

Using the biographical grid method to explore parental grief following the death of a child



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Abstract: A child's death is regarded as among the most traumatic, incomprehensible and devastating of losses, with the potential to precipitate a crisis of meaning for bereaved parents. While complications in grieving are a significant possibility, bereaved parents can also respond in very constructive and adaptive ways to the death of a child. Creative and ethically sensitive assessment methods are needed to capture the diversity and complexity of parental grief responses. This article uses a case example approach to explain the biographical grid method (BGM), a constructivist-narrative model for assessment, and its use in the exploration of parental grief responses to the death of a child.

Keywords: parent, bereavement, biographical grid, constructivist-narrative, meaning-making

In western society, the death of a child is commonly considered to defy the natural order of life and can precipitate a crisis of meaning for the bereaved parent (Wheeler, 2001). In the words of Rubin and Malkinson (2001, p.219): 'The impetus for living things to reproduce and create offspring who will survive them is so basic to life that it is one of the fundamental truths of our world, like gravity or the sun.'

Because of the multidimensional nature of grief, many bereaved parents experience the loss of their child on many levels (Jacobs *et al*, 1987/88). In particular, they face the loss of their identity as a parent caring for and protecting their child (Rando, 1991), the loss of previously held assumptions about how the world is meant to be (Rubin & Malkinson, 2001), the loss of their hopes and dreams for who their child was to become (Arnold & Gemma, 1994), and the loss of a future in terms of the sense of continuity that was intimately connected with their child living on past their own death (De Vries, Lana & Falck, 1994).

In addition, some parents remain perpetually locked in a struggle to make sense of why their child died – a struggle that often ends with the recognition that their child's death

remains senseless (Davis *et al*, 2000). Furthermore, while many bereaved parents find solace in developing an ongoing (symbolic) relationship with their deceased child (Foster *et al*, 2011; Klass, 2001), the emotional pain associated with their child's physical absence may never be healed (Brice, 1991). Finally, despite the lessening of most parents' grief with the passing of time (Feigelman, Jordan, & Gorman, 2008/2009; Kreicbergs, 2005), many experience a grieving trajectory that is lifelong (Arnold & Gemma, 2008). For these parents, a permanent sadness, or a kind of chronic sorrow (Teel, 1991), can persist for the rest of their lives.

However, alongside the pain, sorrow and devastation that can accompany the death of a child, many parents also report finding new meaning in life, or experiencing personal growth as a consequence of their struggle with grief (Barrera *et al*, 2009; Braun & Berg, 1994; Miles & Crandall, 1983; Rosenblatt, 2000; Schaefer & Moos, 2001; Talbot, 2002). The term post-traumatic growth (PTG) has frequently been used to describe these and other positive psychological changes experienced by individuals in response to stressful and traumatic life events (Calhoun & Tedeschi, 2006), including bereavement (Calhoun *et al*, 2010).

Despite the centrality of this concept within the trauma and bereavement literature, some researchers have argued that defining growth as ‘positive psychological change’ (Tedeschi & Calhoun, 2004, p.1) fails to account for other adaptive responses to major life events that do not carry this positive valence (McMillen, 2004). In particular, many reports of personal growth have been shown to be characterised by both positive and negative (Wortman, 2004), neutral (Harvey, Barnett, & Overstreet, 2004), existential (Yalom & Lieberman, 1991), paradoxical (Calhoun & Tedeschi, 1998) and other qualities that are considered adaptive or meaningful by those who experience them.

Based on these findings, it is increasingly recognised that many of the adaptive changes reported by individuals in the wake of major trauma/loss events are ‘complex [and] more sophisticated, but not necessarily unambivalently positive’ in their quality (Neimeyer, 2006a, p.239). As such, some researchers have questioned the exclusive use of unipolar rating scales (for example the Post-traumatic Growth Inventory (Tedeschi & Calhoun, 1996)) to measure adaptive responses to trauma/loss events, when these are designed to capture only positive dimensions of change (Linley & Joseph, 2004; Wortman, 2004).

