

BEREAVEMENT: Evidence of the impact of losing a child on parents' mortality risk

Losing a child vastly increases the chances of premature death for both mothers and fathers, but the former recover quicker after suffering more immediately. That is one of the findings of research by **Bernard Schmidpeter**, to be presented at the annual congress of the European Economic Association in Mannheim in August 2015.

Analysing data from the Austrian Social Security Database, his study finds that losing a child can increase mortality risks by 78% for mothers and 69% for fathers. Bereaved fathers are less affected in the first six years after losing a child, but have a higher long-term risk of dying prematurely afterwards, whereas mothers suffer more immediately but recover relatively quicker. This gender divide could be because mothers might look to friends or relative for support, but fathers might try to cope with the stress by themselves or rely on their (also grieving) spouse.

The research also finds that bereaved parents tend to retire earlier due to health problems and take more sick days off work. But they do not become more likely to work less or leave their job. The author concludes:

'My findings highlight the importance of providing continuous support for bereaved parents and not only concentrating on the short-term symptoms of grief. Despite being conventionally perceived as being more resistant to stress, fathers are especially in need of long-term care'.

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Loss of a child is one of the most traumatic events in any parent's life. But to date, very little research has sought to capture systematically the consequences of such grief for parents and shed some light as to how society and public policy can help support individuals in coping with such events.

Bernhard Schmidpeter's novel research does exactly that. Using data from the Austrian Social Security Database, he finds that the loss of a child is associated with increased mortality and long-term stress for parents. At its height, bereavement is associated with an increase in the mortality risk by 78% for mothers and 69% for fathers. Interestingly, his study finds that bereaved fathers are at a higher long-term risk of premature death than mothers – and that the main reason through which bereavement is affecting mortality is circulatory diseases such as myocardial infarction.

His analysis reveals that fathers seem not to be affected during the first six years after the child loss, but they experience a large fall in their survival probability afterwards. They have on average a 2.7% lower probability of surviving more than 13 years after the bereavement compared with non-bereaved fathers. In contrast, mothers suffer immediately but recover relatively quickly from the shock.

Looking in greater detail at possible causes that might drive the bereavement effect and the difference by gender, Mr. Schmidpeter finds that bereaved parents tend to retire earlier due to health impairments and take more sick days off work. But there is no evidence that bereaved parents tend to work less or are more likely to be unemployed.

Interestingly, he does not observe a lot of discrepancies in labour market outcomes between the genders.

Mr. Schmidpeter hypothesises that one explanation for his findings might be gender specific strategies to cope with the stress. Mothers might look for comfort in relatives or friends that give them support during this hard time. In contrast, fathers might try to cope with the stress by themselves or rely on their spouse, who is not able to give any support in this situation either.

The analysis highlights the importance of providing continuous support for bereaved parents and not only concentrate on the short-term symptoms of grief. Mr Schmidpeter's results show that fathers especially are in need of long-term care. These are novel and surprising findings as males are in general regarded as more stress resilient than females. But his research shows that this perception is not true.

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The Fatal Consequences of Grief

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