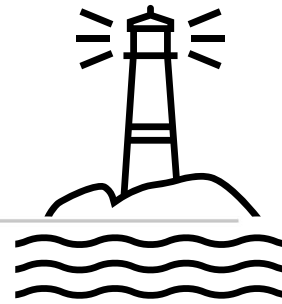


IN PURSUIT OF *YOUR CURE*®

Meaning-Centered Grief Therapy (MCGT)



Wendy G. Lichtenthal, PhD, FT

Director, Center for the Advancement of Bereavement Care

Sylvester Comprehensive Cancer Center

Department of Public Health Sciences, University of Miami Miller School of Medicine



** Please do not circulate these slides without permission of the author.**

© Copyright 2023

@SylvesterCancer



Overview of goals for clinicians working with griever

- Be present, offer support, and help tolerate intense emotions
- Provide a sense of predictability
- Be aware of risk factors for poor bereavement outcomes
- Recognize the multiple presentations of grief
- Be able to manage such expressions of grief with clinical interventions or make appropriate referrals
- Validate and respond to one's own reactions to loss

Influential Grief and Bereavement Theories

Contemporary views of grief

- Stages of grief overlap and do not occur in a universal set sequence
- Intense emotions may wax and wane, especially in the early phases of bereavement
- Bonds to the deceased continue and are in most cases adaptive (continuing bonds theory)
- Grief may be experienced throughout one's life
- No firm timelines for adaptation have been established, but cultural sanctions may influence the duration of expressions of grief

Attachment Theory

- Attachment is instinctual for safety and security to promote survival
- Internalized working models of attachment (insecure vs. secure) developed in early parent-child relationships shape individuals' responses to separation and loss
- Individuals with insecure attachment styles are at greater risk for separation distress and prolonged grief symptoms
- The centrality and sense of security that the relationship with the deceased offered a griever plays a significant role in their grief response



Experiencing grievers from an attachment lens

Is this child scared or angry?



Remember: fear and anger are often
two sides of the same coin...

When grieving, we can be experienced as:

- Angry
- Entitled
- Severely anxious
- Mistrustful
- Aggressive
- Disinhibited

Dual Process Model of Coping

- Loss-oriented mode involves confrontation with grief and loss
- Restoration-oriented mode involves reengagement in life
- Natural way of adapting to loss involves oscillation between these two modes



Task Model

- To accept the reality of the loss
- To work through the pain of grief
- To adjust to the environment without the deceased
- To emotionally relocate the deceased (transform the relationship) and move forward with life



“Normative” or typical grief

Important: grief does not “resolve”

NORMAL
IS JUST A SETTING ON A
WASHING MACHINE.

- Individuals may experience a reduction in grief symptoms or may learn to co-exist with their grief
- Grief may be especially intense when faced with reminders of one’s loved one, anniversaries, or special occasions
- Resilience is also common

What are the “symptoms” of Prolonged Grief Disorder?

At least 12 months has passed since the death of someone close,

AND

Nearly every day for at least the last month:

- Intense yearning/longing for the deceased person, and/or
- Preoccupation with thoughts or memories of the deceased person (in children and adolescents, preoccupation may focus on the circumstances of the death)

AND

What are the “symptoms” of Prolonged Grief Disorder?

At least 3 of the following symptoms have been present most days to a **clinically significant degree**, nearly every day for at least the last month:

- Identity disruption (e.g., feeling as though part of oneself has died) since the death
- Marked sense of disbelief about the death
- Avoidance of reminders that the person is dead (in children and adolescents, may be characterized by efforts to avoid reminders)
- Intense emotional pain (e.g., anger, bitterness, sorrow) related to the death
- Difficulty reintegrating into one’s relationships and activities after the death (e.g., problems engaging with friends, pursuing interests, or planning for the future)
- Emotional numbness (absence or marked reduction of emotional experience) as a result of the death
- Feeling that life is meaningless as a result of the death
- Intense loneliness as a result of the death.

What are the “symptoms” of Prolonged Grief Disorder?

AND

The present symptoms are causing significant distress or functional impairment, that is, they are debilitating.

