The Meaning of Loss Codebook: Construction of a System for Analyzing Meanings Made in Bereavement

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Recent research on grieving populations has emphasized the role of meaning making in adaptation to bereavement, typically relying on simple self-reports of the extent to which respondents have been able to find sense or benefit in their loss. The present article reports the development of a reliable and comprehensive coding system for analyzing meanings made in the wake of the death of a loved one, yielding a 30-category codebook demonstrating excellent reliability, and comprising both negative and positive themes that arise as grievers attempt to make sense of loss. Based on an intensive qualitative analysis of a diverse sample of 162 adults mourning the natural or violent death of a variety of loved ones, the Meaning of Loss Codebook could prove useful in process-outcome studies of grief therapy, analysis of naturalistic first-person writing about bereavement experiences in grief diaries and blogs, and clinical assessment of meanings made in the course of bereavement support or professional intervention.

The quest for meaning in the life transitions associated with bereavement increasingly has been implicated as a key component of the grief experience by a range of theorists, including those adopting narrative constructivist (Neimeyer & Sands, 2011), cognitive (Boelen, van den Hout, & van den Bout, 2006; Malkinson, 2007), stress-and-coping (Park, 2010; Stoebe & Schut, 2001), and systemic perspectives (Hooghe & Neimeyer, 2012; Walsh & McGoldrick, 2004). In the present article we seek to contribute to this literature by reporting on the development of a psychometrically reliable coding system for analyzing meaning made in response to loss in a manner consistent with each of these theories. First, however, we will situate the project briefly in terms of contemporary understandings of the role of meaning in adaptation to loss, setting the stage for a description of the design of the coding system and a discussion of its applications in bereavement research and practice.

THE MEANING OF MEANING

Generally speaking, research that explores the role of meaning in adaptation to life transitions has distinguished between meaning as a process and meaning as an outcome (Bonanno, Wortman, & Nesse, 2004; Mackinnon et al., 2013; Neimeyer, 2000; Park, 2010; Steger, Frazier, Oishi, & Kaler, 2006; Stroebe & Schut, 1999). As a process, meaning is something one spontaneously encounters, searches for, finds, and/or makes; as an outcome, meaning is something one has encountered, found, and/or constructed. Those scholars who regard meaning as a process differ in terms of whether it is understood to be a central means of adjusting to death-related loss (Davis, Wohl, & Verberg, 2007;

Neimeyer, 2011; Neimeyer & Sands, 2011), or one of many coping processes that potentially could mitigate the distress of bereavement (Bonanno et al., 2004; Stroebe & Schut, 1999; Stroebe & Schut, 2001; Westphal & Bonanno, 2007). Meanwhile, among those scholars who regard meaning as an outcome, some have presented it as an independent variable with a complex relationship to well-being (e.g., Currier, Holland, & Neimeyer, 2006; Keese, Currier, & Neimeyer, 2008; Moore, Norman, Harris, & Makris, 2006), whereas others have presented it as a component of well-being itself (Huta & Ryan, 2010; Steger et al., 2006). Such theoretical distinctions notwithstanding, the broad consensus among scholars in this area supports a distinction between meaning-oriented processes and outcomes (Park, 2010), which we will distinguish here by the terms *meaning making* and *meaning made*, respectively.

Central to a number of influential grief models is the proposition that people use orienting systems that serve as a basis for understanding and reacting to life-events. Variably conceived as personal constructs (Kelly, 1955), world assumptions (Janoff-Bulman, 1989), self narratives (Neimeyer, 2006), goals (King, Hicks, Krull, & Del Gaiso, 2006), beliefs (Boelen et al., 2006), and schemas (Williams, Davis, & Millsap, 2002), these orienting systems have been theorized to guide one's perceptions of the self, the world, and the interactions between the two. Scholars have also addressed the structure of these orienting systems, suggesting a hierarchical arrangement wherein more abstract and general elements or meanings organize more circumscribed and concrete elements (e.g., Singer & Salovey, 1991; Vallacher & Wegner, 1987). For example, the assumption that "the world is a safe place" would be a more general element of an orienting system that might find expression in the more circumscribed element "my husband will take care of my emotional and instrumental needs." In this example, both elements might be referred to as beliefs, meanings, schemas, or assumptions. Together with other elements of a general orienting system, these hypothetical constructs presumably would guide an individual's understanding of and response to family life. Another widespread assertion in models of grief is that individuals make appraisals of the events in their lives. An example of an implicit reappraisal in the aftermath of a traumatic death could include, "My husband died in a mugging, hence my emotional and instrumental needs can no longer be met, and the world is a dangerous place." Clearly, such an appraisal of a death event profoundly challenges the orienting system described above. Numerous contemporary models of grief propose that the bereft engage in a process of negotiating this challenge by retaining, reaffirming, revising, or replacing elements of their orienting system to develop more nuanced, complex and useful systems. This process

is referred to as *meaning making* (Gillies & Neimeyer, 2006; Neimeyer, 2001; Park, 2010; Stiles et al. 2010). By extension, if an individual is successful in reconciling the challenge posed to his or her orienting system, that individual is said to have made meaning (Park, 2010). Thus, in the context of death-related loss, *meaning made* is what results from the process of engaging the challenge that a death event poses to one's orienting system.

