# The Narrative Arc of Tragic Loss: Grief and the Reconstruction of Meaning

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**Abstract**

In the face of a tragic transition associated with significant loss, our normally implicit ability to make sense of life experiences can be profoundly challenged, precipitating a painfully explicit search for meaning. Here I summarize our long and multifaceted research program on this process, organizing findings into those that bear on the narrative arc of meaning reconstruction in bereavement, beginning with shattering of the survivor's life story, through its restorative retelling, reconstruction and integration. In doing so, I underscore the spiritual as well as secular struggles in meaning-making, the role of sense making and benefit finding in predicting more hopeful outcomes in bereavement, and the prospects for loss to usher in eventual gain in the form of posttraumatic growth.

*To live is to suffer; to survive is to find some meaning in the suffering.*

**--Friedrich Neitzsche**

*There is not one big cosmic meaning for all, there is only the meaning we each give to our life, an individual meaning, an individual plot, like an individual novel, a book for each person.*

**--Anaïs Ni**

## Life and the experience of meaning

With the exception of the occasional existential philosopher or humanistic psychologist, few of us spend much time thinking about issues of "meaning" in the course of daily life. The world, it seems, is always "already there" as phenomenologists have emphasized, and we are "condemned to meaning" simply by dint of living in it (Merleau-Ponty, 1962). But this meaning is of a lived, pre-reflective sort, such that our every bodily sensation, perception, action, word or even silence carries an implicit significance, a "sense" that requires no conscious attention or articulation. Instead, successfully negotiating the patterns and regularities that constitute our everyday existence gives rise simply to a range of positive emotions (McCoy, 1977), which stand in the background of our awareness as a kind of validation of our ability to anticipate and engage the circumstances in which we are immersed. This view of meaning as a tacit ground of sense-making is compatible not only with phenomenological (Merleau-Ponty, 1962) and constructivist (Kelly, 1955; Neimeyer, 2009) perspectives in philosophy and psychology, respectively, but also with the recent experimental work of Laura King and her associates, which demonstrates the strong and likely reciprocal link between positive affect and meaning in life (Hicks & King, 2009).

But there are times when the conscious need to find meaning in experience stubbornly or even agonizingly asserts itself. Deeply unwelcome life transitions, such as experiencing the death of a beloved other, especially under tragic circumstances, are among them. At such moments the taken-for-granted coherence of life is disrupted, and the simplest routines of daily living require painful review and revision, as when we no longer need to wake to nurse a baby that has died of SIDS, or in our widowhood go to bed alone. These and a hundred other violations of the "micro-narratives" of our everyday lives can ultimately vitiate our capacity to make sense of the larger "macro-narrative" of the loss and our existence in its wake, launching a search for meaning that may find few simple answers (Neimeyer, 2004; 2011).

This brief chapter summarizes our research program on grief and the quest for meaning, adopting primarily a clinical rather than philosophic or social psychological approach in view of our active concern with the lives of people who have been challenged and changed by tragic transitions. We recognize—and indeed demonstrate—that many mourners negotiate their losses with surprising resilience, such that even in their bereavement, the meaning of life (and death) remains

secure and unproblematic (Bonanno, 2004; Bonanno, Wortman, & Nesse, 2004). When it does not, however, grief can be complicated by a profound struggle to integrate the loss in both secular and spiritual terms, sometimes to a point that professional assistance is warranted. As a heuristic device for organizing this presentation I will describe the *narrative arc* of tragic loss in such cases, tracing the shattering of life stories through their retelling, reconstruction and integration, without intending to imply any fixed stage-like progression from brokenness to wholeness as one moves forward.

**Shattering the story**

Viewed through a narrative lens, much of what is distinctive about human beings arises from their capacity to "emplot" events in storied terms by attending to not only the "what" of experience (the "plot structure" of occurrences over time), but also the "why" of the events (the theme that underpins them, and gives them meaning and significance). This penchant to organize life as a tellable tale can be observed at every level from the commonplace stories we tell family and friends about the events of our day, to our attempts to piece together with our therapist how we came to be the people we now are, confronting the challenges we now face (Neimeyer & Levitt, 2000). And this same "effort after meaning" is nowhere more evident than when people are rocked by sudden, premature, or traumatic loss, leaving them struggling with a protracted, complicated grief that undermines their ability to "make sense" of what they have suffered. In narrative terms, it is as if the basic storyline of their lives has been invalidated, and with it, the prospect of their hoped-for future.

