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Family Composition and Outcomes Following Parental Bereavement in Childhood

by

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Honors Thesis

Submitted to

Department of Psychology

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Abstract

The primary aim of this study is to compare the grief and stress related growth of individuals who have siblings and those who do not have siblings in the context of parental loss that occurred during childhood (before the age of 16). Adult participants provided self-report for the Traumatic Grief Inventory, Stress Related Growth Scale, and other related measures. We hypothesized only children who were bereaved during childhood would report higher levels of grief and lower levels of stress related growth compared to those with siblings who were bereaved during childhood. Multivariate analyses focus on grief and stress related growth as primary dependent variables. Predictors in a multiple regression model include sibling status (only child vs. siblings), social-economic status, and current social support.

Loss of a parent during childhood is not only a disruptive event, but can have far-reaching, life-long mental and physiological consequences. Health consequences of childhood bereavement include clinical levels of internalizing and/or externalizing disorder (10-21%) (Worden, 1996). Why might this be? Thompson et al. (1998) found that parental death led to an increase in stressors, which in turn led to increased child distress and ultimately raised the risk of internalizing distress. Additionally, previous research has demonstrated that death of a parent differs from parental divorce. As stated by Mack (2001), “adults who experienced parental divorce report lower levels of parent-child relationship quality, higher levels of self-confidence, and lower levels of depression than adults who experienced parental death during childhood” What might the reason for this difference be? Early research indicates that this might be due to changes in caregiving associated with the loss of a co-parent, or in some cases both parents, rather than direct grief outcomes (Harris, et al., 1986). Alternatively, lack of financial support could be a factor. Jacobs and Bovasso (2009) found the childhood death of the father as a predictor of a child’s adult psychopathology, with no increased risk following the death of the mother. The implications of bereavement do not stop with mental health, as early parental loss is also associated with a global health decline and several chronic and acute conditions in adulthood (Krause, 1998).

However, further research shows a silver lining. That is, mental illness affects adults who lost one or both parents only in cases of low quality family relationships. (Luecken, 2000) Thus, social support may be capable of repairing the damage done by experiencing parental death. According to Mireault and Bond (1992), social support can “help to decrease anxiety and depression among adults who have lost a parent in childhood.” More specifically, sibling support

has shown to be capable of positively adjusting children in high-conflict homes (Caya & Liem, 1998). This has led to the question of whether or not siblings can significantly improve grief outcomes.

As a first step in this line of research, this author hypothesizes that only-children will report higher levels of grief and lower levels of stress related growth compared to those with siblings.

Methods

Participants

68 participants were recruited via a screener survey posted on the Amazon Mechanical Turk website. Respondents who met the following criteria qualified for a version of the full survey: Located in the United States, over the age of 18, and lost a parent prior to the age of 16. Subjects who indicated on the screener that they had siblings growing up qualified for the sibling group survey (group A, $n = 54$) and those who indicated that they did not have siblings growing up qualified for the only-child group survey (group B, $n = 14$). Subjects were given informed consent prior to the survey and were debriefed following their completion of the survey. Participants were compensated with \$3.00 USD for their time. There are no more than minimal risks to the participant, and no known direct benefits, associated with the protocol. That being said, participants may have benefited indirectly via self report tasks. Pennebaker (1997) found evidence to conclude that when individuals write about emotional experiences, significant physical and mental health improvements follow.

Procedure

The full survey administered to participants can be found in the appendix, and contains the following measures:

Socioeconomic status.

A demographic questionnaire from Griskevicius et al. (2011) was administered, which asked about and served as a measurement of socioeconomic status. 6 self-report items were combined into a continuous variable for use in a multivariate analysis.

Stress-related growth.

The Stress Related Growth Scale - Short-Form from Park et al. (1996) was used as a measure of growth through stressful or traumatic events, which can be described as resilience. 15 self-report items were combined into a continuous variable for use in an independent-samples t-test and a multivariate analysis.

Traumatic grief outcomes.

The Traumatic Grief Inventory from Prigerson et al. (1995) was used as a measure of the degree to which the grief from parental bereavement during childhood remained in adult participants. 19 self-report items were combined into a continuous variable for use in an independent-samples t-test and a multivariate analysis.