In seeking to understand the diversity and complexity of bereavement responses in general (Shuchter & Zisook, 1993) and parental grief responses to the death of a child in particular (Arnold, Gemma & Cushman, 2005), many bereavement researchers have embraced the concept of ‘meaning-making’ as central to understanding why bereaved individuals respond in these ways (Gillies & Neimeyer, 2006). While the concept of ‘meaning’ is difficult to define and has been used in the bereavement literature to describe very different phenomena (Davis *et al*, 2000; Jannoff-Bulman & Frantz, 1997; Wheeler, 2001), finding meaning or making sense of a loved one’s death is ‘defined generally as finding some degree of coherence, orderliness, predictability, purpose or value in what has happened’ (Gamino, Hogan & Sewell, 2002, pp.793–794). In line with this definition, one theoretical perspective that has made an important contribution to the development of meaning-making frameworks for understanding responses to trauma/loss events is constructivist and narrative theory (Neimeyer, 2001).

Prior research has demonstrated the potential of constructivist/narrative perspectives and their associated research methods in elucidating some of the complexity of individual responses to loss (Gamino & Sewell, 2004; Williams *et al*, 1998). In a recent study examining maternal bereavement following the death of a child from cancer, Gerrish, Steed and Neimeyer (2010) used a constructivist and narrative-based assessment technique – the Biographical Grid Method (BGM) – to assess meaning-making processes and outcomes (adaptive and otherwise) in

a pilot sample of three bereaved mothers. It was found that the BGM offered a promising research tool for assessing the complex ways (both adaptive and otherwise) in which these mothers had responded to their loss.

This article examines one mother’s BGM results in order to illustrate some of the complexities of her grief response. The mother completed the BGM as part of a larger study of 13 mothers that is currently in progress. However, before presenting her case example, the article will first summarise how constructivist/narrative perspectives understand the human quest to find meaning in the wake of major trauma/loss events. Next, it will briefly look at how these theories approach issues of assessment and measurement in the field of grief and loss. Finally, it will outline an overview of the BGM as a technique for assessing individual responses to trauma/loss events.

Conceptualisations of loss

Constructivist and narrative perspectives understand responses to loss in terms of how they impact on a person’s self-narrative. This is defined as the ‘life story one both enacts and expresses that gives a sense of coherence to one’s identity over time’ (Neimeyer, 2004, p.14). Similar to the ‘assumptive worldviews’ described by cognitive/trauma theorists (Parkes, 2009; Janoff-Bulman, 1992), self-narratives represent the meaning-making systems that individuals develop to enable them to act and respond with some degree of predictability to life experiences (Gillies & Neimeyer, 2006). However, instead of the ‘schemas’ or ‘assumptions’ described in cognitive/trauma models, self-narratives are represented by systems of ‘personal constructs’ – defined by Kelly (1955) as bipolar mental representations that individuals develop in order to make sense of (give meaning to) their existence (eg. success – failure). Kelly argued that personal constructs are bipolar because individuals tended to attribute meaning to things and events ‘by placing them in relation to other things and events, by putting them in a context with other phenomena’ (Fromm, 2004, p.12).

According to constructivist theories of loss, when someone dies, it is how the death impacts on a person’s self-narrative and the personal constructs that underpin it that determine the course and outcome of their grieving process (Neimeyer, 2006a). In particular, some deaths are experienced as consistent with the bereaved person’s self-narrative, thereby maintaining coherence in their self-narrative. In such cases the person is able to assimilate the loss into their self-narrative using pre-existing constructs that meaningfully account for the loss (Neimeyer, Keese & Fortner, 2000). For example, in their study of the grieving process of mothers who experienced the death of a child, Braun and Berg (1994) found that some mothers’ success in restoring meaning after the death ‘was clearly linked to the prior existence of a meaning structure that could account

for and “place” the child’s death’ (p.105). In particular, one mother in their study made reference to her strong beliefs in an afterlife, which included the view that her child continued to exist in heaven under the care of God, and that she had no control over the decision God had made to take the child’s life. While this mother experienced the death of her child as distressing on one level, she was able to assimilate it within a meaningful narrative structure.

However, other deaths are so radically inconsistent with the bereaved person’s self-narrative that they shatter both the coherence of their plot structure for life and the underlying themes/constructs central to defining their self-narrative, resulting in a traumatic bereavement (Neimeyer, 2004). Research suggests that the death of a child is likely to lead to dramatic changes in the self-narratives/assumptive worlds of bereaved parents (Braun & Berg, 1994; Davis *et al*, 2000; Davis, Wohl & Verberg, 2007; Matthews & Marwit, 2003/2004; Rando, 1993). In such cases, many bereaved parents are confronted with the task of revising and possibly reconstructing all or part of their self-narratives so they again ‘make sense’ and can provide meaning. However such adaptive reconstruction of identity does not always occur, and resulting complications in the grieving process may ensue (Neimeyer, Prigerson & Davies, 2002).

