

## Assessing Socio-Cultural and Religious Norms Associated with Sexual Bereavement Following a Child's Loss Among Couples or Parents

Asanda Zembe<sup>1</sup>, Simon Murote Kang'ethe<sup>2</sup>

### Abstract

*The article aimed to discuss socio-cultural and religious norms associated with sexual bereavement following a child's loss among couples or parents in the Didi Location of the Eastern Cape. The article investigated 12 samples using a qualitative approach, a descriptive and explorative research design, and phenomenology as a specific research study. Stroebe and Schut's dual process model gave the article a theoretical framework. Findings established that mourning the death of a child fulfilled socio-cultural and religious roles; religious rituals offer hope to address sexual bereavement, and religion was not a foolproof solution to sexual bereavement. The article recommends that the Department of Health deploys and stations registered counselors, social workers, and psychologists in the communities to advocate for and assist communities undergoing trauma and bereavement and to ensure that these bereavement psychological services are within reach of the communities. The article is essential to widen the horizon of literature to future researchers in the domain of sexual bereavement.*

**Keywords:** *Socio-Cultural Norms, Religious Norms, Grief, Sexual Bereavement, Mourning.*

### Introduction

Unequivocally, different cultures have specific rituals and customs for mourning, which can provide structure and support for grieving parents. In some cultures, community gatherings, prayers, and rituals help parents cope with the loss (Baloyi & Makobe-Rabothata, 2014). Moreover, Asante (2016) argued that in certain cultures, discussing the death of a child might be considered taboo, leading to isolation for grieving parents. They may be expected to return to everyday life quickly without openly expressing their grief.

According to Ikechukwu (2019), cultural norms regarding gender roles can influence how parents grieve. In some cultures, men are discouraged from expressing emotions, leading them to grieve in private or through different means, while women may be more openly emotional. Religious beliefs often provide a framework for understanding and coping with the death of a child. Moreover, parents may find solace in believing their child is in a better place or will be reunited in the afterlife (Walsh et al., 2014).

Ital (2016) postulated that religious rituals, such as funerals, prayers, and memorial services, can be critical in helping parents process their grief. Asante (2016) alluded that these practices can also provide a sense of community and support from fellow believers. Moreover, the death of a child can lead to a crisis of faith, where parents question their religious beliefs and the existence of a benevolent higher power. Alternatively, some parents may find their faith strengthened as they seek comfort and meaning in their religion.

Makgahlela et al. (2021) believe that couples may grieve differently based on their cultural and religious backgrounds. Some couples might find solace in each other, while others may struggle with feelings of blame, guilt, or differing coping mechanisms. Tlou (2013) articulated that cultural and religious expectations may influence how openly couples communicate about their loss. If one partner adheres more strictly to cultural or religious norms that discourage open expression of grief, this can lead to misunderstandings and emotional distance. The role of extended family and community, influenced by cultural and religious contexts, can either support or strain the couple's relationship (Baloyi & Makobe-Rabothata, 2014). For

---

<sup>1</sup> Department of Psychology, Walter Sisulu University, South Africa, Email address: [asandazembe@gmail.com](mailto:asandazembe@gmail.com), ORCID ID: 0000-0002-9424-5927.

<sup>2</sup> Department of Social Work, Walter Sisulu University, South Africa, Email address: [skangethe@wsu.ac.za](mailto:skangethe@wsu.ac.za)/[smkangethe1962@gmail.com](mailto:smkangethe1962@gmail.com), ORCID ID: 0000-0001-9150-0235

example, some cultures emphasize the involvement of extended family in grieving, which can be a source of comfort or stress, depending on the dynamics.

According to Asante (2016), the death of a child can profoundly impact parents' identities and a sense of purpose. In some cultures, the loss may challenge their roles as parents, especially in societies where having children is central to social status or family continuity. The couple's relationship with their community may be affected, depending on how the community views child death. In some cultures, parents might be viewed with sympathy and receive strong support, while in others, they might face stigma or be treated differently (Ikechukwu, 2019).