Global health.

PROMIS-Global Health from Hays et al. (2009) was administered as a measure of subjects' well being. 10 self-report items were combined into two separate continuous variables for use in a multivariate analysis: global physical health and global mental health.

Current social support.

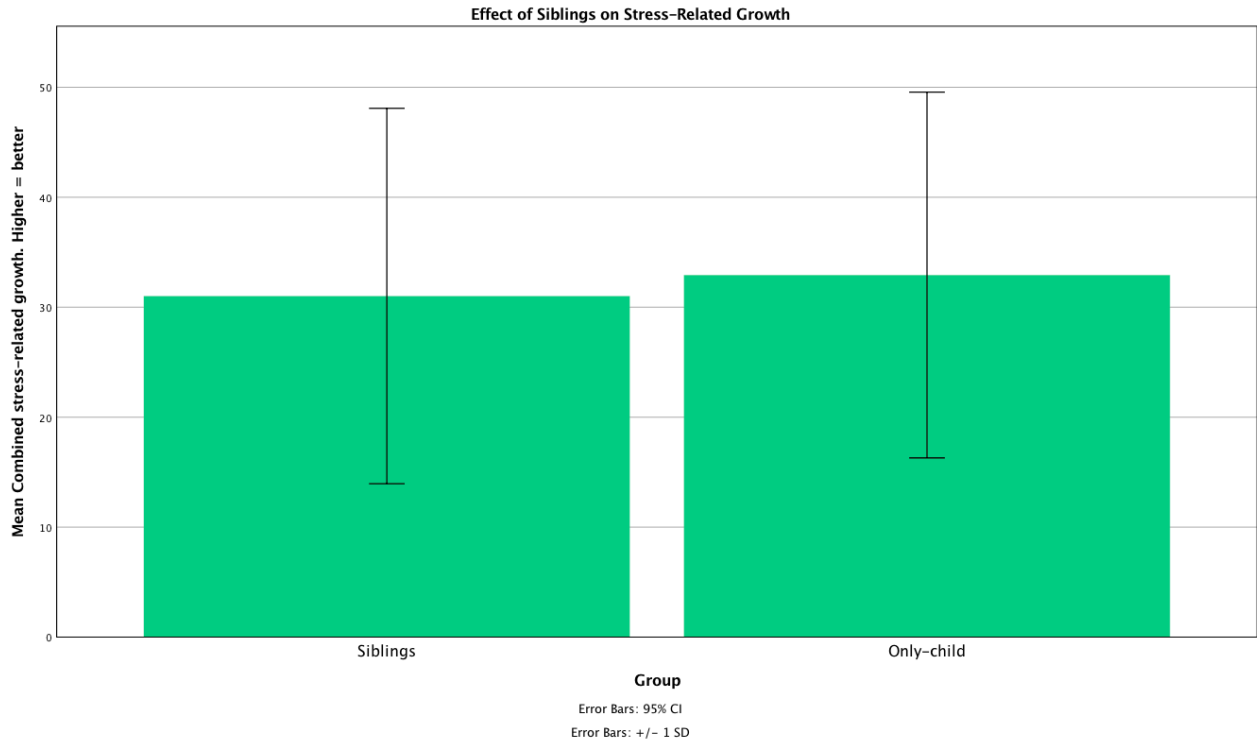
The Interpersonal Support Index from Cohen et al. (1985) was administered as a measurement of participants' general level of current social support as adults. 12 self-report items were combined into three separate continuous variables: appraisal support, belonging support, and tangible support. The three variables were also combined into one continuous variable for use in a multivariate analysis.

Childhood sibling support.