Constructivist approaches to measurement

Constructivist theorists support the view that qualitative inquiries that explore the phenomenology of the loss reflect more accurately the lived experience of the grieving person (Caverhill, 2002). When seeking to assess adaptive responses to trauma/loss events, constructivist and narrative researchers are careful not to limit the conceptual boundaries of how they think about and define these types of responses (Pals & McAdams, 2004). Rather, these approaches typically invite the person to devise what is essentially their own method for assessing their responses to such events (Neimeyer, 2006b). While these methods can vary considerably, many involve asking the participants to reflect on their own life stories (including traumatic events) in order to elicit core meaning constructions from those experiences (Neimeyer, 2004). It is argued that subsequent examination of any changes to these constructs, and how these changes are rated by the individual (positive, negative or otherwise), has the potential to reveal more than conventional psychometric measures about the unique nature of the person’s responses to such events (Neimeyer, 2006b).

In addition, of particular importance when conducting ethically sensitive research with vulnerable participants such as bereaved parents, direct questioning about ‘positive changes’ or ‘benefits found’ in the wake of a child’s death (ie. via structured interview formats) have been found to

cause confusion and even to offend some parents (Keesee, Currier & Neimeyer, 2008). As Calhoun & Tedeschi (2001) state: ‘The very idea that anything that was in any way positive could have emerged from the loss may be repellent to some people’ (p.167). One advantage of using constructivist and narrative-based techniques is that they invite the bereaved parent to use their own formulations, definitions, and language to explore adaptive responses to their loss (as well as possible complications in their grieving). In other words, the adaptive and/or problematic effects of their loss on the bereaved parent are defined and described according to the parent’s (not the researcher’s) understanding of their response.

One constructivist/narrative technique that has demonstrated potential for effectively and sensitively elucidating some of the complexity of individuals’ responses to traumatic events (Neimeyer & Stewart, 1996) and to the death of a loved one (Neimeyer Keesee & Fortner, 2000) is the BGM. The following section describes this assessment tool in detail.

The biographical grid method (BGM)

The BGM (Neimeyer, 1985; Neimeyer, 1993; Neimeyer & Stewart, 1996) is a contemporary adaptation of the repertory grid technique originally devised by George Kelly (1955). In the context of bereavement, it can be used to assess how an individual’s personal constructs and overall self-narrative has been affected by their loss. Similar to repertory grids, biographical grids contain elements – that is, things or experiences to be construed. However, rather than representing significant people/figures in the person’s life (as in the original Role Construct Repertory Grid developed by Kelly (1955)), the elements reflect facets of their self/identity that have been shaped and defined by their major life events/experiences (Winter, 1992).

The BGM begins with a structured interview, which proceeds in three stages. First, the person is asked to develop a personal timeline of significant life events across their lifespan that ‘say something about who they are’ at that point in time. One of these events will be the trauma/loss under investigation. These autobiographical memories, or ‘situated self-identities’, become ‘self-elements’ for the person’s grid that plot the development of their identity across their life span (Neimeyer, 1985). At this stage it can be useful to include two other self-elements in the person’s timeline: the ‘present-self’ – to assess the perceived continuity of their construal of self in the past into the present, and the ‘ideal-self’ – to assess the degree of positivity or negativity of the other self-elements on the person’s grid (Neimeyer & Stewart, 1996).

In the second stage of the BGM, personal constructs are elicited. This involves randomly presenting the person with three of their self-elements (triads) with the instruction: ‘How are two of these [self-elements] alike in some

important way and different from the third?’ (Neimeyer & Stewart, 1996, p.369). The similarity between the two self-elements becomes the emergent pole; how they differ becomes the contrast or implicit pole (Kelly, 1955). For example, the person might describe two self-elements as reflecting ‘confidence’ (similarity) and the third as reflecting ‘lack of confidence’ (contrast), generating a ‘confidence – lacking confidence’ personal construct. In addition, to explore possible dimensions to the person’s construct of self over time, they can also be asked to assign a valence to each of their construct poles (eg. positive, negative, neutral, positive and negative) to reflect their unique meanings (Gerrish, Steed & Neimeyer, 2010). While the ‘ideal-self’ is still used to assess the positivity or negativity of construct poles, allowing the person to elaborate on the meanings of their constructs in this way allows a more in-depth assessment of the potential complexity in their construal patterns.