Of course, different schools of thought use different terminology and provide unique elaborations or specifications of the ideas described above. For example, Janoff-Bulman (1989) has applied her shattered assumptions model to the experience of bereavement, focusing attention on how traumatic death can undermine fundamental beliefs in a predictable, just and controllable world, requiring rebuilding or adjustment of such assumptions. With greater attention to the primacy of attachment bonds, scholars within the psychodynamic tradition have developed an explanation of grief wherein unconscious role-relationship models (RRMs) that serve as reference points for interpreting and guiding interactions with significant others can destroyed by the death event, requiring a reschematization of RRMs (Horowitz, Bonanno, & Holen, 1993). More individualistically, cognitive behavioral approaches to grief (Boelen et al., 2006; Malkinson, 2007) have asserted that a death can challenge autobiographical schemas and have described the restructuring of these schemas as an adaptive means of accommodating to a loss. Similarly, a meaning reconstruction model (Neimeyer, 2001, 2006; Neimeyer & Sands, 2011) examines how survivors' self-narratives are reaffirmed or reconstructed over the course of grieving as they strive to process and accommodate both the "event story" of the death and the "back story" of the lives they share with their families and loved ones within larger community and cultural contexts (Hooghe & Neimeyer, 2012; Nadeau, 1997; Neimeyer, 2006). Finally, in reviewing the vast literature on meaning, Park (2010) presented an integrated model wherein the meaning making process is prompted by the distress caused by a discrepancy between a situational meaning of a stressful event and previously held global meanings. As these and other examples demonstrate (Bonanno & Kaltman, 1999; Park & Folkman, 1997; Stiles et al. 1990), the constructs of meaning making (i.e., rebuilding, adjustment, reschematization, reconstruction, etc.) and meaning made (i.e., altered assumptions, RRMs, schemas, self-narratives, etc.) feature prominently in contemporary conceptual models of adaptation to loss.

OPERATIONALIZING MEANING MADE

Despite the ubiquity of meaning constructs in current grief literature and despite the fact that these constructs

have been given a theoretical definition, it is less clear how meaning making and meaning made are manifested over the course of bereavement. How does the process of meaning making unfold and what implications do meanings made carry for survivors' adjustment? At present, there is no consensual operational definition of either meaning made or meaning making (Park, 2010; Steger et al., 2006). Although researchers have devised a handful of self-report questionnaires to assess meaning made, there is considerable variability in how these measures conceptualize this construct. To offer just a few examples, the Integration of Stressful Life Events Scale (Holland, Currier, Coleman, & Neimeyer, 2010) probes one's approach to comprehending a stressful event, the Purpose in Life questionnaire (Crumbaugh & Maholick, 1964) gauges one's sense of life-purpose or one's life-priorities following a stressful event, and the Sense Making Scale (Pakenham, 2007) surveys several different domains including spirituality, acceptance, and causal attribution. The most widespread approach to assessing meaning made in the context of grief research involves asking bereft individuals if they have made or found meaning or sense in their experience. Importantly, responses to this one-question measure of meaning made have been found to predict the severity of grief experience in numerous studies (Currier et al., 2006; Davis, Wortman, Lehman, & Silver, 2000; Holland & Neimeyer, 2010; Keesee et al., 2008). But despite its utility, this comparatively simple operationalization fails to elucidate how the latent construct of meaning made manifests. Other commonly used, one-question measures of meaning made that are associated with grief severity include those that probe whether the bereft have found unsought benefit in the loss experience and whether they perceive themselves to have a changed sense of identity as a result (e.g., Neimeyer, Baldwin, & Gillies, 2006). Given the predictive utility of these three facets of meaning—sense, benefit, and identity— the present study drew on these approaches in an attempt to operationalize meaning made, but to do so in a potentially more idiographic fashion. Specifically, we used thematic analysis to examine the responses of bereaved individuals to questions probing how they have made sense of, found unsought benefit in, and felt their identities changed as a result of their losses, to develop a coding system applicable to their oral or written accounts of their experience.

Although a few previous studies have attempted to use a similar content coding approach to operationalizing the construct of meaning made (e.g., Davis, Nolen-Hoeksema, & Larson, 1998; Lichtenthal, Currier, Neimeyer, & Keesee, 2010; Murphy, Clark Johnson, & Lohan, 2003), the current study is unique in several respects. First, existing studies of the content of meaning made in the context of bereavement have focused on participant samples that lack diversity in terms of ethnicity of the participants, cause of death, kinship to the deceased, age of the bereft, and other factors. In contrast, we drew on a diverse purposive sample of bereaved individuals in order to assess meaning made within the broad context of death-related loss, rather than within the specific context of particular populations (e.g., bereaved parents) or circumstances (e.g., violent death bereavement). Secondly, the current study is the first to include an "identity change" prompt that inquired as to how survivors' sense of self changed as a consequence of the loss.

Finally, we used a distinctive approach to presenting the "sense made" qualitative prompt. Specifically, with the exception of Murphy and colleagues (2003), previous studies of meaning made (e.g., Davis et al., 1998; Lichtenthal et al., 2010) used a procedure wherein participants were first assessed in terms of whether they self-identified as having made sense or meaning of their loss. This assessment was carried out via variations of the following question, "Do you feel that you have been able to make sense of the death?" Further content analysis was only carried out for those participants who responded affirmatively to such probes. A potential drawback associated with this method is that it could exclude individuals who have made meaning, but whose meanings lack the sense of finality implied by the question. Research has shown that the meaning made construct is not stable across time; for example, reporting meaning made at approximately two-and-half months following spinal cord injury does not predict reporting meaning made approximately 5 or 13 months later (Novoa & Davis, 2012). Thus, a person whose meanings are in flux may not respond affirmatively to the probe, "Do you feel that you have made sense of your loss?" and hence would be excluded from analysis. Moreover, this conventional phrasing of the question may unintentionally restrict the valence of meanings asserted, as a grieving individual who has constructed a negative meaning of the loss (e.g., "This was not when he was meant to die") also may not respond affirmatively. Thus, in an attempt to operationalize meaning made in the least restrictive fashion, we adopted a more open probe to elicit responses, as described below.