### *Problem Statement*

Losing a child often subjects couples or parents to stigma and silence. Baloyi (2020) noted that in some cultures, discussing the death of a child is considered taboo, leading grieving parents or couples to mourn in isolation. There is also an expectation for them to return to normalcy quickly. Additionally, cultural norms around gender roles can shape how parents grieve. In some cultures, men are discouraged from expressing emotions, causing them to grieve privately or through alternative means, while women may express their grief more openly. The death of a child can also trigger a crisis of faith, with parents questioning their religious beliefs and the existence of a benevolent higher power. Walsh et al. (2014) argued that cultural and religious expectations can affect how openly couples communicate about their loss. If one partner strictly adheres to norms that discourage open expression of grief, this can lead to misunderstandings and emotional distance. Ikechukwu (2019) highlighted that the death of a child can profoundly affect parents' identities and a sense of purpose. In some cultures, this loss may challenge their roles as parents, particularly in societies where having children is integral to social status or family continuity. This paper hopes that discussing socio-cultural and religious norms accompanying the loss of a child will raise findings that will be useful in developing interventions to address sexual bereavement among parents who lose their child.

### *Theoretical Framework*

#### *Stroeb And Schut's Dual Process Model*

This theory stemmed from the view that health bereavement means being involved in a dynamic oscillation between loss-oriented and restoration-oriented coping (Stroeb & Schut, 1999). This is relevant and applicable to the study as it unpacks the processes and views of how people grieve.

This model is pertinent to the current study as it discusses bereavement and ways to deal with it. Apparently, in the process of bereavement, parents may grieve in a conflictual path, potentially leading to a lack of intimacy. However, as Stroeb and Schut stressed the importance of confrontation through constant grief processing, there is a likelihood that in the process, the good might transpire such that the couple sticks together intimately.

The Xhosa Tribe's social expectations are that a man should not cry and must always be a pillar of hope and courage. Stroeb and Schut (1999) believe that these models pathologize one's willingness to avoid and suppress memories and other aspects of grief processing. Their idea is to support those who grieve differently. They also carry the idea that grief should not be pathologized but should be facilitated to allow coming to normalcy faster.

According to Stroeb and Schut (1999), these other models rigorously cater to Western cultures and not Afrocentric ones. They, therefore, promote Afrocentrism by acknowledging the way Africans grieve, as exemplified by AmaXhosa. The Southern African AmaXhosa women are expected to display their grief emotionally. At the same time, men are taught to be strong, resilient, and free of crying, no matter how painful the situation is. This makes it difficult for men to cause turbulence in a relationship as the man's emotional and psychological well-being is not considered. Women are allowed to express their feelings and

receive comfort from men. This proves that men are given less freedom to grieve. This connotes a gender divide in mourning and grieving.

## Study Aim and Objectives

This study sought to determine the socio-cultural and religious norms associated with sexual bereavement following a child's loss among couples or parents in the Didi location.

## Research Methodology

### *Research Approach and Design*

This study employed a qualitative research approach to directly capture and establish diverse perspectives, experiences, and views on socio-cultural and religious norms associated with sexual bereavement following a child's death among couples or parents. This approach also allowed the researcher to identify the attitudes, emotions, and experiences embedded in the studied phenomenon. The research utilized an exploratory and descriptive design. As noted by Akhtar (2016), this design helped gain insights into the phenomenon. It provided an initial understanding of the socio-cultural and religious impacts associated with sexual bereavement in this context. Following Kumar's (2014) guidelines, the study offered a detailed description of sexual bereavement and its related socio-cultural and religious impacts. On the other hand, the study adopted a case study design as only a few samples were investigated for their insights and not a generalization.

### *Research Domain and Justification of Choice*

The study occurred at the Didi location under Winnie Madikizela Mandela municipality, Alfred Nzo District municipality in the Eastern Cape, South Africa. The phenomenon of sexual bereavement among couples or parents following a child's death is considered socially and religiously relevant in this area; hence, the researcher found this area a perfect geographical area to conduct the study to explore the socio-cultural and religious norms associated with sexual bereavement following a child's loss among couples or parents.