In the third and final stage of the BGM, the person rates all their self-elements on all their personal constructs using a Likert-type scale (eg. 1–7). This generates a matrix of ratings that can be analysed and interpreted at both content and structural levels. In terms of the latter, a range of statistical procedures (eg. principal component analysis) can be used to examine the degree of integration versus fragmentation among the self-elements rated on a grid, the relationships (ie. correlations) between specific constructs or self-elements, and a range of other structural features (see Fransella, Bell & Bannister, 2004 for a detailed review of these procedures).

At the content level, grid data can be analysed and interpreted in a qualitative or impressionistic fashion (Neimeyer, 1993). According to Neimeyer and Stewart (1996), one simple way to interpret a completed grid is to visually scan with a person how they have used their personal constructs to construe their identity in relation to each of their major life events (ie. their self-elements) and to discuss significant patterns with them (eg. their construal of self at the time of a trauma/loss event). However, a range of other guidelines are available for the qualitative analysis and interpretation of grid results (see Jancowicz, 2004; Neimeyer, 1993).

Case study

To demonstrate how qualitative-based grid interpretations can be made using data from biographical grids, the following case example of a bereaved mother is provided. Because of space constraints, only a few illustrative observations of the content of this mother’s biographical grid are made (see Gerrish, Steed & Neimeyer, 2010 for a more detailed analysis of bereaved mothers’ biographical grids). This report highlights in particular the complex ways that this mother used some of her personal constructs to construe her identity across time, and particularly when

her child died. This mother’s completed BGM is outlined in Tables 1 and 2.

Looking first at how this mother construed her identity at the time of her child’s death (ie. self-element 7), this was evidently in extreme ways (ie. a rating of 7) in relation to the construct poles of sadness, negativity, and fearful/scared. However, she had also construed her identity in a balanced way (ie. a rating of 4) between the construct poles of connected with people and isolated. Importantly, this construal style was consistent with her ideal construal of self (self-element 11). When asked to elaborate on this finding she explained that when her child died she had benefited from talking with people about her loss (ie. connected with people construct pole) but also found it helpful to withdraw from people and be totally on her own (ie. isolated construct pole).

When asked why she had ascribed a negative quality to her isolation construct pole, she explained that being on her own gave her the space she needed to grieve (the positive aspect), but it also represented a time when she returned to her deepest and most painful grief (the negative aspect). Her construal style in this regard was consistent with what Calhoun and Tedeschi (1998) report as an adaptive and paradoxical type of PTG – the recognition and acceptance that at times we need the help of others, but that ultimately only we can manage our grief.

In examining how her construct ‘connected with people – isolated’ had shaped her identity development more broadly across her life span, it was evident she had used this construct in a balanced way (ie. a rating of 4) to construe her identity across almost all her major life events. This construct had helped her to assimilate most of the major life events of her past – including the death of her child – in a way that was adaptive for her identity development (ie. consistent with her ideal self). Furthermore, this construct’s adaptive function was continuing into the present, in terms of her current construal of self (self-element 10). In summary, it seemed to represent a powerful construct for her in terms of its integrating potential for her broader self-narrative.

In turning to another, similar personal construct, connected with family – lonely, the mother had also used this construct in an equal or balanced way (ie. a rating of 4) to construe her identity when her child died. However, this construal style was not consistent with her ideal construal of self. When asked to elaborate on this finding, she explained that when her child died she had sometimes received the level of support she had wanted from her family, but had also been left with the negative experience of feeling lonely. For this mother it seemed that the support she received when her child died was not optimal for her needs, potentially leaving her vulnerable to the complications in grieving that can occur when significant others fail to respond adequately and empathically to the grieving person (Doka, 1989).