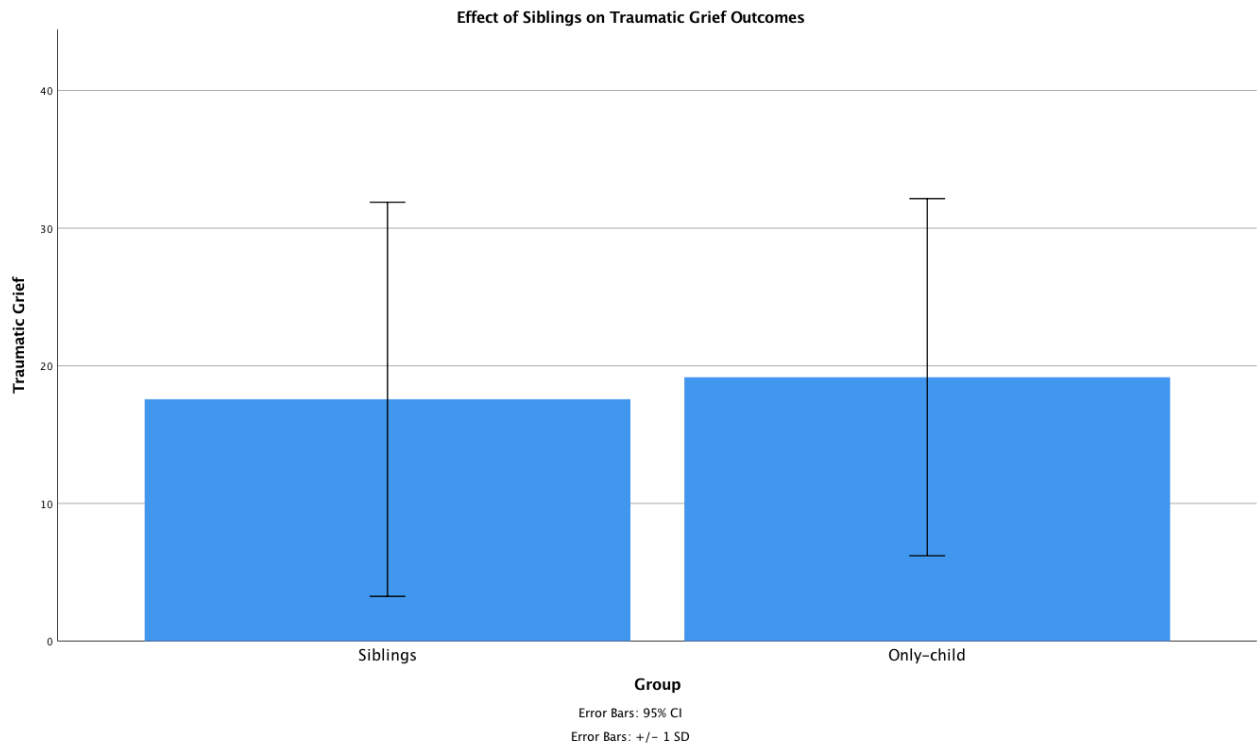
In addition to the ISI, group A was also given the sibling subset of the Social Support Questionnaire for Children from Gordon-Hollingsworth et al. (2017), which they were instructed to self-report retrospectively. This was a measurement of the support participants in this group felt they had from their siblings as children. 18 self-report items were combined into one continuous variable for use in a multivariate analysis.

Results

We hypothesized only-children would report higher levels of grief and lower levels of stress related growth compared to those with siblings, which was first investigated in simple mean comparisons. This hypothesis was not able to be proven, as the results of the independent samples t-tests pre-registered on AsPredicted.org were insignificant (Figure 1, Figure 2).



Figures 1 (top) and 2 (bottom). Bar graphs representing the results of the independent samples t-tests. Differences between means were insignificant, with high standard error. There is no effect between experimental group (sibling v. non-sibling) and stress-related growth or traumatic grief outcomes.



Multivariate analyses were pre-registered to focus on grief and stress related growth as primary dependent variables. Predictors in a multiple regression model include sibling status (only child vs siblings), SES, and current social support. Of these predictors, only social support was proven to be a significant predictor of stress related growth, with a moderate effect size (Table 1).

Model	Unstandardized B	Standard Error	Standardized Coefficient (Beta)	t	Sig.
Constant	9.777	5.314		1.84	0.071
Sibling Status	4.059	2.461	0.193	1.649	0.104
Combined Childhood SES	-0.064	0.205	-0.037	-0.311	0.757
Current Social Support	0.489	0.118	0.503	4.158	0.000*

Table 1. Multiple regression model. Current social support was found to have a significant effect size of 50.3% on stress-related growth ($p < .001$).