### *Study Population and Sample Size*

The target population is the group from which the sample is drawn. It comprises individuals with all the characteristics the researcher is interested in investigating (George, 2022). This study's population included women and men aged 27 and older residing in Ward 13 of the Didi location of Alfred Nzo District Area, South Africa, with 12 samples selected for the study.

### *Sampling Methods and Techniques*

Contacting and reviewing the entire population is almost impossible due to time and budget constraints. In the current study, a non-probability sampling method was used. According to McMillan and Schumacher (2014), non-probability sampling is a method of selecting units from a population using a subjective method.

Furthermore, a snowball sampling technique was used to select participants, which allowed for participants' referrals. Babbie & Mouton (2014) define snowball sampling as a sampling method where participants introduce the researcher to other potential participants possessing the necessary characteristics of the study population.

### *Methods Of Data Collection*

The study involved in-depth interviews to explore participants' experiences and emotions regarding socio-cultural and religious norms associated with sexual bereavement following a child's loss among couples or parents. Moreover, the current study employed semi-structured interviews, allowing the researcher to probe

further where necessary. On the contrary, structured interviews were inappropriate for this study as they would have constrained the research's viability and reliability by asking questions not in the interview sheet (George, 2022).

#### *Data Collection Process*

The current study used a cross-sectional study. For Black (2017), cross-sectional studies are observational studies that simultaneously analyze data from the population. The researcher personally visited potential participants at home to explain the study, recruit them, and schedule interviews at convenient times. A snowball sampling method was used, where initial participants referred others for interviews.

Each session lasted 30-40 minutes, with the researcher facilitating and steering the conversations. The aim was to understand the lived experiences of the couples or parents. Throughout the interviews, the researcher avoided questions the participants would deem insensitive.

#### *Data Analysis*

The researcher employed a thematic content analysis, defined by Creswell (2014) as a series of techniques for analyzing textual data to uncover and describe themes. This approach involves a systematic coding process, exploring meanings and offering a depiction of social reality through the emergence of themes. The identified themes offered detailed insights into the socio-cultural and religious norms associated with sexual bereavement following a child's loss among couples or parents.

#### *Key Findings*

This section presents the results related to the perceptions, experiences, and attitudes of 12 study participants who were interviewed. The first section of the findings presented the demographic characteristics of the research participants. The second part of this section presented the emergence of the themes.

**Table 1: Demographic Information of the Participants**

<b>Pseudonyms</b>	<b>Age</b>	<b>Gender</b>	<b>Race</b>	<b>Educational status</b>	<b>Employment status</b>
Participant 1	40	M	Black	Degree	Employed
Participant 2	27	M	Black	Grade 12	Employed
Participant 3	33	F	Coloured	Grade 12	Employed
Participant 4	35	F	Black	Degree	Employed
Participant 5	28	F	Coloured	Grade 6	Unemployed
Participant 6	60	F	Black	Grade 1	Unemployed
Participant 7	30	F	Black	Grade 12	Self-employed
Participant 8	39	F	Black	Degree	Employed
Participant 9	40	M	Black	Diploma	Employed
Participant 10	42	F	Coloured	Grade 12	Self-employed
Participant 11	46	M	Coloured	Grade 7	Unemployed
Participant 12	52	M	Black	Grade 8	Unemployed

#### *Age Range*

The interviewed couples had ages ranging from 27 to 60. These participants were considered mature and relevant in providing information about sexual bereavement following a child's demise. This supports the likelihood that the goal of the study, which investigated the psychological effects associated with sexual

bereavement among couples who lost a child through death, was achieved. The thorough assessment of this group enhances the study's reliability and trustworthiness.

### *Gender*

Study findings revealed that most stakeholders were female, with 5 males and 7 females participating. Regarding the key informants, findings revealed that there were more men than women, with the community headman being female and the pastor and the community leader being male. This portrays a relatively balanced equation of gender representation of the participants.