Table 1: Biographical grid – case example

Construct pole		Self-elements											Construct pole
		1	2	3	4	5	6	7	8	9	10	11	
C1	Happy (+)	6	1	1	7	1	7	7	4	4	4	1	Sad (-)
C2	Positive (+)	7	1	3	7	1	7	7	4	1	4	1	Negative (-)
C3	Connected with people (+)	5	4	4	4	1	4	4	4	4	4	4	Isolated (+/-)
C4	Confident (+)	6	4	4	5	1	7	7	4	1	3	4	Fear/Scared (-)
C5	Beginnings (+/-)	0	1	1	7	1	5	7	4	1	4	4	Endings (+/-)
C6	Relieved (+)	7	0	1	6	1	7	4	0	0	3	3	Angry (+/-)
C7	Proud (+)	7	1	1	0	1	0	0	0	1	1	1	Humiliated (-)
C8	Expected (+/-)	3	0	1	7	1	7	1	2	1	0	0	Shocked/Unexpected(-)
C9	Strong (+)	6	4	4	4	1	4	4	4	1	4	4	Vulnerable (+/-)
C10	Connected with family (+)	6	4	3	1	1	4	4	4	2	4	1	Lonely (-)

NB. Self-elements 1–11 described below. C = Construct; valence of construct poles in parentheses. Grid ratings scale is from 1–7. Rating of zero = lack of relevance of each theme/pole on this element/event (ie. 'Neither of these themes applies to me here'). Rating of 4 = equal relevance of each theme/pole on this element/event (ie. 'I am a balance of both these themes here'). Highlighting and italics added as a reference for this article. All identifying information for this mother has been changed to protect her privacy.

Table 2: Valance of self-elements

Self-elements (SE)			Valence of self-elements
SE1	Age 17	Me as I was when I got hit by someone at school	Negative
SE2	Age 22	Me as I was meeting my husband and getting married	Positive
SE3	Age 24	Me as I was with the birth of our son	Positive
SE4	Age 36	Me as I was when my mother died	Negative
SE5	Age 42	Me as I was with the birth of first granddaughter	Positive
SE6	Age 46	Me as I was when out son was diagnosed with leukaemia	Negative
SE7	Age 48	Me as I was when my son died from leukaemia	Negative
SE8	Age 51	Me as I was moving interstate	Positive
SE9	Age 53	Me as I was when my son got married	Positive
SE10	Age 54	Me as I am now (present-self)	-
SE11	Age 54	Me as I would ideally like to be (ideal-self)	-

Further examination of her grid results revealed that she had construed her identity at the time her child died in a balanced way (ie. a rating of 4) between the construct poles of strong and vulnerable. In other words, when her child died, she construed herself as strong and vulnerable at the same time. When asked about the dual meanings she had ascribed to her vulnerable construct pole, she explained that feeling vulnerable was difficult in the sense that she felt emotionally exposed (ie. the negative aspect) but she also felt that having these feelings was part of being human (ie. the positive aspect).

Importantly, how this mother had used this construct in a balanced way to construe her identity at the time of her child's death was consistent with how she ideally sought to construe her identity (ie. her ideal-self). Consequently, it again represented a construct that had assisted her to adaptively assimilate her child's death into her overall self-narrative. Furthermore, it was evident she had used this construct consistently to adaptively construe her identity

across most of her other major life events. Finally, this construct's adaptive function was continuing in the present, in terms of her present construal of self (self-element 10). In summary, the powerful assimilating potential of this construct and the positive implications of this for the integrity of her broader self-narrative were evident.

Discussion

This article has reviewed the BGM – a constructivist/narrative technique – in terms of its potential to effectively and sensitively explore bereaved parents' responses to the death of a child. A case example of a bereaved mother is used to illustrate how the BGM is able to capture some of the complex ways this mother had construed her identity in relation to her child's death. While psychometric measures such as the Post-traumatic Growth Inventory (PTGI) (Tedeschi & Calhoun, 1996) have been used to assess PTG in bereaved parents (Riley *et al.*, 2007), this type of scale

would not have captured the complex dimensions to this mother's adaptive grief responses. In particular, measures such as the PTGI only assess positive changes in response to a crisis. In the case example presented in this paper, personal constructs with co-existing positive and negative qualities had, in many cases, assisted this mother to assimilate her child's death into her broader self-narrative.