In response to this finding, we conducted exploratory analyses. One such analysis was a simple regression model encompassing the siblings group which found sibling support to be a significant predictor of stress related growth, with a small effect size (Table 2).

Model	Unstandardized B	Standard Error	Standardized Coefficient (Beta)	t	Sig.
Constant	25.691	2.192		11.721	0.000
Sibling Support	0.192	0.074	0.345	2.603	0.012*

Table 2. Simple regression model. Sibling support was found to have a significant effect size of 34.5% on stress-related growth ($p = .012$).

Noting the findings from the regression models, we conducted a mediation module to determine whether current social support can be found to mediate the relationship between sibling support and stress related growth, using the Hayes PROCESS macro for SPSS. It was found that social support does indeed mediate the relationship between sibling support in childhood and stress related growth (Figure 3).

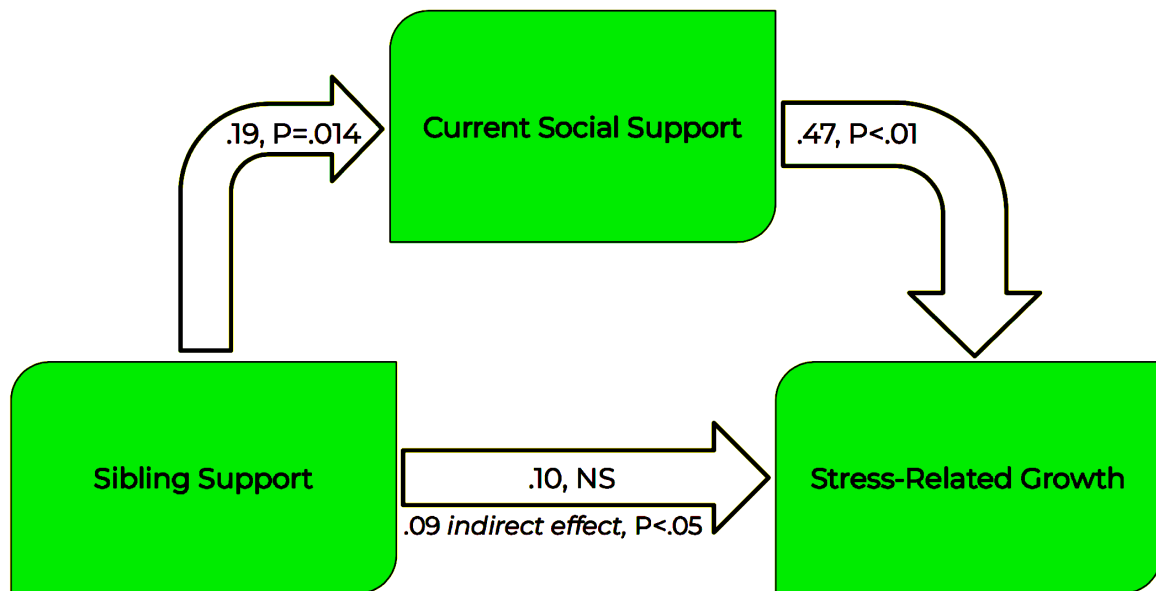


Figure 3. Results from the PROCESS mediation module. Sibling support was found to have a nonsignificant effect of .10 on stress-related growth. However, sibling support has a significant effect of 0.19 on current social support ($p = .014$), and current social support has a significant effect of 0.47 on stress-related growth ($p < .01$). Therefore, sibling support has a significant indirect effect of .09 on stress-related growth ($p < .05$).