### *Race*

On race, most key participants were black Xhosa speakers and coloured people. Nonetheless, the residents of the Didi location are predominately black, which reflects the apartheid-era demographic segregation that forced black people to live in remote locations like townships and rural areas. Unequivocally, the death of a loved one, grief, and mourning are universal phenomena and attract sociocultural and religious interpretations. So, the researcher included a diverse ethnic grouping to reflect a balanced racial diversity in the study area.

### *Educational Qualification*

The participants' educational backgrounds ranged from grade 1 to holding a bachelor's degree. However, more than half of the study participants had educational levels between grades 6-12, suggesting they could understand the questions well and offer relevant responses. Moreover, it was notable that fewer participants faced the challenge of reading and answering some questions, and the researcher assisted them in understanding.

### *Employment Status*

The findings of this study indicated that 6 participants were employed, 4 were unemployed, and 2 were self-employed. While 50% of the participants were employed and two were self-employed, it was an intense socio-economic relief, and it was concerning that the four who were unemployed might be living in abject poverty.

### *Marital Status*

Most participants were married women and a few single women whose partners were working outside the town. This marital status did not reflect the South African marriage nomenclature, where more than 50% of the population is single.

### *Socio-Economic Status*

The results show that couples did not rely heavily on social grants, as six (6) were employed, and two (2) were self-employed. This means they possibly had modest socio-economic positions that could influence an understanding of sociocultural and religious dimensions of sexual bereavement when the death of a child occurs.

**Table 2: The Emergent Themes**

No.	Themes
1	The mourning of a dead child fulfilled a socio-cultural and religious role.

2	Religious rituals offer hope to address sexual bereavement.
3	Religion was not a foolproof solution to sexual bereavement.

### *Mourning A Dead Child Fulfilled a Socio-Cultural and Religious Role*

The findings of this study revealed that mourning the death of a child is important to satisfy sociocultural and religious imperatives. This process was both socio-culturally and religiously fulfilling.

The following sentiments attest to the finding above:

“Xa ubhujelwe ngumntana noba lilungu le family kuyazilwa, okokuqala kuzilwa egumbini eronteni or loo ndlu isetyenziswa likhaya for ukuzile kuzothi xasele kungcwatywe kufakwe inzila sifake ifipeleti or amaqhoshha ukubonisa ukuzila kubekhona umcimbi wokuhlamba amapiki emvakoko kubekhona utshiso lwamalaphu sivale ngokukhulula izila”

“When a child or any family member passes away, we mourn through sitting by the wall in a specially designated room for grieving. Afterward, we perform a ceremony to cleanse the tools used in the burial. We then have a ritual where we remove and burn the clothes and buttons worn as a sign of mourning”.

#### **Participant 7**

“Ngokwesiko xa kuthe kwaswelekwa kwelokhaya kunezigaba ezihanjwa ukubonisa ukuzila ikanti amaxesha amaninzi xakuthe zangenziwa ezozinto ibifanele ukuba ziyenziwa ibakhona ingxaki ngebhadi ke aziveli ngendlela enye zivela ngendlela ezininzi kumntu ngamnye kwifemeli nganye”.

“In our culture, when someone dies, certain stages or rituals and rites must be addressed as a form of mourning. Unfortunately, when these rituals and rites are not performed, different consequences happen at different times to different people”. **Participant 2**

**Participant 9:** “kunezigaba ezithathwayo amva kokuba ubhejelwe kwaye zonke ezazigaba zibalulekile kuba azincedisani nani nisaphilayo ngokwenyama nalo ungasekhoyo ngokwenyama ziyamncedisa uba aphumle ngokuthola noxolo kwindlu yakhe yokugqibela uba nomphefumlo wakhe usesimeni esilungileyo”

“After losing someone, including your child, there are phases that one must go through, and these phases are of great importance because they help not only the earthly living but also the earthly departed to rest in peace and safeguard the living against evil”. **(Participant 9)**

### *Religious Rituals Offer Hope To Address Sexual Bereavement*

The study findings reflected that engaging in religious rituals was a solution to heal from their socio-psychological and emotional upheavals resulting from the death of a couple’s child/children. However, findings noted the complications of couples adhering to a different faith system.