In addition, while sensitivity to ethical issues is important when conducting research with any bereaved individual (Stroebe, Stroebe, & Schut, 2003), these considerations assume additional importance when undertaking research with bereaved parents (Dyregrov, 2004; Kreicbergs, 2005). In fulfilling their ethical obligations, bereavement researchers must pay as much attention to the process of collecting the data as they do to ensuring it meets their research objectives (Michalski, Vanderwerker & Prigerson, 2006/2007). In this regard, the BGM was found to encourage an open and collaborative exchange between the researcher and the bereaved mother concerned, resulting in a positive research experience for her and the generation of informative data about her grief responses.

Finally, this article has focused on the application of the BGM as a research tool. However it can also be used in clinical settings with individuals who have experienced trauma/loss events (Neimeyer, 2006b; Neimeyer *et al*, 2000; Neimeyer & Stewart, 1996). Finally, despite the advantages of using the BGM to explore parental grief, it has its limitations. In particular, although biographical grids can be standardised (eg. by using self-elements and personal constructs chosen by the researcher) for research purposes (Neimeyer & Stewart, 1996), there is no accepted method for comparing grid results across bereaved individuals. In addition, only a limited number of studies have used the BGM with bereaved individuals. Consequently, while the results for this mother and the data currently emerging from the larger study of 13 bereaved mothers are encouraging, they are preliminary and require replication with larger samples.

Conclusion

Using a case study example, this article has sought to demonstrate how the biographical grid method can be used to highlight more sensitively than conventional scales the complexities of a bereaved mother's grief response to the death of her child. The bipolarity of the constructs accommodates the apparent contradiction between the mother's feelings of connectedness with family and friends and loneliness and isolation, and of strength and vulnerability.

More data will shortly emerge from a larger study of the use of this method with bereaved mothers. Consequently these findings can be seen only as preliminary, and cannot be generalised to the wider population. ■

- Arnold JH, Gemma PB (1994). *A child dies: a portrait of family grief* (2nd ed). Philadelphia, Pennsylvania: The Charles Press.
- Arnold J, Gemma PB (2008). The continuing process of parental grief. *Death Studies* 32(7) 658–673.
- Arnold JH, Gemma PB, Cushman LF (2005). Exploring parental grief: combining quantitative and qualitative measures. *Archives of Psychiatric Nursing* 19(6) 245–255.
- Barrera M, O'Connor K, Mammone D'Agostino N, Spencer L, Nicholas D, Jovcevska V *et al* (2009). Early parental adjustment and bereavement after childhood cancer death. *Death Studies* 33(6) 497–520.
- Braun MJ, Berg DH (1994). Meaning reconstruction in the experience of parental bereavement. *Death Studies* 18 105–129.
- Brice CW (1991). What forever means: an empirical existential-phenomenological investigation of maternal mourning. *Journal of Phenomenological Psychology* 22(1) 16–38.
- Calhoun LG, Tedeschi RG (1998). Beyond recovery from trauma: implications for clinical practice and research. *Journal of Social Issues* 54 357–371.
- Calhoun LG, Tedeschi RG (2001). Post-traumatic growth: the positive lessons of loss. In: RA Neimeyer (ed). *Meaning reconstruction and the experience of loss*. Washington, DC: American Psychological Association (pp.157–172).
- Calhoun LG, Tedeschi RG (2006). The foundations of posttraumatic growth: an expanded framework. In: LG Calhoun, RG Tedeschi (eds). *Handbook of post-traumatic growth: research and practice*. Mahwah, NJ: Lawrence Erlbaum Associates Publishers (pp.1–23).
- Calhoun LG, Tedeschi RG, Cann A, Hanks EA (2010). Positive outcomes following bereavement: paths to post-traumatic growth. *Psychologica Belgica* 50(1–2) 125–143.
- Caverhill PA (2002). Qualitative research in thanatology. *Death Studies* 26 195–207.
- Davis CG, Wohl MJA, Verberg N (2007). Profiles of posttraumatic growth following an unjust loss. *Death Studies* 31 693–712.
- Davis CG, Wortman CB, Lehman DR, Silver RC (2000). Searching for meaning in loss: are clinical assumptions correct? *Death Studies* 24(6) 497–540.
- De Vries B, Lana RD, Falck VT (1994). Parental bereavement over the life course: a theoretical intersection and empirical review. *Omega* 29(10) 47–69.
- Dyregrov K (2004). Bereaved parents' experience of research participation. *Social Science & Medicine* 58 391–400.
- Doka KJ (1989). *Disenfranchised grief: recognising hidden sorrow*. Lexington, Mass: Lexington Books.
- Foster TL, Gilmer MJ, Davies B, Dietrich MS, Barrera M, Fairclough DL *et al* (2011). Comparison of continuing bonds reported by parents and siblings after a child's death from cancer. *Death Studies* 35(5) 420–440.
- Feigelman W, Jordan JR, Gorman BS (2008–2009). How they died, time since loss, and bereavement outcomes. *Omega* 58(4) 251–273.
- Fransella F, Bell R, Bannister D (2004). *A manual for repertory grid technique* (2nd ed). Chichester, UK: Wiley.
- Fromm M (2004). *The repertory grid interview*. New York: Waxman.
- Gamino LA, Hogan NS, Sewell KW (2002). Feeling the absence: a content analysis from the Scott & White grief study. *Death Studies* 26(10) 793–813.
- Gamino LA, Sewell KW (2004). Meaning constructs as predictors of bereavement adjustment: a report from the Scott & White grief study. *Death Studies* 28(5) 397–421.
- Gerrish NJ, Steed LG, Neimeyer RA (2010). Meaning reconstruction in bereaved mothers: a pilot study using the biographical grid method.