Discussion

The results support the finding that sibling support does impact stress-related growth positively following childhood loss of a parent, because social support in general has a positive

relationship with stress-related growth. Contrasting this with Mack's (2001) finding that adults who experienced parental divorce differ significantly from adults who lost a parent during childhood suggests it is loss of the critical social support of a parent that causes lower levels of self-confidence and higher levels of depression. Harris (1986), alternatively, claimed changes in caregiving associated with the loss of a co-parent is to blame. Jacobs and Bovasso's (2009) finding that the childhood death of the father is a predictor of a child's adult psychopathology, with no increased risk following the death of the mother, suggest lack of financial support could be a factor as well. Unexpectedly, the lack of significant association between childhood socioeconomic status and grief outcomes in the current investigation suggest financial problems are not necessarily the cause of adult psychopathology. Yet there are grief outcomes other than mental illness: Krause (1998) found evidence to associate early parental loss with a global health decline as well as several chronic and acute conditions in adulthood. In the current study, no association was found between the independent variables of socioeconomic status, number of siblings, or current social support with global health symptoms.

Worden's (1996) claims regarding parental bereavement in childhood were that clinical levels of internalizing and/or externalizing disorders followed. Thompson et al. (1998) explained this phenomenon by claiming parental death leads to an increase in stressors, which in turn leads to increased child distress, ultimately raising the risk of internalizing distress. However, the results of the current investigation suggest that, in certain conditions, stress can actually lead to higher personal and emotional growth.

Luecken (2000) found mental illness affects adults who lost one or both parents only in cases of low quality family relationships, while Mireault and Bond (1992) discovered social

support can decrease anxiety and depression among adults parentally bereaved in childhood. In the present study, social support was associated with improved stress-related growth outcomes. Caya and Liem's (1998) suggestion that sibling support may be capable of positively adjusting children in high-conflict homes led to the hypothesis that being raised alongside sibling would be linked with better grief outcomes. Indeed, according to the results of the present investigation, sibling support is one example of social support, but support doesn't necessarily have to be from siblings to increase stress-related growth. That said, having siblings may increase the chances of having the necessary amount of social support to provide these benefits in the first place.

Limitations

In the future, we plan to replicate this study with more participants for only children group to confirm or reconsider findings. Part of the lack of significance for main findings may result from small sample size in one group ($n=14$). This sample size was not unexpected: despite the decreasing size of families, it stands to reason there are still more children who have siblings than only children in the United States. The degree to which this was the case was definitely a surprise. If this study is replicated, the method will be such that more resources are devoted to screening only children through Amazon's Mechanical Turk.

Future Directions

Analyzing the factors behind sibling support may be of interest. For instance, demographic factors like number of siblings, age differences or even gender differences could impact the outcome of supportive relationships among siblings. Another question to be asked is, could low-quality sibling relationships be a risk factor for lower stress-related growth? These questions and more look to be promising avenues of future research.

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Appendix

1. Welcome to the study! First, we are interested in whether you actually take the time to read directions. To show that you read the instructions, please ignore the question below about how you are feeling and instead check only the "none of the above" option as your answer. Thank you very much.

Please check all words that describe how you are currently feeling.

- " Hostile (1)
- " Nervous (2)
- " Distressed (3)
- " Proud (4)
- " Attentive (5)
- " Upset (6)
- " Irritable (7)
- " Jittery (8)
- " Strong (9)
- " Alert (10)
- " Active (11)
- " Guilty (12)
- " Ashamed (13)
- " Afraid (14)
- " Scared (15)
- " Inspired (16)
- " Enthusiastic (17)
- Determined (18)
- Excited (19)
- None of the above (20)

2. There are several points in this survey where the directions change. To demonstrate that you have read and comprehended the instructions, please IGNORE the question below, and click the button in the lower right-hand corner to advance to the next screen. Again, please do not respond to the question below.

Strongly agree (1)	Agree (2)	Somewh at agree (3)	Neither agree nor disagree (4)	Somewh at disagree (5)	Disagree (6)	Strongly disagree (7)
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Please
rate the
importan
ce of
spending
time with
friends:
(1)

3. Please indicate how much you agree with the following statements:

Strongly Disagree (1)	Disagree (2)	Somewh at disagree (3)	Neither agree nor disagree (4)	Somewh at agree (5)	Agree (6)	Strongly agree (7)
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My family usually had enough money for things when I was growing up. (1)

I felt relatively wealthy compared to other kids in my school. (2)

Now, I have enough money to buy things I want. (3)