The following verbatim sentiments find support from the following sentiments:

“Another element that separated me and my partner was that we aligned ourselves with different higher beings, meaning that we subscribe to different sociocultural and religious meanings of grief and mourning. He wanted us to be intimate for a few weeks after our child's death, but that did not resonate with our beliefs and feelings at that moment. So, we had some conflicts about it because I followed my religion and reasoned differently from him. I was not ready for intimacy yet. **Participant 8**

“My husband believes in traditional religion, so after our child passed away, I needed him in every area, including intimacy, but he did not give me that part, which I did not understand at first. I was angry that he could get it somewhere else, so we stayed about 3 months without intimacy”. **Participant 10**

“It took me over six months to heal and feel motivated. For a couple of months before that, I had always felt like it was cynical to be intimate, so I was uninterested in intimacy. My husband did not understand because he is not particularly religious. We argued about it, but eventually, he understood until I was ready to start again. I am all thankful for my pastor, who prayed for me and encouraged me to be patient, and for God being with me and my husband while we grieved the loss of our baby daughter. **Participant 11**

“Emvakuka nyanga ntantu nokhululo zila ngokwesintu sakuthi suba senigqibile ukuzila njenge ndoda noko ndasele ndinazo iinkanuko zasekamereni nomfaz wam kodwa kwakungenzeki wayedikwa okanye mna ndingabinamdla ndabikela umkhuluwa wam ngalento saya emntwini kwathiwa masihlambe ikhaya neziqu zethu kuba kunesimnyama esikhona ekhayeni.”

“After the ritual of cleansing the tools that were used to dig the grave, and the removal of the navy clothes that we wear when we mourn our earthly departed loved one, I thought it was time for us to resume our sexual life, but things did not go as I hoped. It was either she got annoyed, or I had lost interest. Upon sharing the experience with my older brother, he took me to a traditional healer who suggested a need to conduct a home and self-cleansing ritual because there was a dark spirit in our home”. **Participant 12**

The verbatim sentiments constitute an understanding of how people in the Didi location resort to consulting their deities during grief and bereavement. They also highlight the importance of the rituals and rites in addressing the aftermath of the death of their child and, consequently, sexual bereavement.

#### *Religion Is Not A Full-Proof Solution To Sexual Bereavement*

The findings of this study revealed that while engagement and retrenchment in religion were crucial for handling the socio-psychological and emotional state of losing a child, they were not full-proof solutions to sexual bereavement as the thoughts and flashbacks of the dead child keep on intruding the minds of the couples or parents.

The following sentiments attest to the finding:

“Our church helped us a lot, and we managed to cope with the loss of our child. However, there were days when I felt like I was back to the time I first received the news of our child’s death. I would then fail to entertain any matter about intimacy with my partner. I would feel exasperated, and sometimes we would fight because I would become so moody.” **Participant 11**

“I do not think church or any intervention I have tried would ever make me whole again. I am still mad at God. Sometimes, He does not listen to my prayers. No ritual or church session can close the hole in my heart; I feel like God has abandoned me altogether. I am single because I cannot handle any woman as before”. **Participant 9**

“Icawe inayo indawo eyidlalayo ukubonakalisa ukuba awuwedwanga kodwa kunezinto oye ungakwazi ukuzithetha kunzima ukuzithetha ekugqibele uye ungazithethi uphawule ukuba kona ziyakutya ngaphakathi kube kungekho mntu uzomxelela kuba zindaba zakwakho ezinzulu kwaye ukuthula kukukhusela isidima sakwakho kuba abantu bangakuhleka kwangazo” (**Participant 9**).

“The church played a major role in showing moral support for me so that I would not feel alone amid the quagmire. However, there are things that one cannot share with church members because they are strictly private. So, I felt the need to keep them because I wanted to protect the dignity of my family and home”. **Participant 12**

The above discussion suggests caution regarding the couple's reliance on religious intervention to address the aftermath of losing one's child. It implies the need to look for various interventions to address the quagmire, including the potential use of clinical intervention.