METHOD

Participants

Grief theory and empirical findings suggest that a number of factors are involved in determining the intensity and course of differing grief experiences. Among these are the relationship between bereaved and decedent, age of deceased, and cause of death (Burke & Neimeyer,

2013). Consistent with Glaser and Strauss's (1967) method of theoretical sampling, diverse groups of bereaved adults from previous studies (Keesee, Currier, & Neimeyer, 2008; Neimeyer & Anderson, 2002) or recruited through an online support network (www. Widownet.org) were pooled and sampled selectively to ensure a broad and balanced spectrum of these risk factors. Individual participants from the sample pool were selected from these samples in the following four steps.

Step 1: Stratification by Relationship of Bereaved to Decedent

Fifteen participants from each of the following relationship categories were randomly selected, according to whether the deceased was the participant's: (a) parent, (b) sibling, (c) child, (d) partner/spouse, (e) grandparent, (f) aunt/uncle/cousin, or (g) friend. The only exception was that data from only 12 siblings had been collected. Consequently, 102 participants were selected in Step 1.

Step 2: Age

Because a large proportion of the sample obtained in Step 1 was under age 25, in the second step, 23 participants over the age of 30 were randomly selected and included in the sample, raising the sample size to 125.

Step 3: Cause of Death

Twenty-eight participants who had lost a loved one to an unanticipated loss, which was either natural, accidental, or due to homicide or suicide, were randomly selected and added to the sample in Step 3, raising the sample size to 153.

Step 4: Severity of Distress

In this final step, nine more participants were added, who had indicated significant distress (a total score over 34) on the Core Bereavement Items (CBI; Burnett,

Middleton, Raphael, & Martinek, 1997), raising the total sample size to 162.

In the sample derived by this selection process, ages of participants ranged from 17 to 60 years old, with a mean of 27 years old (see Table 1 for more detail). Seventy-nine percent of participants were women and 21% were men; 53% were Caucasian, 40% African American, .7% Asian, .7% Native American, and 2.7% other. The mean time since loss was 14 months ($SD = 7.5$). CBI scores ranged from 0 to 51, with a mean of 19, and 14% falling above 34 (endorsing each of 17 "core bereavement" symptoms at least "a little bit of the time"). Table 1 depicts frequencies of relationship of the decedent to the bereaved participants, the cause of death, and the age ranges of the participants.

Whether in paper-and-pencil or online format, participants drawn from all three of the Institutional Review Board-approved studies responded in writing to the following three questions, designed as open-ended prompts to aid in expressing the role of meaning in their grief experiences.

1. How much sense would you say you have made of the loss? Please comment on how.
2. Despite your loss, have you been able to find any benefit from your experience of loss? Please comment on this benefit.
3. Do you feel that you are any different, that your sense of identity has changed, as a result of this loss? Please comment on this change.

Derivation of the Coding

The first author (James Gillies) performed content analysis of participants' qualitative responses under the supervision of the second author (Robert A. Neimeyer). At the time of coding, he was a clinical doctoral candidate at the University of Memphis with a humanistic/existential clinical background and research experience in psychometric assessment of

TABLE 1
Descriptive Statistics for Selected Demographic Variables ($n = 162$)

Cause of death	n (%)	Relationship of deceased to bereaved		Age of the participants	
		Relationship type	n (%)	Age range:	n (%)
Natural, anticipated	69 (42.6)	Grandparent	31 (19.3)	17 to 20	79 (48.8)
Natural, unanticipated/sudden	35 (21.6)	Aunt/uncle/cousin	28 (17.4)	21 to 30	34 (21.0)
Accidental, sudden/unnatural	22 (13.6)	Friend	26 (16.1)	31 to 40	19 (11.7)
Homicide or suicide	20 (12.3)	Parent	24 (14.9)	41 to 50	18 (11.9)
Other (e.g., perinatal death)	16 (9.9)	Child	21 (13.0)	51 to 60	12 (5.6)
		Spouse/partner	16 (9.9)		
		Sibling	12 (7.6)		
		Other	3 (1.9)		

Note: One participant did not identify the nature of the relationship.

trauma, grief, and loss. The content analysis used open coding, which is defined by Strauss and Corbin (1990) as "the process of breaking down, examining, comparing, conceptualizing, and categorizing data" (p. 61). In this study the author coded discrete, resonant themes in the participants' responses, conceptualizing them along multiple dimensions that included cognitions, emotions, behaviors, relationships, memories, lessons, goals, hopes, beliefs, values, and dreams.

To compile a broad sample of themes from which to develop the coding system, qualitative responses to the three questions above were pooled and divided into individual meaning units. Giorgi (1975) defined *meaning units* as words or phrases that clearly express a meaning that is distinguishable from other meaning units and wrote that the purpose in designating meaning units is "to elucidate the psychological aspects in a depth appropriate for the understanding of events" (Giorgi, 1985, pp. 17–18). Meaning units in this study included statements such as "I know now that the time with loved ones is special" or "I am more responsible." In cases in which two or more distinct points were made within a response to a single qualitative prompt, the response was divided into so many meaning units, so that a response such as "I am a little more cynical, though sometimes optimistic," was broken into two meaning units to suit the distinct themes expressed, and coded into separate appropriate content categories. In total, responses from the 162 participants were divided into 531 meaning units.

