emotional and mental support after losing a child, while also seeking comfort and spiritual direction from Islamic scholars.

Conclusion

Parents with prolonged grief disorder endure years of emotional pain, self-uncertainty, and emotional numbness. There is not much in-depth qualitative study that examines the real-life experiences of these parents, particularly in Pakistani society, where there is still a lack of conversation about grieving and mental health. Therefore, the purpose of the current study was to investigate the subjective experiences of parents with Prolonged Grief Disorder following the unintentional loss of their child. The study concludes by highlighting severe and continuous emotional suffering experienced by parents after the accidental death of a child. It highlights the significance of grief-sensitive therapies that address identity loss, loneliness, and the desire for meaning-making following a terrible loss, in addition to emotional distress. The study makes a significant contribution to the field of psychology by revealing these lived experiences. It encourages further research into how society can better support individuals who are suffering from such loss.

Implications

The current study has significant implications for public health policy, social assistance, mental health, and general awareness about parents who suffer from Prolonged Grief Disorder (PGD) following the sudden death of their child. Improving therapeutic strategies for parents with PGD will be significantly helped by this study. This will assist mental health practitioners in creating more focused and efficient therapy programs that take into consideration the prolonged nature of PGD and the tragedy of an unintentional death. The study's results will inform the development of community resources, support groups, and peer counseling programs that provide ongoing emotional and practical support. By encouraging legislators to acknowledge and respond to the unique needs of parents with PGD, this research will promote advancements in public health policy. By increasing knowledge about PGD, this research will support government programs and public health campaigns by lowering stigma and motivating bereaved parents to get treatment as soon as possible.

Limitations and Suggestions

The sample size in this study is smaller, which limits the generalizability and the diversity of experiences of parents on this phenomenon. Future researchers are encouraged to increase their sample size to enhance the accuracy of the results. More areas could be assessed to provide richer information regarding parents' experiences with the accidental death of their child, as the current study sample was exclusively drawn from Islamabad and Rawalpindi. Focusing on both parents limits insights into gender differences in grief; it is recommended that future researchers

study only one parent to examine the gender differences in grieving. It is recommended that future studies also incorporate mixed-methods research, which can validate the findings and generalize them to a larger population.

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