### *Discussion of the Findings*

The profiles of the participants in Table 1 revealed that most of the study's participants' ages oscillated from age 27 to 60, while the key informants' ages ranged from 48 to 70. This connotes that the participants were all adults and reliable enough to make feasible and sober decisions. This mirrors the contention by Hugar et al. (2017), who argue that Piaget concluded in his theory of cognitive development stages, asserts that humans gain their whole reasoning capacity when they are 12 years and older. Thus, it is reasonable to assume that the age of the study participants was reliable enough to make sound and sober decisions about socio-cultural and religious norms associated with sexual bereavement following a child's loss among couples or parents.

The study findings revealed that female participants outnumbered their male counterparts. Generally, women are more likely to imprint their emotions and feelings and use talking to release pent-up emotions than their male counterparts. This is mirrored in the study by Foley (2015), where it is postulated that women are more open to speaking about their feelings, while men may use specific defense mechanisms such as intimacy and substance use. This creates an environment where there is no harmony between the couple, and that gives rise to sexual bereavement.

The findings from Table 1 show that many participants are educated, ranging from grade 1 to grade 8, as well as grade 12, with diplomas and degree qualifications. According to Nomngcoyiya (2015), participants' educational backgrounds enabled them to provide considered responses. Due to the above sentiment, it is only fair to conclude that participants provided solid answers on socio-cultural and religious norms associated with sexual bereavement following a child's loss among couples.

The findings of this study revealed that fewer female participants were unemployed, with some employed and fewer self-employed. In contrast, male participants had a higher employment rate, with only two unemployed. According to the World Bank (2023), the unemployment rate stood at 32.4% in 2023, with women and youth persistently more impacted. This is also supported by Cotterill (2022), who argues that inequality is among the most corrupting factors most developing countries face.

The study underscored the importance of mourning the death of a child to fulfil socio-cultural and religious imperatives, which provide satisfying experiences in both aspects. A study on help-seeking behaviour among Malay people revealed a tendency to consult religious healers for treatment instead of medical doctors, believing that illnesses are influenced by spiritual imperatives (Haque, 2005). Similarly, it is acknowledged that many Africans adhere to multiple religions, making census data on religious affiliation potentially inaccurate. There is considerable evidence of conflicts between Christian and traditional religions in Africa, particularly concerning mourning practices. This conflict may stem from the belief that religious rules must be followed to ensure a prosperous afterlife (Oka et al., 2017).

Tlou (2013) posited that, from a cultural and traditional African perspective, the living and the dead are inseparable, with the deceased exerting significant influence over the living. Failure to perform the necessary rituals and rites can result in negative consequences. For Baloyi and Makobe-Rabothata (2014), this belief will likely motivate participants to adhere to their socio-cultural practices and honour God.

The study findings revealed that engaging in religious rituals helps address the socio-psychological and emotional turmoil caused by the death of a couple's child. These rituals provide a structured means of coping, offering solace and community support. However, complications arise when couples adhere to different faith systems, creating additional emotional strain and conflict during the grieving process (Foster, 2015).

King (2013) describes death as a transition to the spiritual realm, where the spirit continues to exist among ancestors and provides comfort and continuity for the bereaved. Makgahlela (2021) shared the same sentiment, posting that religious rituals are integral to communal identity and moral guidance, helping individuals navigate grief and seek spiritual healing. For study participants, religion served as a crucial coping mechanism, aiding in their recovery from sexual bereavement.

Religious rituals can effectively heal, address emotional pain, reinforce identity, and provide community support (Schaefer, 2020). However, the study highlights the challenges faced by interfaith couples, underscoring the importance of communication and mutual respect to navigate their differences (Ikechukwu, 2019). Integrating religious rituals into the grieving process offers a powerful means to address the psychological impacts of child loss while supporting couples with diverse spiritual backgrounds (Oka et al., 2017).