Signs of adaptation

- While often profoundly painful, the majority of individuals *adapt* to the loss over time:
 - Able to acknowledge the loss
 - Able to transform their relationship to the deceased
 - Able to reengage in work, leisure, and creative activities
 - Able to maintain and develop personal relationships
 - Able to consider their lives and the future as potentially meaningful and satisfying

Key tenets in supporting adult grievers

- Adopt a non-pathologizing stance
- Offer an empathic, validating presence, bearing witness and holding space
- Provide psychoeducation about grief
- For some, the goal is to provide scaffolding as the griever naturally adapts to their loss
- Others may need more targeted therapeutic techniques to address impairing psychological symptoms, such as anxiety, depression, or prolonged grief disorder (PGD)

EMPOWER

Enhancing & Mobilizing the POtential for Wellness & Emotional Resilience

- Empowers caregivers of critically ill patients at the end-of-life with tools, psychoeducation, and experiential exercises to reduce experiential avoidance in order to prevent prolonged grief and PTSD
- Six ultra-brief (~15- to 20-minute) modules (total time: ~1.5 – 2 hours) **administered flexibly** to accommodate interruptions and crises during the patient's ICU stay
- May be delivered in a single session or 2-3 briefer sessions, with 2 booster calls
- Incorporates evidence-based cognitive-behavioral, acceptance-based, and grief therapy techniques to assist with coping



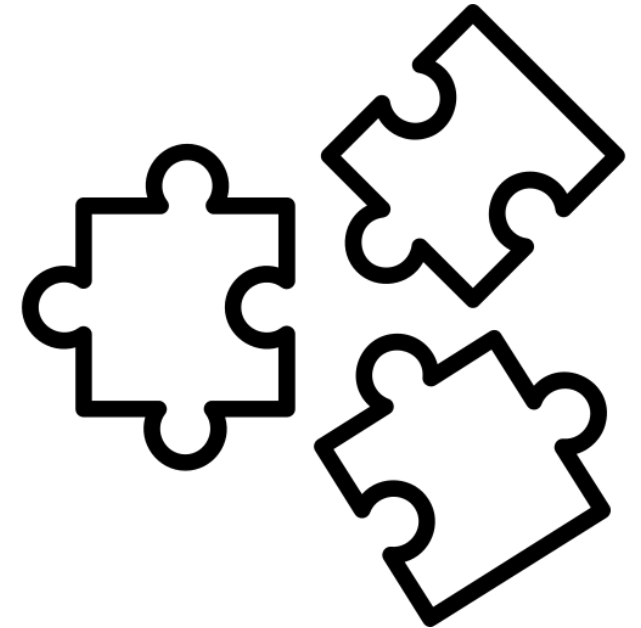
EMPOWER Modules

In ICU/ Telehealth	Delivered in single or multiple sessions	Module 1	Nurturance, Understanding, and Joining
		Module 2	Breathing Retraining, Grounding Exercises, and Mindfulness Meditation
		Module 3	Psychoeducation about Trauma, Grief, and the Cognitive-Behavioral Model
		Module 4	Increasing Acceptance and Sense of Permission to Experience Challenging Emotions
		Module 5	Connecting with the Patient's Voice
		Module 6	Using the EMPOWER Toolbox and Coping Rehearsal
Phone/ Telehealth	2 weeks post- Module 6	Booster Call 1	Check-in and review of psychoeducation and coping skills
Phone/ Telehealth	4 weeks post- Module 6	Booster Call 2	Check-in and review of psychoeducation and coping skills

Meaning-Centered Grief Therapy

Why target meaning after loss?

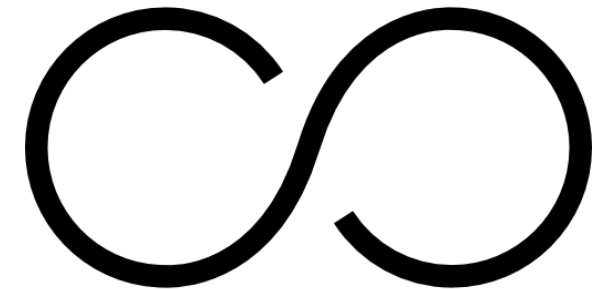
- Loss shatters assumptions about the way the world works
- Loss challenges *meaning-making* -- the processes of both *assimilation*, trying to fit the loss into one's belief system, and *accommodation*, altering of one's beliefs to fit the loss
- Loss challenges to one's *sense* of meaning, threatening their sense of identity and purpose