Open coding of the meaning units was facilitated by use of the QSR NUD*IST software package designed for qualitative data analysis (QSR, 1999). Each meaning unit was first assigned a number and a label that condensed the content of the participant's statement while retaining the original language as closely as possible. For example, a statement such as "I became stronger as a result of going through this" was assigned the label "personal strength." All 531 meaning units were so labeled and entered into the NUD*IST software program. At that point the first author engaged in a process of constant comparison (Glaser & Strauss, 1967) by which each unit was compared with every other and assigned to the meaning category judged by the author to be most appropriate. Categories were developed and altered as the introduction of each new meaning unit required determining whether it (a) fit precisely within an existing category; (b) fit partially within an existing category thereby altering the category's definition or requiring that the category be split into multiple categories; or (c) did not fit within any existing category thereby requiring the generation of a new one. Throughout this process of constant comparison, each significant decision in how meaning units were coded and how categories were modified,

reconceptualized, split, or combined, was noted in comprehensive memos (Glaser & Strauss, 1967; Strauss & Corbin, 1990). Through these memos, the coder attempted to monitor personal biases in interpreting respondents' language and meanings, and to regulate the imposition of personal biases into the categorical scheme.

The process of coding items was continued until a point of saturation was reached. This occurred when 490 meaning units had been coded, as the remaining units failed to require formation of a new category or alteration of an existing one. The remaining 41 meaning units then were coded. At that point, inter-rater reliability was examined. Two doctoral students in clinical psychology were trained in coding meaning units using the derived category scheme. In a practice coding session using 50 randomly selected meaning units, Cohen's kappa statistics (Cohen, 1960) between the first author and both raters exceeded .85. In the following coding session in which all three raters coded a sample of 106 meaning units, kappa coefficients between pairs of raters ranged between .815 and .826 ($p < .05$), a level considered to represent "excellent" agreement (Fleiss, Levin, & Paik, 1981).

The frequency with which each category was endorsed was determined both on the level of the meaning unit and on the level of the participant. The latter allowed for a calculation of the proportion of participants who endorsed each category of meaning, thus preventing the results from being confounded by differences in the verboseness of the participants.

RESULTS

Content Analysis

Content analysis produced 30 meaning categories, which collectively comprise the Meaning of Loss Codebook (MLC), as described in Table 2 below. The table also includes the frequency of meaning units and percentage of participants endorsing each category. In cases of overlap or ambiguity, exclusion criteria are described as well as appropriate alternative categories to consider, along with sample meanings that exemplify each code.

DISCUSSION

The present article introduces the MLC as a guide to recognizing the manifestation of meaning made in the context of bereavement. To our knowledge, this study is the first to develop an observer-rated measure of meaning-made based on a diverse sample of adult mourners (in terms of ethnicity, cause of death, kinship to deceased, age, etc.) and grounded in empirical findings rather than theory. In terms of the conceptual definition

TABLE 2
Coding Categories for the Meaning of Loss Codebook

Categories	Frequency of response	Percentage of respondents invoking category
1. *Valuing Life*. Reflects the mourner's respect for the value of life. Phrases common to this category include: "value," "cherish," "respect," "life is precious," and "don't take life for granted."	30	19%
2. *Live to the Fullest*. References the sentiment of living to the fullest or taking advantage of time.	8	5%
3. *Impermanence*. Reflects the theme that "life is short," that "everyone dies," and that "it's a matter of time" for each of us. Also reflected is the notion that there are "no guarantees in life," but rather a randomness in when and how we die.	24	13%
4. *Personal Growth*. Refers to internal character improvement or personal development in the respondent, resulting in greater strength, maturity, changed priorities, responsibility, etc. Exclusions: External behavioral changes are coded in Category 5.	54	24%
5. *Lifestyle Changes*. Specific external behavioral or general lifestyle changes, e.g., "drinking less," "pursuing an education," "taking better care of my health." Exclusions: Increased helping behaviors coded in Category 8. Internal growth in character is coded in Category 4.	27	13%
6. *Family Bonds*. Includes references to a change in outlook and/or behavior towards family members, e.g., "family means more to me now," "spend more time with my children."	38	20%
7. *Valuing Relationships*. Refers to appreciating social support, valuing friendships and relationships to people in general, and efforts to become emotionally closer to others. Exclusions: Family-related valuation coded in Category 6.	21	12%
8. *Compassion*. Reflects the idea that experiencing loss has made the bereaved individual more altruistic, sensitive, empathic, and willing or able to help others.	20	12%
9. *Coping*. Includes various means of adaptively responding to the loss, e.g., "I'm coping" or "I'm dealing with it." Exclusions: Coping by "moving on" coded in Category 10. Coping via "acceptance" coded in Category 12.	5	2%
10. *Moving On*. Limited to the phrase "moved on," a colloquial expression implying that the loss is a thing of the past and the bereaved person is making progress in her or his life.	3	2%
11. *Greater Perspective*. Focuses on the notion of not being upset by "small stuff" or "little things."	2	1%
12. *Acceptance*. The term "accept" is required for coding into this category.	10	6%
13. *Decedent Preparation for Death*. Refers to the idea that the decedent was prepared for loss, e.g., "he was ready to go," "we were all prepared for her death."	10	6%
14. *Memories*. References general or specific memories of the deceased, e.g., "she lives in our memory," "I will never forget him."	5	3%
15. *Time Together*. Refers to the sentiment of valuing the time one had with the deceased loved one.	4	2%
16. *Affirmation of Deceased*. Reflects the notion that "she lived a good life" or "he was a good person," e.g., "he was a person of character," "she was so loving."	4	2%
17. *Release from Suffering*. Captures the sentiment that the death ended sickness or suffering and brought peace to the decedent and/or the bereaved.	20	10%
18. *Spirituality*. Includes any mention of God, religion, spiritual faith, the afterlife, and more ambiguous notions such as "they're in a better place" or "they're watching over me." Exclusions: More general statements regarding appreciation of life are coded into Category 1 and those regarding a change in perspective are coded into Category 4.	42	20%
19. *Identity as Bereaved Person*. Refers to new bereavement-related identities that one takes on as a result of loss, e.g., orphan, widow, single mother. Exclusions: "Survivor" identity coded in Category 21. Loss of identity coded in Category 27. Unspecified change to identity coded in Category 29.	5	2%
20. *Survivor Identity*. Refers to a particular identity in which the bereaved individual views or defines her/himself specifically as a "survivor."	4	2%
21. *Emotionality*. Covers a range of references to emotion or emotional expression that are not necessarily depressive or negative in nature, such as "I'm more emotional now," "my emotions are different," and "deep emotion is a gift." Exclusions: References to specifically depressive or negative emotion are coded in Category 22.	5	3%
22. *Negative Affect*. Covers a wide range of negative affective responses to loss that resemble complicated grief, guilt, depression, emptiness or other psychological distress.	33	15%
23. *Regret*. Reflects expressions of regret about something done or left undone, with statements such as "I wish I'd done this" or "I could have done that."	6	4%
24. *Missing the Deceased*. Reference to missing, longing or yearning for the deceased.	4	2%
25. *Lack of Understanding*. Captures the sentiment that one is trying to make sense or meaning but hasn't found it or has given up on trying to do so. Meanings in this category refer to confusion, frustration, resignation, or a process of continually asking why the loved one had to die.	17	9%
26. *Lost Identity*. Refers to loss of specific roles or sense of self, usually described as a devastating loss, such as "I lost my existence" or "my whole identity."	2	1%