- Journal of Constructivist Psychology* 23(2) 118–142.
- Gillies J, Neimeyer RA (2006). Loss, grief, and the search for significance: toward a model of meaning reconstruction in bereavement. *Journal of Constructivist Psychology* 19 31–65.
- Harvey JH, Barnett K, Overstreet A (2004). Trauma growth and other outcomes attendant to loss. *Psychological Inquiry* 15(1) 26–29.
- Jacobs SC, Kosten TR, Kasl SV, Ostfeld AM, Berkman L, Charpentier P (1987–88). Attachment theory and multiple dimensions of grief. *Omega* 18(1) 41–52.
- Jankowicz AD (2004). *The easy guide to repertory grids*. Chichester, UK: John Wiley & Sons.
- Janoff-Bulman R (1992). *Shattered assumptions: towards a new psychology of trauma*. New York: Free Press.
- Janoff-Bulman R, Frantz CM (1997). The impact of trauma on meaning: from meaningless world to meaningful life. In: M Power, CR Brewin (eds). *The transformation of meaning in psychological therapies*. London: John Wiley & Sons Ltd (pp.91–106).
- Kelly GA (1955). *The psychology of personal constructs (vols I & II)*. New York: Norton.
- Keesee NJ, Currier JM, Neimeyer RA (2008). Predictors of grief following the death of one's child: the contribution of finding meaning. *Journal of Clinical Psychology* 64(10) 1145–1163.
- Klass D (2001). The inner representation of the dead child in the psychic and social narratives of bereaved parents. In: RA Neimeyer (ed). *Meaning reconstruction and the experience of loss*. Washington DC: American Psychological Association (pp.77–94).
- Kreicbergs U (2005). Parental experiences of losing a child to cancer: a nationwide survey. *Psychotherapy in Australia* 12(1) 12–19.
- Linley PA, Joseph S (2004). Positive change following trauma and adversity: a review. *Journal of Traumatic Stress* 17(1) 11–21.
- Matthews LT, Marwit SJ (2003–2004). Examining the assumptive world views of parents bereaved by accident, murder and illness. *Omega* 48(2) 115–136.
- McMillen JC (2004). Posttraumatic growth: what's it all about? *Psychological Inquiry* 15(1) 48–52.
- Michalski MJ, Vanderwerker LC, Prigerson HG (2006–2007). Assessing grief and bereavement: observations from the field. *Omega* 54(2) 91–106.
- Miles MS, Crandall EKB (1983). The search for meaning and its potential for affecting growth in bereaved parents. *Health Values: Achieving High Level Wellness* 7(1) 19–23.
- Neimeyer RA (1985). Personal constructs in clinical practice. In: PC Kendall (ed). *Advances in cognitive-behavioral research and therapy vol. 4* (pp.275–339). New York: Academic Press.
- Neimeyer RA (1993). Constructivist approaches to the measurement of meaning. In: GJ Neimeyer (ed). *Constructivist assessment*. Newbury Park, CA: Sage (pp. 58–103).
- Neimeyer RA (2001). *Meaning reconstruction and the experience of loss*. Washington, DC: American Psychological Association.
- Neimeyer RA (2004). Fostering posttraumatic growth: a narrative elaboration. *Psychological Inquiry* 15(1) 53–59.
- Neimeyer RA (2006a). Widowhood, grief and the quest for meaning: a narrative perspective on resilience. In: D Carr, RM Nesse, CB Wortman (eds). *Late life widowhood in the United States*. New York: Springer (pp. 227–252).
- Neimeyer RA (2006b). Narrating the dialogical self: toward an expanded toolbox for the counselling psychologist. *Counselling Psychology Quarterly* 19(1) 105–120.