Meaning-Centered Grief Therapy (MCGT)

Overview

- Adaptation of William Breitbart and colleagues' Meaning-Centered Psychotherapy (MCP) designed for patients with advanced cancer
- Incorporates Viktor Frankl's key concepts, focusing on the ability to choose one's attitude toward suffering
- Assists with connection or reconnection to valued sources of meaning



Sources of Meaning as Lighthouses

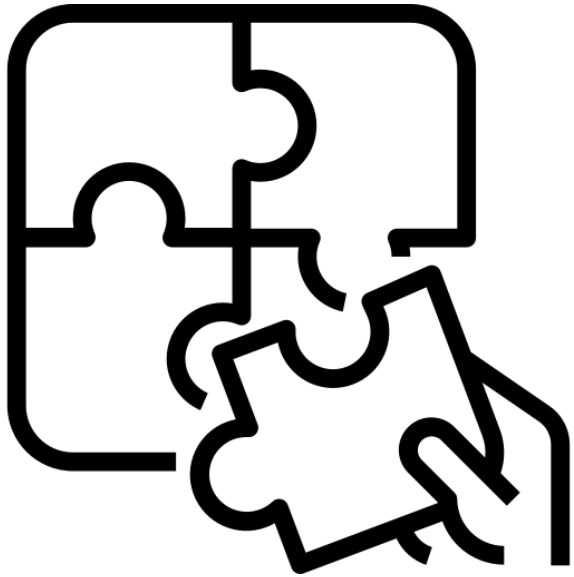
“He who has a why to live for can bear with almost any how.”

~Friedrich Nietzsche

- **Your Story as a Source of Meaning**
 - Connections between the past, present, and future
- **Attitude as a Source of Meaning**
 - Choosing the attitude one takes toward life’s challenges (e.g., loss, mortality)
- **Creating as a Source of Meaning**
 - Actively engaging in life through roles, work, deeds, accomplishments
 - The importance of courage, commitment, and responsibility
- **Experiencing as a Source of Meaning**
 - Connecting to life through relationships, beauty, nature, humor

Meaning-Centered Grief Therapy (MCGT)

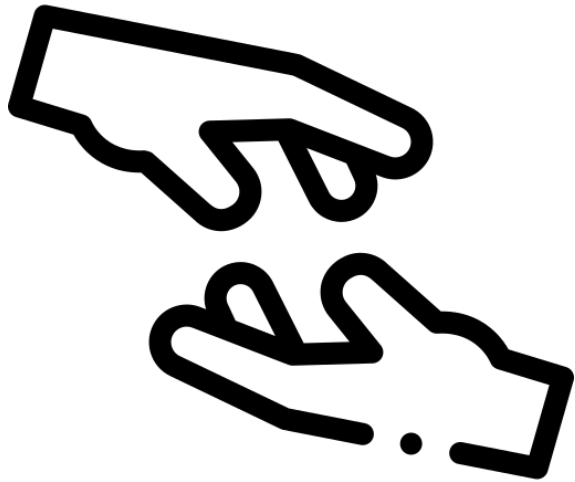
Overview (cont'd)



- Applies Neimeyer's meaning reconstruction to facilitate meaning-making through examination of cognitive schemas
- Incorporates attachment theory and cognitive-behavioral/ schema therapy approaches
- Assists with legacy building and development of the griever's story as well as the deceased's story
- Helps maintain connection to the deceased

Meaning-Centered Grief Therapy (MCGT)