(*Continued*)

TABLE 2
Continued

Categories	Frequency of response	Percentage of respondents invoking category
27. *Lost Innocence*. Refers to lost innocence or naiveté or trust in the goodness of the world or people in it.	2	1%
28. *Identity Change, Nonspecific*. Refers to the presence of change but without specification of the nature of its change (e.g., "I'm a different person.")	4	2%
29. *Meaning Made, Nonspecific*. Refers to having found meaning or sense in the loss, but with no specification of how or what kind of sense. Statements in this category included "there was a reason, but I don't know it yet" and "not much, but some sense."	5	3%
30. *No Meaning*. Reflects negation the meaning-making prompts, namely that there was no benefit or no sense to be made.	38	22%

of meaning made presented previously, the MLC allows for its measurement by specifying the content themes that emerge as people negotiate the challenge that a death-related loss poses to their orienting systems. In addition, the no meaning and the lack of understanding themes that emerged in this study allow the MLC to be used as a tool for identifying and examining responses of those survivors who explicitly voice struggling with a ruminative process of meaning making, or a sense of resignation altogether.

Below, we situate the MLC and its meaning made themes in terms of existing measures, both to underscore its strengths and to acknowledge its limitations. We conclude by suggesting research applications of the coding system.

Strengths and Limitations

Lending support to the convergent validity of the MLC is the overlap between meaning made themes identified in the present study and those identified in meaning-focused grief studies that made use of comparable methodologies (Davis et al., 1998; Lichtenthal et al., 2010; Murphy et al., 2003). In particular, the following MLC themes coincide with those that have emerged in other research that used content coding to operationalize meaning made: release from suffering; spirituality; impermanence; decedent's preparation for death; acceptance; personal growth; family bonds; compassion; lifestyle changes; valuing of relationships; appreciation; and valuing life. Notably, this degree of convergence in meaning made themes occurs despite the aforementioned differences between the methodological approaches taken in the current versus previous thematic analyses.

Further support for the convergent validity of the MLC derives from a comparison of the MLC's meaning made themes to the items in self-report measures of meaning made. Specifically, both the MLC and self-report measures include themes bearing on spirituality, personal growth, changed perspective, changed values,

acceptance, specific positive appraisals of the death event, identity change, and lessons learned (e.g., Davis & Morgan, 2008; Fife, 1995; Manne, Ostroff, Fox, Grana, & Winkel, 2009; Moore et al., 2006; Pakenham, 2008; Park, 2005; Tedeschi, & Calhoun, 1996; Wood & Conway, 2006).

Beyond its convergence with existing coding schemes and self-report measures, the MLC has the advantage of offering a comprehensive depiction of meanings made in the course of adaptation to bereavement. Specifically, the MLC offers more than twice the number of distinct categories than do systems used by other researchers (e.g., Davis et al., 1998; Murphy et al., 2003). Such differentiation of content could be helpful in assessing nuances of meaning making missed by other systems, while still permitting aggregation of categories to form higher level clusters when more general meaning categories are of interest to the investigator.

Although the convergence of the MLC with other research is overall a strength of this study, it is important to acknowledge a limitation in that certain categories of meanings made that have emerged in some studies are not represented. For example, studies of bereaved parents have identified themes apparently unique to a parental attachment relationship with the deceased (e.g., the purpose of the child's life or death, the role of the parent in the death; Davis et al., 1998; Lichtenthal et al., 2010; Murphy et al., 2003). The presence of such kinship-specific meaning themes could argue for supplemental categories in connection with particular populations.

A further constraint of the MLC in its current form concerns our decision to retain as single categories some clusters of meaning themes (e.g., spirituality, impermanence, lifestyle changes, emotionality) that could encompass both connotatively positive and negative meanings. This coding strategy was partly justified by the ambiguity of some of the meanings made in each domain, as "prayed to God for comfort" did not specify whether such prayers were answered, and without further elaboration the statement that "life is short"

could imply a variety of corollary positions ranging from a carpe diem commitment to living fully to existential resignation. Likewise, although most meaning units comprising lifestyle changes were clearly constructive, some also could admit a negative interpretation (e.g., "spend more time alone"). In the case of emotionality, we attempted to break out clearly negative affect in its own category, but retained some ambiguous codes (e.g., "more emotional") in the former cluster. Thus, depending on the focus of the particular study, future investigators might want to define subcategories of positive, negative, and perhaps ambiguous codes nested within these categories and assess their reliability as a precondition to applying them. Such refinements may require still larger samples of bereaved respondents, however, to ensure an adequate sampling of meanings made at the level of these more narrowly defined clusters.