I don't worry too much about paying my bills. (4)

I don't think I'll have to worry about too much in the future. (5)

I grew up
in a
relatively
wealthy
neighbor
hood. (6)

4. What is your yearly household income? If you do not know, please guess.

- Less than \$10,000 (1)
- \$10,000 - \$19,999 (2)
- \$20,000 - \$29,999 (3)
- \$30,000 - \$39,999 (4)
- \$40,000 - \$49,999 (5)
- \$50,000 - \$59,999 (6)
- \$60,000 - \$69,999 (7)
- \$70,000 - \$79,999 (8)
- \$80,000 - \$89,999 (9)
- \$90,000 - \$99,999 (10)
- \$100,000 - \$149,999 (11)
- More than \$150,000 (12)

5. Please indicate the highest level of education that you have attained:

Less than high school (1)	High school graduate (2)	Some college (3)	2 year degree (4)	4 year degree (5)	Professio nal degree (6)	Doctorat e (7)
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You (1)

6. What is your age in years?

7. What is your gender identity?

- Male (1)
- Female (2)
- Other (3)

8. What is your racial/ethnic identity?

- African-American, Black, African, Caribbean (1)
 - Asian-American, Asian, Pacific Islander (2)
 - European-American, Anglo, Caucasian (3)
 - Hispanic-American, Latino, Chicano (4)
 - Native American, American Indian (5)
 - Bi-Racial, Multiracial (please specify) (6)
-

9. Please select the options that best describes your family at the time your parent died. Please check all that apply.*

- One younger sibling (1)
- One older sibling (2)
- Multiple younger siblings (3)
- Multiple older siblings (4)

10. How many siblings did you have living in the household when your parent died?*

Please select a number. (1)



11. Please select the age difference between you your sibling(s). Please check all that apply.*

- 0 years (twin) (1)
- 1 year (2)
- 2 years (3)
- 3 years (4)
- 4 years (5)
- 5+ years (6)

12. Please select the gender of your sibling(s). Please check all that apply.*

Male (1)

Female (2)

13. Please indicate the accuracy of these statements, after experiencing the death of a parent.

	Not at all (1)	Somewhat (2)	A great deal (3)
I learned to be nicer to others. (1)			
I feel freer to make my own decisions. (2)			
I learned that I have something of value to teach others about life. (3)			
I learned to be myself and not try to be what others want me to be. (4)			
I learned to work through problems and not just give up. (5)			
I learned to find more meaning in life. (6)			
I learned how to reach out and help others. (7)			
I learned to be a more confident person. (8)			
I learned to listen more carefully when others talk to me. (9)			
I learned to be open to new information and ideas. (10)			
I learned to communicate more honestly with others. (11)			
I learned that I want to have some impact on the world. (12)			
I learned that it's OK to ask others for help. (13)			

I learned to stand up
for my personal
rights. (14)

I learned that there
are more people who
care about me than I
thought. (15)

14. Please rate the accuracy of the following statements.

	Excellent (1)	Very Good (2)	Good (3)	Fair (4)	Poor (5)
In general, would you say your health is: (1)					
In general, would you say your quality of life is: (2)					
In general, how would you rate your physical health? (3)					
In general, how would you rate your mental health, including your mood and your ability to think? (4)					
In general, how would you rate your satisfaction with your social activities and relationships ? (5)					

In general, please rate how well you carry out your usual social activities and roles. (This includes activities at home, at work and in your community, and responsibilities as a parent, child, spouse, employee, friend, etc.)
(6)

15. Please rate the following statement.

Completely
(1)

Mostly (2)

Moderately
(3)

A little (4)

Not at all (5)

To what extent are you able to carry out your everyday physical activities such as walking, climbing stairs, carrying groceries, or moving a chair? (1)

16. In the past 7 days...

Always (1) Often (2) Sometimes (3) Rarely (4) Never (5)

How often have you been bothered by emotional problems such as feeling anxious, depressed or irritable? (1)

17. In the past 7 days...

None (1) Mild (2) Moderate (3) Severe (4) Very Severe (5)

How would you rate your fatigue on average? (1)