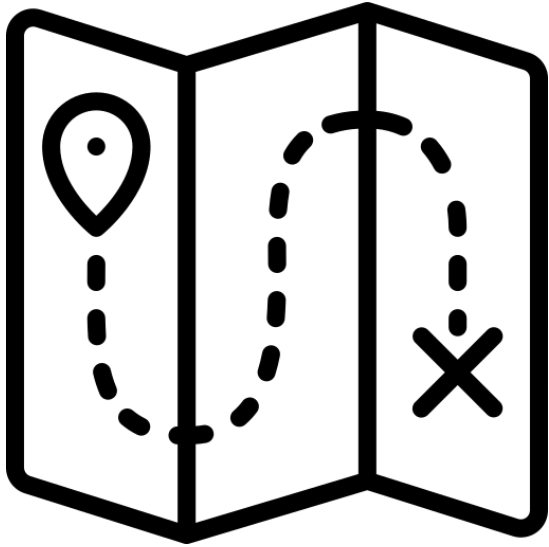
Development



- Initially adapted for parents who lost a child to cancer
- Designed to reduce intensity of debilitating grief symptoms by (paradoxically) helping parents to co-exist with their grief
- Incorporated invaluable feedback from expert bereaved parents and grief

Meaning-Centered Grief Therapy (MCGT)

Approach



- Uses didactics, written responses to reflection questions, discussion, and experiential exercises
- Structure allows systematic uncovering of important meaning-related content while also creating a sense of predictability and a roadmap to assist in navigating intense emotional terrain
- Principle-driven, flexible, and involves substantial provision of support and witness significance to the individual's suffering, respecting that the griever is truly the "expert" in their grief

Core Meaning-Centered Concepts

- 1) Ability to choose one's attitude (i.e., response) in the face of suffering
- 2) Ability to use sources of meaning as “lighthouses” in the distance to transcend suffering
- 3) Ability to construct meaning—of our lives, of events, of circumstances, and of our emotional reactions—and to author our own story and deceased's story
- 4) Ability to maintain a meaningful connection to the deceased

Highlighted throughout Each Session...

- Existing sources of meaning whenever heard
- Griever's ability to tolerate (and thus co-exist with) great pain
- Importance of self-compassion
- Deceased's specialness and unique way they have touched the world
- Strategies for maintaining sense of meaning beyond the end of the intervention, and during difficult times

MCGT Session Overview

- Session 1 Introductions and Overview of MCGT
- Session 2 Managing Challenging Emotions through Meaning: Permission to Grieve
- Session 3 Your Child's Living Legacy: Continuing Bonds
- Session 4 Creating Your Story: Choosing One's Life Narrative
- Session 5 Loss and Identity: Identity Before and After Loss
- Session 6 Your Story as a Source of Meaning: The Past
- Session 7 Your Story as a Source of Meaning: The Present
- Session 8 Your Story as a Source of Meaning: The Future

MCGT Session Overview

- Session 9 Meaningful Connections: Identifying Support and Meaningful Relationships
- Session 10 Attitude as a Source of Meaning: Encountering Life's Limitations
- Session 11 Creating as a Source of Meaning: Creativity, Courage, and Responsibility
- Session 12 Experiencing as a Source of Meaning: Experiencing & Connecting with Life
- Session 13 Revising Your Story: Recalling Emotion-Evoking Events
- Session 14 Creating Significance: Reactions to Moving Forward
- Session 15 Living Legacies: Presentation of the Living Legacy Project
- Session 16 Reflections: Hopes for the Future

Common Clinical Scenario:

Coping with Intense Emotional Pain

Session 2

Managing Challenging Emotions through Meaning: Permission to Grieve

- Provide psychoeducation about prolonged grief, cognitive schemas, experiential avoidance, and mindfulness meditation
- Begin to formulate a narrative about parent's story
- Highlight choice in how one makes meaning of one's emotional reactions
- Facilitate self-compassion
- Support emergent grief and highlight parent's ability to tolerate the feelings

Session 2

Reflection Questions

- 1) What are your beliefs about experiencing distressing emotion? Do you believe they should be avoided? Embraced? Do you believe you can handle intense feelings as they arise? What are your beliefs about expressing emotion? Are they a sign of strength? Of weakness?
- 2) How do you feel you have coped with your loss? Do you feel you have permission (from yourself or from others) to grieve?
- 3) What do you think of other bereaved parents who continue to experience grief? Do you feel there is a specific amount of time for which one should be able to grieve?
- 4) Sometimes, the way grieving parents think about their grief can make it harder for them to experience it, ultimately leading to avoidance. If you have difficulty experiencing, allowing, or tolerating your grief, are there other ways to think about these painful emotions that would give you more permission to feel them or make them more tolerable? For example, is it possible to view waves of grief as a reflection of your unending love your child and an opportunity to connect?