A final limitation of the MLC is that its reliance on verbal formulation of meaning in loss precludes its application to more embodied, performative, musical, visual or nonliteral meanings of loss that could be captured in expressive arts modalities (Thompson & Neimeyer, 2014). However, the MLC would be well suited to analyzing client reflections on the significance of their expressive arts productions, whether in the process of therapy or in written journals.

Research Implications of the MLC

A series of negatively valenced meaning made themes emerged in the present study. Among these themes are regrets, missing the deceased, lost identity, lost innocence, and negative affect. It may be that the minimally restrictive phrasing of the "sense made" prompt used in this study facilitated the relatively high number of negatively valenced meaning made themes that emerged (as compared to previous studies of meaning made). Whether or not this is the case, the presence of negative themes in the MLC could encourage more research on the relationship between meaning variables and response to death-related loss. The predominant question pursued by previous scholarship has been "What is the effect of meaning made on grief distress and symptomatology?" (Park, 2010). However, recent evidence suggests that more differentiated hypotheses may prove worth pursuing. For example, investigators have found that although a *search* for meaning is associated with increased grief distress, *successful* sense-making in the early months of widowhood prospectively predicts increased well-being a full 4 years following the death of a spouse (Coleman & Neimeyer, 2010). Furthermore, recent research has shown that participants who report intermediate levels of complicated grief symptoms experience greater levels of posttraumatic growth (Currier, Holland, & Neimeyer, 2012). Together, such findings suggest the need for scholarship that examines not only whether meaning mitigates grief distress, but also how meaning might facilitate personal growth and well-being following death-related loss. In this context, mapping negatively and positively valenced meaning themes using the MLC could clarify whether they differentially predict grief distress, personal growth, and well-being. Furthermore, tracing the evolution of negative and positive meaning making over time and its relationship to grief outcome can benefit from a single coherent coding system like that provided by the MLC. Existing longitudinal analyses of this sort, while limited, suggest that this could be a future direction worth pursuing (Davis et al. 1998; Murphy et al., 2003).

As meaning reconstruction has increasingly been proposed as a frame for grief therapy with individuals (Neimeyer, 2001; Neimeyer, Burke, Mackay, & Stringer, 2010), families (Hooghe & Neimeyer, 2012; Walsh & McGoldrick, 2004), and groups (e.g., Mackinnon et al., in press) it could be valuable to conduct process-outcome research to determine how these interventions produce desired outcomes. As the MLC is an observer-rated measure of meaning made that has demonstrated interrater reliability, it provides a means of conducting process-outcome research with grief interventions. Specifically, the MLC enables psychotherapy session transcripts to be coded in terms of meaning made, which can then be examined in relation to outcome, as well as to the emergence of identified points of change in the process of grief therapy (Alves, Mendes, Gonçalves, & Neimeyer, 2012). Moreover, given the inclusion of both positive and negative meaning themes in the MLC, it could itself be considered an assessment of bereavement outcome, permitting the evaluation of adaptive or maladaptive changes over time, thereby supplementing conventional self-report measures of grief symptomatology or substituting for them when such measures are unavailable.

Finally, in addition to enabling analysis of psychotherapy transcripts, the observer-rated nature of the MLC also facilitates the analysis of first-person, written accounts of grief, as in client responses to directed or unstructured journaling (Lichtenthal & Neimeyer, 2012; Neimeyer, van Dyke, & Pennebaker, 2009), published memoirs of loss in a "confessional" genre (e.g., Berman et al., 2010; Didion, 2007; Lewis, 1963), or increasingly widespread publication formats such as online grief blogs (Sofka, Cupit, & Gilbert, 2012). Contemporary grief scholars emphasize the importance of understanding of how meaning making progresses in naturalistic contexts (e.g., Davis et al., 1998), and such published accounts of the grief experience could offer rich and readily available sources of data that allow for an exploration of meaning made over the course of bereavement.

CONCLUSION

The burgeoning interest in meaning making in the context of bereavement calls for systematic approaches to tracing this sometimes-elusive process and understanding its outcomes. Such approaches promise to examine further the linkages between efforts at meaning making, meanings made, and adaptation to loss, and to explore broader questions about the search for significance in the face of adversity. As a complement to existing questionnaires and qualitative methods, the MLC seems well positioned to make a contribution to this effort.

REFERENCES

Alves, D., Mendes, I., Gonçalves, M., & Neimeyer, R. A. (2012). Innovative moments in grief therapy: Reconstructing meaning following perinatal death. *Death Studies*, *36*, 785–818.

Berman, J., Lewis, C. S., Bayley, J., Hall, D., Didion, J., & Trillin, A. S. (2010). *Companionship in grief*. Boston: University of Massachusetts Press.

Boelen, P., van den Hout, M., & van den Bout, J. (2006). A cognitive-behavioral conceptualization of complicated grief. *Clinical Psychology*, *13*, 109–128.

Bonanno, G. A., & Kaltman, S. (1999). Toward an integrative perspective on bereavement. *Psychological Bulletin*, *125*, 760–776.

Bonanno, G. A., Wortman, C. B., & Nesse, R. M. (2004). Prospective patterns of resilience and maladjustment during widowhood. *Psychology and Aging*, *19*, 260–271.

Burke, L. A., & Neimeyer, R. A. (2013). Prospective risk factors for complicated grief. In M. Stroebe, H. Schut, P. Boelen, & J. Van den Bout (Eds.), *Complicated grief* (pp. 145–161). Washington, DC: American Psychological Association.