The struggles that can attend traumatic loss are painfully apparent in our research on African Americans losing a loved one to homicide. Studying a group of 54 survivors on average less than 2 years from the death, we discovered that over half struggled with intensely complicated grief marked by preoccupation with the death, the sense that a part of themselves had died with their loved ones and an inability to function in the spheres of family, work and the social world. Nearly as many suffered clinically significant depression, and almost 20% met criteria for posttraumatic stress disorder, whether or not they were present when their loved one was killed. Importantly, the majority contended with more than one of these syndromes; nearly all of those with PTSD, for example, also tested positive for depression and complicated grief. However, it is worth noting that even in the wake of this horrific loss, a resilient 37% somehow managed to emerge from the experience with none of these diagnoses (McDevitt-Murphy, Neimeyer, Burke, & Williams, 2012).

What role does the search for meaning play in accommodation to such horrific loss? Evidence suggests that the answer is "a great deal." For example, one study of over 1,000 bereaved young adults confirmed the significantly greater complication that followed the shattering impact of violent death (by homicide, suicide or fatal accident) than of natural death losses, even when the latter were sudden and unanticipated. Consistent with the present rationale, however, meaning-making emerged as an explanatory mechanism for the difference in outcome following these forms of loss, as an inability to make sense of the loss functioned as a nearly perfect mediator of this relation (Currier, Holland, & Neimeyer, 2006). Even in the case of the loss of a partner in late life to generally natural causes, an anguished search for meaning that extends 6 months or more into bereavement prospectively predicts exacerbated grief and depression several months or years later (Coleman & Neimeyer, 2010).

In many communities, meaning making in the wake of loss naturally involves recourse to religious and spiritual beliefs that provide a sense of divine purpose or consolation for death of a loved one. This was certainly the case in our sample of African American homicide survivors living in an urban area in the South, who typically turned to God and their fellow church members when faced with adversity. Yet for a substantial subset of these mourners, the murder of their loved one ushered in not only depression, PTSD, and complicated grief, but also *complicated spiritual grief,* understood as an intense form of spiritual struggle or crisis precipitated by the death. Such complications, when they occurred, often suggested a disruption in the mourner's relationship to God, as illustrated by the comments of one 69-year-old woman grieving her grandson's murder: "I felt that God had allowed the capriciousness of life to invade our world. I wondered aloud if our entire family and our belief system were merely a cosmic joke. I questioned why God permitted such a painful and horrendous act when he had the power to stop it." For others, the complication centered on their changed relationship with fellow church members. Another 59-year-old woman spoke of the aftermath of her husband's homicide, saying, "I thought I could rely on my church community, but they grew tired of trying to console me and took advantage of my vulnerability. They said they would be there for me, but I didn't know there would be a time limit." For many survivors, the two forms of struggle were conjoined in a constellation of "negative religious coping" (Koenig, Pargament, & Nielsen, 1998) that compounded the literal loss with a symbolic and social one.

Tracing the adaptation of the African American homicide survivors across 6 months, we discovered that complicated grief at Time 1 prospectively predicted complicated spiritual grief at Time 2, suggesting that the violent sundering of attachment associated with this horrific loss also undermined a sense of meaning and relationship with God and the spiritual community in the months that followed. Interestingly, the reverse was not the case, as spiritual struggle earlier in bereavement did not portend later complicated grief. Nor, to our surprise, was "positive religious coping" in the form of grounding oneself in one's beliefs or turning to God or coreligionists for consolation predictive of better outcomes (Burke, Neimeyer, McDevitt-Murphy, Ippolito, & Roberts, 2011). Further study demonstrated that neither Time 1 depression nor PTSD forecast spiritual struggles at Time 2; instead, intense grief uniquely seemed to provide the instigating context for such crisis (Neimeyer & Burke, 2011).