18. In the past 7 days...

How would you rate your pain on average?
(1)



19. Think back to after your parent died, and please rate the validity of the following statements.*

	Never or rarely true (1)	Sometimes true (2)	Often or very true (3)	Always true (4)
I enjoyed spending time with a sibling. (1)				
I had a sibling who treated me fairly. (2)				
A sibling praised me when I did something well. (3)				
A sibling helped me when I needed it. (4)				
A sibling let me borrow money if I needed it. (5)				
I had a sibling who understood me. (6)				
A sibling encouraged me. (7)				
A sibling comforted me when I was upset. (8)				
I had a sibling I could talk to. (9)				
I had a sibling who supported my decisions. (10)				
A sibling gave me good advice. (11)				
A sibling showed me affection. (12)				

I had a sibling
who cared
about me. (13)

I had a sibling
who bought me
things. (14)

A sibling
accepted me for
who I am. (15)

A sibling helped
me feel good
about myself.
(16)

I had a sibling I
could count on.
(17)

I had a sibling I
could trust to
keep a secret.
(18)

20. Please select the options that best describe how you feel about your deceased parent, where "never" is taken to mean less than once monthly, "rarely" means more than once monthly, but less than once weekly, "sometimes" more than weekly but less than daily, "often" about daily, and "always" means more than once daily.

0: never (1) 1: rarely (2) 2: sometimes (3) 3: often (4) 4: always (5)

I think about
this person
so much that
it's hard for
me to do the
things I
normally do.
(1)

Memories of
the person
who died
upset me. (2)

I cannot
accept the
death of the
person who
died. (3)

I feel myself
longing for
the person
who died. (4)

I feel drawn
to places and
things
associated
with the
person who
died. (5)

I can't help
feeling angry
about his/her
death. (6)

I feel
disbelief over
what
happened.
(7)

I feel stunned
or dazed
over what
happened.
(8)

Ever since s/
he died it is
hard for me
to trust
people. (9)

Ever since s/
he died I feel
like I have
lost the
ability to care
about other
people or I
feel distant
from people I
care about.
(10)

I have pain in
the same
area of my
body or I
have some of
the same
symptoms as
the person
who died.
(11)

I go out of
my way to
avoid
reminders of
the person
who died.
(12)

I feel that life
is empty
without the
person who
died. (13)

I hear the
voice of the
person who
died speak to
me. (14)

I see the
person who
died stand
before me.
(15)

I feel that it is
unfair that I
should live
when this
person died.
(16)

I feel bitter
over this
person's
death. (17)

I feel envious
of others who
have not lost
someone
close. (18)

I feel lonely a
great deal of
the time ever
since s/he
died. (19)

21. This scale is made up of a list of statements each of which may or may not be true about you. For each statement click "definitely true" if you are sure it is true about you and "probably true" if you think it is true but are not absolutely certain. Similarly, you should click "definitely false" if you are sure the statement is false and "probably false" if you think it is false but are not absolutely certain.

Definitely false (1) Probably false (2) Probably true (3) Definitely true (4)

If I wanted to go on a trip for a day (for example, to the country or mountains), I would have a hard time finding someone to go with me. (1)

I feel that there is no one I can share my most private worries and fears with. (2)

If I were sick, I could easily find someone to help me with my daily chores. (3)

There is someone I can turn to for advice about handling problems with my family. (4)

If I decide one afternoon that I would like to go to a movie that evening, I could easily find someone to go with me. (5)

When I need suggestions on how to deal with a personal problem, I know someone I can turn to. (6)

I don't often get invited to do things with others. (7)

If I had to go out of town for a few weeks, it would be difficult to find someone who would look after my house or apartment (the plants, pets, garden, etc.). (8)

If I wanted to have lunch with someone, I could easily find someone to join me. (9)

If I was stranded 10 miles from home, there is someone I could call who could come and get me. (10)

If a family crisis arose, it would be difficult to find someone who could give me good advice about how to handle it. (11)

If I needed some help in moving to a new house or apartment, I would have a hard time finding someone to help me. (12)

*Questions 9, 10, 11, 12, and 19 were only administered to group A.