The study found that although engagement in religion was crucial for handling the socio-psychological and emotional state of losing a child, it was not a foolproof solution as thoughts and flashbacks of the dead child kept on creeping into the minds of the couples. According to Walsh et al. (2014), people reported that no religious belief or thought had resolved their grief and bereavement after the death of their loved one. Baloyi (2020) posited similar sentiments that African churches and theologians, especially among Christians, still struggle to respond biblically and appropriately to the issue of ancestral customs.

Unequivocally, we cannot ignore that both psychology and spirituality are subjective and deal with human interiority, making it difficult to distinguish between them. Ital (2016) argued that the difference between psychology and spirituality can be difficult to recognize at first glance, as both concern human interiority, its contents, and dynamics. To this end, Walsh et al. (2014) argue that this analysis suggests that the strength of beliefs influences the course of grief, regardless of psychological state. However, those influences do not serve as an absolute success.

#### *Conclusion And Way Forward*

The researcher calls upon government departments and NGOs concerned with handling death-related clinical challenges to consider holding campaigns that will unpack the relationship between sociocultural and religious norms and sexual bereavement. Moreover, this researcher supports clinical, religious, and cultural interventions to assist those undergoing various kinds of bereavement, such as sexual bereavement. It would be imperative that the governments and other organisations assisting those undergoing bereavement deploy more registered counsellors, psychologists, and social workers to advance educational campaigns about how sociocultural and religious norms can address sexual bereavement and its concomitant clinical quagmire that bedevil it.

The researcher recommends that the government deploy more psychological practitioners, such as psychologists and social workers, to educate communities about mental illnesses that arise when one has lost a loved one. Also, this could be done in collaboration with church and community members who are more knowledgeable about handling the bereaved. This psychoeducation might cultivate more information about the challenges that are attached to losing a loved one and possibly eradicate all the stigma and confusion associated with bereavement, with sexual bereavement serving as an example.

#### *Acknowledgements*

The authors would like to bestow sincere gratitude to the almighty God for safeguarding them through the entire execution of this study. Moreover, the authors would also to thank National Research Foundation (NRF) for funding this study.

#### *Competing Interests*

The authors declare that they have no conflict of interest.

*Authors' Contributions*

A.Z. conceived the original idea of this study as he established the topic and the whole idea around this study. S.M.K, approved of the idea that the former author brought forward. The former author practically wrote the whole study while supervised by the latter author (S.M.K).

*Data Availability*

Data sharing is not applicable to this article, no new data were created or analysed in this article.

*Disclaimer*

The assertions and opinions expressed in this article are those of authors and are the outcomes of the professional research. The article does not necessarily mirror the official policy or position of any affiliated institution, funder, agency or that of a publisher. Authors are responsible for this articles' results, findings, and content.

*Ethical And Legal Requirements*

The researcher obtained an ethical clearance (Reference number: REC/4(XXVII)/2024) to collect data in the Didi location in Bizana and was familiar with the institution's ethics policy. The researcher established a good rapport with the older individuals, who signed a consent form, signaling their readiness to participate in the study. Interviews were conducted in warm weather for the participants' comfort, and their identities were protected using pseudonyms. No benefits were promised for participation, which was entirely voluntary. Participants were also free to withdraw from the interview if they felt uncomfortable. Moreover, the researcher promised the study participants that they would not disclose the information shared. The researcher respected the interests and integrity of the participants. Further, the participants were also promised their participation would not be disclosed.

**Funding Information**

The National Research Foundation (NRF) supported the work under grant number PMDS230609115251. No other grants were received from any funding agency in the public, commercial or not-for-profit sectors.