**Retelling the story**

Adaptive grieving can be understood to involve two forms of narrative processing, centered on the *event story* of the death itself and on the *back story* of the relationship with the loved one (Neimeyer & Sands, 2011). Of course, when the death is relatively coherent with the survivor's assumptive world, little active processing of its meaning may be called for. But when the loss is highly discrepant with the survivor's self-narrative, then considerable meaning reconstruction may be necessary to integrate its reality, reaffirm attachment security with the deceased through reorganization of the continuing bond, and revise projected chapters in one's life story.

In such cases, various forms of *restorative retelling* (Rynearson, 2006) of the narrative of the loss can promote these goals. This can take the form of first establishing sufficient "safety" in the therapeutic relationship to make revisiting the story of the death feasible, and then guiding the client in a "slow motion" replay of the event, typically beginning with when the person first learned of the death, or became aware of the loved one's imminent dying, and continuing through some natural stopping point, such as the end of the first day of bereavement, the funeral or the burial (Neimeyer, 2012a). In the course of the telling, the therapist gently asks for the details often "edited out" of the client's account to others, such as difficult images of the deceased on the hospital bed, the look in the eyes of a close family member or a particularly anguishing phone call or conversation to notify another. Alongside this *external narrative* of the event, the therapist can help the client braid in the *internal narrative* of her or his emotional or bodily reactions at crucial points, as well as the *reflexive narrative* of the meaning she or he had made of the events surrounding the death at the time and subsequently (Neimeyer & Levitt, 2001). Interlacing these three narrative lines over a 15-90 minute retelling as the therapist assists with emotion regulation, the client commonly begins to move beyond avoidance coping, feels "heard" and validated, and makes progress in weaving the story of the death into the larger tapestry of his or her life.

The most important research on this procedure has been published by Shear and her colleagues (2005), who conducted a randomized controlled trial of "complicated grief therapy" (CGT) versus interpersonal therapy (IPT) for a large cohort of clients struggling with life-limiting bereavement. As one of three core interventions, which also included processing the back story of the relationship through memory work and revising future goals, revisiting the story of the death promoted mastery of the difficult experience through prolonged exposure, in a way analogous to treatments for trauma. Results demonstrated that CGT was roughly twice as effective as IPT in producing marked improvement for clients struggling with grief complications (Shear, Frank, Houch, & Reynolds, 2005). A detailed discussion and illustration of this procedure, along with cognitive and constructivist variations, has been provided elsewhere (Shear, Boelen, & Neimeyer, 2011).

**Reconstructing the story**

Whether in the context of formal psychotherapy or simply in the course of living, survivors of losses of many kinds ultimately accommodate the unwelcome transitions introduced by the death of their loved ones (Currier, Neimeyer, & Berman, 2008; Neimeyer & Currier, 2009). Current research from a meaning-based perspective is beginning to illuminate some of the processes by which they may do so. For example, study of bereaved parents demonstrates that the ability to make sense of the loss is a potent predictor of grief symptomatology, accounting for five times the amount of variance in normative grief symptoms (e.g., missing the loved one, crying) and fifteen times the variance in complicated grief responses (e.g., feeling that the future is bleached of purpose, being unable to function in one's work) as other factors, such as the passage of time or whether the death was violent or natural (Keesee, Currier, & Neimeyer, 2008). Closer inspection of narrative responses of parents suggested patterns of meaning making that were especially associated with better outcomes,

including viewing the death as congruent with God's will, endorsing the prospect for reunion in an afterlife, and the belief that the child was no longer suffering. Likewise, better accommodation of the loss was reported by parents who found unsought spiritual benefits in the tragedy, who realigned life priorities or who dedicated themselves to needed lifestyle changes (Lichtenthal, Currier, Neimeyer, & Keesee, 2010). Particular patterns of meaning making triggered by different causes of death (e.g., violent vs. natural) also have been reported (Lichtenthal, Neimeyer, Currier, Roberts, & Jordan, 2013). The salutary effect of sense making is further supported in longitudinal research on older widows and widowers, as those who are better able to find significance in the loss by six months report higher levels of positive emotion and wellbeing as much as 4 years in the future (Coleman & Neimeyer, 2010).