Burnett, P., Middleton, W., Raphael, B., & Martinek, N. (1997). Measuring core bereavement phenomena. *Psychological Medicine*, *27*, 49–57.

Cohen, J. (1960). A coefficient of agreement for nominal scales. *Educational and Psychological Measurement*, *20*, 37–46.

Coleman, R. A., & Neimeyer, R. A. (2010). Measuring meaning: Searching for and making sense of spousal loss in late-life. *Death Studies*, *34*, 804–834.

Crumbaugh, J., & Maholick, L. (1964). An experimental study of existentialism. *Journal of Clinical Psychology*, *20*, 200–207.

Currier, J. M., Holland, J. M., & Neimeyer, R. A. (2006). Sense making, grief and the experience of violent loss: Toward a mediational model. *Death Studies*, *30*, 403–428.

Currier, J. M., Holland, J. M., & Neimeyer, R. A. (2012). Prolonged grief symptoms and growth in the first two years of bereavement. *Traumatology*, *18*, 65–71.

Davis, C., & Morgan, M. (2008). Finding meaning, perceiving growth, and acceptance of tinnitus. *Rehabilitation Psychology*, *53*, 128–138.

Davis, C. G., Nolen-Hoeksema, S., & Larson, J. (1998). Making sense of loss and benefiting from the experience. *Journal of Personality and Social Psychology*, *75*, 561–574.

Davis, C. G., Wohl, M. J. A., & Verberg, N. (2007). Profiles of posttraumatic growth following an unjust loss. *Death Studies*, *31*, 693–712.

Davis, C., Wortman, C. B., Lehman, D. R., & Silver, R. (2000). Searching for meaning in loss: Are clinical assumptions correct? *Death Studies*, *24*, 497–540.

Didion, J. (2007). *The year of magical thinking*. New York, NY: Vintage.

Fife, B. (1995). The measurement of meaning in illness. *Social Science & Medicine*, *40*, 1021–1028.

Fleiss, J. L., Levin, B., & Paik, M. C. (1981). The measurement of interrater agreement. *Statistical Methods for Rates and Proportions*, *2*, 212–236.

Gillies, J., & Neimeyer, R. A. (2006). Loss, grief and the search for significance. *Journal of Constructivist Psychology*, *19*, 31–65.

Giorgi, A. (1975). An application of phenomenological method in psychology. *Duquesne Studies in Phenomenological Psychology*, *2*, 82–103.

Giorgi, A. (1985). Sketch of a psychological phenomenological method. In A. Georgi (Ed.), *Phenomenology and psychological research* (pp. 8–21). Pittsburgh, PA: Duquesne University Press.

Glaser, B. G., & Strauss, A. (1967). *The discovery of grounded theory: Strategies for qualitative research*. Chicago, IL: Aldine.

Holland, J. M., Currier, J. M., Coleman, R. A., & Neimeyer, R. A. (2010). The Integration of Stressful Life Experiences Scale (ISLES): Development and initial validation of a new measure. *International Journal of Stress Management*, *17*, 325–352.

Holland, J. M., & Neimeyer, R. A. (2010). An examination of stage theory of grief among individuals bereaved by natural and violent causes. *Omega*, *61*, 105–122.

Hooghe, A., & Neimeyer, R. A. (2012). Family resilience in the wake of loss. In D. Becvar (Ed.), *Handbook of family resilience* (pp. 269–284). New York, NY: Springer.

Horowitz, M. J., Bonanno, G. A., & Holen, A. (1993). Pathological grief: diagnosis and explanation. *Psychosomatic Medicine*, *55*, 260–273.

Huta, V., & Ryan, R. M. (2010). Pursuing pleasure or virtue. *Journal of Happiness Studies*, *11*, 735–762.

Janoff-Bulman, R. (1989). Assumptive worlds and the stress of traumatic events. *Social Cognition*, *7*, 113–116.

Keesee, N. J., Currier, J. M., & Neimeyer, R. A. (2008). Predictors of grief following the death of one's child: The contribution of finding meaning. *Journal of Clinical Psychology*, *64*, 1145–1163.

Kelly, G. A. (1955). *The psychology of personal constructs*. New York NY: Norton.

King, L. A., Hicks, J. A., Krull, J. L., & Del Gaiso, A. K. (2006). Positive affect and the experience of meaning in life. *Journal of Personality and Social Psychology*, *90*, 179–196.

Lewis, C. S. (1963). *A grief observed*. Greenwich, CT: Seabury Press.

Lichtenthal, W. G., Currier, J. M., Neimeyer, R. A., & Keesee, N. J. (2010). Sense and significance: A mixed methods examination of meaning making after the loss of one's child. *Journal of Clinical Psychology*, *66*, 791–812.

MacKinnon, C. J., Milman, E., Smith, N. G., Henry, M., Berish, M., Copeland, L., . . . Cohen, S. R. (2013). Means to meaning in cancer-related bereavement: Identifying clinical implications for counseling psychologists. *The Counseling Psychologist*, *41*, 216–239.

MacKinnon, C. J., Smith, N. G., Henry, M., Milman, E., Berish, M., Körner, A., . . . Cohen, S. R. (in press). Meaning-based group counseling for bereavement: Bridging theory with emerging trends in intervention research. *Death Studies*.

Malkinson, R. (2007). *Cognitive grief therapy*. New York, NY: Norton.

Manne, S., Ostroff, J., Fox, K., Grana, G., & Winkel, G. (2009). Cognitive and social processes predicting partner psychological adaptation to early stage breast cancer. *British Journal of Health Psychology*, *14*, 49–68.

Moore, T., Norman, P., Harris, P. R., & Makris, M. (2006). Cognitive appraisals and psychological distress following venous thromboembolic disease: An application of the theory of cognitive adaptation. *Social Science & Medicine*, *63*, 2395–2406.