- Neimeyer RA, Keesee, NJ, Fortner BV (2000). Loss and meaning reconstruction: propositions and procedures. In: R Malkinson, SS Rubin, E Witztum (eds). *Traumatic and nontraumatic loss and bereavement: clinical theory and practice*. Madison CT: Psychosocial Press (pp. 197–230).
- Neimeyer RA, Prigerson HG, Davies B (2002). Mourning and meaning. *American Behavioral Scientist* 46(2) 235–251.
- Neimeyer RA, Stewart AE (1996). Trauma, healing, and the narrative emplotment of loss. *Families in Society: The Journal of Contemporary Human Services* 77(6) 360–375.
- Pals JL, McAdams DP (2004). The transformed self: a narrative understanding of posttraumatic growth. *Psychological Inquiry* 15(1) 65–69.
- Parkes CM (2009). *Love and loss: the roots of grief and its complications*. New York: Routledge.
- Rando TA (1991). *How to go on living when someone you love dies*. New York: Bantam Books.
- Rando TA (1993). *Treatment of complicated mourning*. Champaign, IL: Research Press.
- Riley LP, LaMontagne LL, Hepworth JT, Murphy BA (2007). Parental grief responses and personal growth following the death of a child. *Death Studies* 31 277–279.
- Rosenblatt PC (2000). *Parent grief: narratives of loss and relationship*. Philadelphia: Brunner/Mazel.
- Rubin SS, Malkinson R (2001). Parental response to child loss across the life cycle: clinical and research perspectives. In: MS Stroebe, RO Hansson, W Stroebe, H Schut (eds). *Handbook of bereavement research: consequences, coping and care*. Washington, DC: American Psychological Association (pp. 219–240).
- Shuchter SR, Zisook S (1993). The course of normal grief. In: MS Stroebe, W Stroebe, RO Hansson (eds). *Handbook of bereavement: theory, research and intervention*. New York: Cambridge University Press (pp.23–43).
- Shaefer JA, Moos RH (2001). Bereavement experiences and personal growth. In: MS Stroebe, RO Hansson, W Stroebe, H Schut (eds). *Handbook of bereavement research: consequences, coping and care*. Washington, DC: American Psychological Association (pp. 415–425).
- Stroebe M, Stroebe W, Schut H (2003). Bereavement research: methodological issues and ethical concerns. *Palliative Medicine* 17 235–240.
- Talbot K (2002). *What forever means after the death of a child: transcending the trauma, living with the loss*. New York: Brunner-Routledge.
- Tedeschi RG, Calhoun LG (1996). The post-traumatic growth inventory: measuring the positive legacy of trauma. *Journal of Traumatic Stress* 9(3) 455–471.
- Tedeschi RC, Calhoun LG (2004). Post-traumatic growth: conceptual foundations and empirical evidence. *Psychological Inquiry* 15(1) 1–18.
- Teel CS (1991). Chronic sorrow: analysis of the concept. *Journal of Advanced Nursing*, 16 1311–1319.
- Wheeler I (2001). Parental bereavement: the crisis of meaning. *Death Studies* 25 51–66.
- Williams AM, Gamino LA, Sewell KW, Easterling LW, Stirman LS (1998). A content and comparative analysis of loss in adaptive and maladaptive grievers. *Journal of Personal and Interpersonal Loss* 3 349–368.
- Winter DA (1992). *Personal construct psychology in clinical practice*. London: Routledge.
- Wortman CB (2004). Posttraumatic growth: progress and problems. *Psychological Inquiry* 15(1) 81–90.
- Yalom ID, Lieberman A (1991). Bereavement and heightened existential awareness. *Psychiatry* 54(4) 334–345.