

Suicide Loss as a Crisis of Meaning: Basic Concepts

Invited lecture · Robert A. Neimeyer

*Robert A. Neimeyer, PhD, is Professor Emeritus of the Department of Psychology, University of Memphis, and maintains an active consulting and coaching practice. He also directs the Portland Institute for Loss and Transition, which provides online training internationally in grief therapy. Neimeyer has published 35 books, including *New Techniques of Grief Therapy: Bereavement and Beyond* and *The Handbook of Grief Therapies*, and serves as Editor of the journal *Death Studies*. The author of over 600 articles and book chapters and a frequent workshop presenter, he is currently working to advance a more adequate theory of grieving as a meaning-making process. Neimeyer served as President of the Association for Death Education and Counseling (ADEC) and Chair of the International Work Group for Death, Dying, & Bereavement. In recognition of his scholarly contributions, he has been granted the Eminent Faculty Award by the University of Memphis, made a Fellow of the Clinical Psychology Division of the American Psychological Association, and given Lifetime Achievement Awards by both ADEC and the International Network on Personal Meaning.*

Abstract. Research suggests that much of the complicated and prolonged grief that frequently follows bereavement by suicide is mediated by its assault on the survivor's world of meaning, and the attendant struggle to make sense of (a) the relationship to the deceased, (b) the death itself, and (c) the survivor's own identity in its aftermath. Viewing this struggle through the lens of the Tripartite Model of Meaning Reconstruction in Loss, we will first consider common obstacles to integrating such loss adaptively within survivors' meaning systems, and the implications this carries for the construction of the therapeutic relationship as well as specific interventions to address each impasse. Paradoxically, however, the same effort after meaning can be a catalyst for posttraumatic growth, which studies suggest is facilitated by identifiable psychological and social conditions. Illustrating these concepts with brief client videos, we conclude with general guidelines for conducting therapy with this traumatically bereaved population.