Murphy, S. A., Clark Johnson, L., & Lohan, J. (2003). Finding meaning in a child's violent death: A five-year prospective analysis

of parent's personal narratives and empirical data. *Death Studies*, *27*, 381–404.

Nadeau, J. W. (1997). *Families making sense of death*. Newbury Park, CA: Sage.

Neimeyer, R. A. (2000). Searching for the meaning of meaning: Grief therapy and the process of reconstruction. *Death Studies*, *24*, 541–558.

Neimeyer, R. A. (2001). *Meaning reconstruction & the experience of loss*. American Psychological Association.

Neimeyer, R. A. (2006). Re-storying loss: Fostering growth in the posttraumatic narrative. In L. Calhoun & R. G. Tedeschi (Eds.), *Handbook of posttraumatic growth: Research and practice* (pp. 68–80). Mahwah, NJ: Lawrence Erlbaum.

Neimeyer, R. A. (2011). Reconstructing the self in the wake of loss: A dialogical contribution. In H. Hermans & T. Gieser (Eds.), *Handbook on the dialogical self* (pp. 374–389). Cambridge, UK: Cambridge University Press.

Neimeyer, R. A., & Anderson, A. (2002). Meaning reconstruction theory. In N. Thompson (Ed.), *Loss and grief* (pp. 45–64). New York, NY: Palgrave.

Neimeyer, R. A., Baldwin, S. A., & Gillies, J. (2006). Continuing bonds and reconstructing meaning: Mitigating complications in bereavement. *Death Studies*, *30*, 715–738.

Neimeyer, R. A., Burke, L., Mackay, M., & Stringer, J. (2010). Grief therapy and the reconstruction of meaning: From principles to practice. *Journal of Contemporary Psychotherapy*, *40*, 73–84.

Neimeyer, R. A., & Sands, D. C. (2011). Meaning reconstruction in bereavement: From principles to practice. In R. A. Neimeyer, H. Winokuer, D. Harris & G. Thornton (Eds.), *Grief and bereavement in contemporary society: Bridging research and practice* (pp. 9–22). New York, NY: Routledge.

Neimeyer, R. A., Van Dyke, J. G., & Pennebaker, J. W. (2009). Narrative medicine: Writing through bereavement. In H. M. Chochinov & W. Breitbart (Eds.), *Handbook of Psychiatry in Palliative Medicine* (pp. 454–469). Oxford, NY: Oxford University Press.

Pakenham, K. I. (2007). Making sense of multiple sclerosis. *Rehabilitation Psychology*, *52*, 380–389.

Pakenham, K. I. (2008). Making sense of illness or disability: The nature of sense making in multiple sclerosis (MS). *Journal of Health Psychology*, *13*, 93–105.

Park, C. L. (2005). Religion as a meaning-making framework in coping with life stress. *Journal of Social Issues*, *61*, 707–729.

Park, C. L. (2010). Making sense of the meaning literature. *Psychological Bulletin*, *136*, 257–301.

Park, C. L., & Folkman, S. (1997). Meaning in the context of stress and coping. *Review of General Psychology*, *1*(2), 115–144.

QSR. (1999). *NUD*IST* (Version 4). Burlington, MA: Scolari Sage Publications Software.

Singer, J. L., & Salovey, P. (1991). Organized knowledge structures and personality. In M. J. Horowitz (Ed.), *Person schemas and maladaptive interpersonal patterns* (pp. 33–79). Chicago, IL: University of Chicago Press.

Sofka, C. J., Cupit, I. N., & Gilbert, K. R. (2012). *Dying, death, and grief in an online universe*. New York, NY: Springer.

Steger, M. F., Frazier, P., Oishi, S., & Kaler, M. (2006). The meaning in life questionnaire. *Journal of Counseling Psychology*, *53*, 80–93.

Stiles, W. B., Elliott, R., Llewelyn, S. P., Firth-Cozens, J. A., Margison, F. R., Shapiro, D. A., & Hardy, G. (1990). Assimilation of problematic experiences by clients in psychotherapy. *Psychotherapy*, *27*, 411–420.

Strauss, A., & Corbin, J. (1990). *Basics of qualititative research*. Newbury Park, CA: Sage.

Stroebe, M. S., & Schut, H. (1999). The dual process model of coping with bereavement. *Death Studies*, *23*, 197–224.

Stroebe, M. S., & Schut, H. (2001). Meaning making in the Dual Process Model of Coping with Bereavement. In R. A. Neimeyer (Ed.), *Meaning reconstruction and the experience of loss* (pp. 55–73). Washington, DC: American Psychological Association.

Tedeschi, R. G., & Calhoun, L. G. (1996). The Posttraumatic Growth Inventory: Measuring the positive legacy of trauma. *Journal of Trauma and Stress*, *9*, 455–471.

Thompson, B., & Neimeyer, R. A. (Eds.). (2014). *Grief and the expressive arts: Practices for creating meaning*. New York, NY: Routledge.

Walsh, F., & McGoldrick, M. (2004). *Living beyond loss* (2nd ed.). New York, NY: Norton.

Westphal, M., & Bonanno, G. A. (2007). Posttraumatic growth and resilience to trauma. *Applied Psychology*, *56*, 417–427.

Williams, R. M., Davis, M. C., & Millsap, R. E. (2002). Development of the Cognitive Processing of Trauma Scale. *Clinical Psychology and Psychotherapy*, *9*, 349–360.

Wood, W., & Conway, M. (2006). Subjective impact, meaning making, and current and recalled emotions for self-defining memories. *Journal of Personality*, *74*, 811–845.

Vallacher, R. R., & Wegner, D. M. (1987). What do people think they're doing? Action identification and human behavior. *Psychological Review*, *94*, 3–15.