**References**

- Akhtar, D. M. I. (2016). Research design. [Online] Available: <https://ssrn.com/2862445>. [Accessed 18/09 2021].
- Asante, M. and Mazama, A. (Eds.). (2016). SAGE Publications, Inc, Retrieved from <https://doi.org/10.4135/97814129964623>.
- Babbie, E & Mouton, J. (2014), *The Practice of Social Research*. Cape Town: Oxford University Press Southern Africa.
- Baloyi, L., & Makobe-Rabothata, M. (2014). The African conception of death: A cultural implication. In L. T. B. Jackson, D. Meiring, F. J. R. Van de Vijver, E. S. Idemoudia, & W.
- Baloyi, M. E. (2020). Black self-hatred: Regaining self-worth—From decolonization towards reconciliation in South Africa—A practical theological appraisal. *Theologia Viatorum* 44: a33. Gabrenya, K. (Eds.). *Toward sustainable development through nurturing diversity: Proceedings from the 21st International Congress of the International Association for Cross-Cultural Psychology*. Retrieved from <https://doi.org/10.4087/FRDW2511>.
- Black, W. (2017). *The handbook of stress and Health: A guide to research and practice*. United Kingdom: West Sussex
- Creswell, J. W. (2014). *Research design: Qualitative and mixed methods approach*. 4th ed. Los Angeles: Sage Publications.
- Foster, T., Roth M, Contreras, R., Gilmer, M., Gordon, J (2015). Continuing bonds reported by bereaved individuals in Ecuador. *Bereavement Care* 31 (3) 120–128
- George, T. (2022). *Semi-structured Interviews: definitions, guide & examples*. Scribbr publishers. Retrieved from <https://www.scribbr.com/methodology/semi-structured-interviews>.
- Haque, A. (2005). Mental health in Malaysia: An overview. In Z. A. Ansari, N. M. Noor, & A. Haque (Eds.), *Contemporary issues in Malaysian psychology*. Singapore, Singapore: Thomson Learning.
- Ikechukwu, P. O. (2019, February 25). "The Essence of African Traditional Religion": *Church Life Journal*. Retrieved from <https://churchlifejournal.nd.edu/articles/the-essence-of-african-traditionalreligion/#:~:text=A%20part%20of%20this%20belief,directly%20involved%20in%20human%20affairs>.

- Ital, I. (2016, December 22). "Psychology and Spirituality: BFF or Rivals." Understanding how is both psychology and spirituality needed to live fully. Retrieved from <https://www.psychologytoday.com/za/blog/mindfulness-wellbeing/201612/psychology-and-spirituality-bffs-or-rivals>
- Kumar, R. (2014). *Research methodology: A step by step for beginners*. 4th ed. Los Angeles: Sage Publications.
- Kurotori, I. & Kato, S. (2015). A Clinical Case of Grief Hallucination through the Mourning Working Normal Grief and Spiritual Care. *Seishin Shinkeigaku Zasshi* 117(8): 601-6. Japanese, PMID: 26642726. Retrieved from <https://pubmed.ncbi.nlm.nih.gov/26642726/#:~:text=Auditory%20or%20visual%20hallucinations%20of,of%20persistent%20complex%20bereavement%20disorder.>
- McMillan, J.H. & Schumacher, S. (2014). *Research in education: Evidence-based-inquiry*. New York: Pearson.
- Makgahlela, M., Sodi, T., Nkoana, S., & Mokwena, J. (2021). Bereavement rituals and their related Psychosocial function in a northern Sotho community of South Africa. *Death stud.* 45:91-100. Doi 10.1080/07481187.2019.1616852
- Oka, T., Hussin, N. A. M., & Hagström, A. S. (2017). The diversity of indigenous wisdom on grief: Exploring social work approaches to bereavement. Paper presented at the IAFOR International Conference on the Social Sciences, Honolulu, HI, USA. Retrieved from <https://papers.iafor.org/submission33556>
- Schaefer, M.R., Wagoner, S.T., Young, M.E., Madan-Swain, A., Barnett, M & Gray, W.N. (2020). Healing the hearts of bereaved parents: impact of legacy artwork on grief in pediatric oncology.
- Stroeb, M., & Schut, H. (1999). Culture and grief. *Bereavement care*, 17(1), 7-11.
- Tlou, E. R. (2013). A South African perspective on culturally congruent mental health services. *Journal of Black Psychology*, 39, 272-275
- Walsh, K., King, M., Jones, L., Tookman, A., Blizard, R. (2014). Spiritual beliefs may affect outcome of bereavement: prospective study. *BMJ*, 324(7353):1551. doi: 10.1136/bmj.324.7353.1551.