How might this meaning reconstruction be fostered therapeutically? One answer is through the literal use of narrative in the form of directed journaling (Lichtenthal & Neimeyer, 2012), prompting clients to reflect on the significance of the loss in concentrated periods of writing across the course of a week. Comparing instructional sets that emphasized emotional self-expression, sense making and benefit finding along with a control condition of writing about a neutral topic, one randomized controlled study found that the three former conditions produced sustained reductions in complicated grief symptoms across a period of three months, a pattern that was particularly prominent in the benefit finding condition (Lichtenthal & Cruess, 2010). Further variations of writing protocols therefore seem promising as a supplement to professional therapy in helping clients find sustainable meaning in lives changed by loss (Neimeyer, 2012b).

**Integrating the story**

The eventual (and ongoing) integration of the event story of the loss into the larger narrative of the survivor's life holds the prospect of not only surmounting life-vitiating symptomatology, but also setting the stage for posttraumatic growth. To help map this process, Holland and his colleagues (2010) devised and validated the *Integration of Stressful Life Experiences Scale* or ISLES, which measures the extent to which the survivor succeeds or struggles with finding meaning in the wake of difficult transitions, including bereavement. The instrument contains two interpretable subscales, the first focused on the *Comprehensibility* of the event (e.g., I have difficulty integrating this event into my understanding of the world), and the second on the survivor's secure *Footing in the World* in its aftermath (e.g., I haven't been able to put the pieces of my life back together since the event). Completion of the scale by large samples of people losing a loved one or suffering other adversity, demonstrates that greater meaning integration over a period of three months is associated with reduced grief symptomatology in the former, and fewer psychiatric symptoms in the latter (Holland, Currier, Coleman, & Neimeyer, 2010). Recent research on religiously inclined mourners further suggests that meaning integration as measured by the ISLES may mediate the impact of religious coping on grief outcomes, with the former ultimately being the more important factor in accounting for positive adjustment (Lichtenthal, Burke, & Neimeyer, 2011).

Ultimately, as a substantial body of research on life stressors documents (Calhoun & Tedeschi, 2006), many survivors of tragic losses not only grieve but also grow as a result of the experience. Our research on over 600 mourners sustaining a wide variety of losses demonstrates that such positive outcomes are most probable when the bereaved suffer more than little, but less than much complicated grief symptomatology. That is, bereaved persons who report only very limited grief symptoms seem unlikely to revise their life narratives, pursue questions of meaning, or reconstruct their relationships with others, just as those who are overwhelmed with grief may be prevented from doing so. By contrast, those whose distress is significant but not crippling seem prompted to engage in the hard reflective and active work of reviewing and renewing their lives in the wake of loss (Currier, Holland, & Neimeyer, 2012). Further large scale research provides evidence that those mourners who draw on spiritual coping strategies, and who suffer violent death bereavement, are most likely to report growth in compassion, strength, a sense of possibility and appreciation of life in the longer term wake of loss (Currier, Malott, Martinez, Sandy, & Neimeyer, 2012).

## Conclusion

As existential and humanistic thinkers have long recognized, human beings are characterized by an inveterate tendency to seek and find meaning in the patterns of their lives (Wong & Fry, 1998). The present research program extends this recognition to study how this quest for meaning develops—and sometimes fails to develop—in the context of the loss of a loved one to death. Surveying the results of numerous studies of several thousand mourners grieving a wide range of losses, we have been struck both by the resilience with which many people meet this unwelcome but inevitable life

transition and by the pivotal place of meaning making in adaptive grieving. Whether secular or spiritually inclined, contending with natural, anticipated losses or ones occurring under tragic circumstances, inability to find meaning in loss portends greater complication in bereavement, whereas the ability to integrate the experience into one's meaning system is associated with less burdensome outcomes. Ultimately, such integration may also pave the way toward a greater sense of well-being and even growth, understood as a deepened compassion and connection to others who suffer adversity, greater existential depth and wisdom, and keener appreciation for the gift of life. As evidence also builds that meaning making is a process that can be facilitated by appropriate interventions, we are optimistic that a meaning reconstruction perspective can offer something of value to both helping professionals and to the clients they serve.

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