Session 2

Experiential Mindfulness and Guided Imagery Exercise

Close your eyes and breathe naturally. Find a comfortable position and relax your body. Now begin to feel your body, moving from your head to your toes, noticing any sensations. As you become aware of whatever you are feeling, just allow it to be, without judging it, just being fully present with it. And if you notice your mind is wandering off, that's okay, just gently bring your attention back to your body. As you continue to move through each part of your body--your head...your neck...your chest...your stomach...arms...hands...legs...and feet...become fully aware of any pain or discomfort you are feeling and just remain with it for a few moments. Now, try to identify where in your body you feel your child's presence most. Picture your child and stay with the image, noticing the small details, imagining them smiling, taking in any smells, feeling their touch. Allow whatever you are feeling to just arise and be. Stay in this moment, in the presence of your child, cherishing this time together and this opportunity for connection, to give and receive nurturance. Allow your body to react however is most natural, allow your feelings to emerge and change shape, treasuring each moment, treasuring this moment with your child. Take a few more moments to be with your child, and when you are ready, say see you later, just for now, knowing that this connection is inside of you, always available to you. Slowly begin to come back to this room, and when you feel ready, open your eyes.

Common Clinical Scenarios:

- Disconnection from their Child
- Guilt Related to Feeling “Better”
- Challenges with Sense-Making
- Worrying about the Meaning of Their Child’s Life

Session 3

Your Child's Living Legacy

- Encourage sharing of photos, videos, and meaningful items
- Highlight choice in how the parent tells their child's story
- Support continued connection to child and facilitate strengthening the connection – the connection as a lighthouse
- Support emergent grief and highlight parent's ability to tolerate the feelings

Session 3

Reflection Questions

- 1) In what ways do you continue to connect with your child? Do you speak with him/her? Do you engage in any rituals to connect to him/her, such as going to a place he/she liked or to the cemetery? If not, is there anything you might do to more feel more connected to him/her? Do you anticipate anything that might get in the way of you connecting, such as emotional pain or finding quiet time?
- 2) What are some of the qualities you most admired in your child? What influence or impact do you think your child had on others?

Session 3

Meaningful Conversation Exercise

Close your eyes and breathe naturally. Find a comfortable position and relax your body. Now you're invited to speak with your child, picturing them happy and healthy, and sharing with them what they have taught you and perhaps taught others. Share any lessons you learned from her child or through her child's experience with cancer.

Can you tell your child more about how they have influenced your current sense of identity, who you are today, your values, and the type of person you would like to be in the future?

Now, imagining your child's voice (or if the child was too young to speak, imagining the voice you believe your child would have), what would they say back? They would say, "Mom/Dad, I want you to..."

Take a few more moments to be with your child, and when you are ready, say goodbye just for now, knowing that this connection is inside of you, always available to you. Slowly begin to come back to this room, and when you feel ready, open your eyes.

Session 4

Creating Your Story: Choosing One's Life Narrative

- Highlight choice in how you tell your story and how much your loved one is a part of that story
- Explore the role that cognitive schemas may be playing in one is telling their story
- Explore assimilation and accommodation processes
- Note that there may be “*meaning transitions*” in sense-making as the parents holds more than one meaning simultaneously
- Highlight parents ability to choose more helpful, adaptive meanings

Session 4

Reflection Questions

- 1) How we make meaning of life's challenges is often shaped by our beliefs about ourselves and the way the world works. What beliefs play a role in how you make sense of (or struggle to make sense of) your child's illness and death? Have any beliefs you held about yourself or the way the world works changed since your child became ill?
- 2) You are ultimately in charge of the meaning you make of life's challenges and of how you tell your and your child's story. What is the story you would like to be able to tell about your child's life?
- 3) What is the story you would like to be able to tell about your own life? How does the way your life looks now compare to the story you would like to create?

Session 4

Letter Writing Exercise

You are invited to write a letter to your child and then to have your child respond by letter. In your letter to your child, share with your child how you would like to keep them an active part of your story. Describe any symbolic gestures or rituals in which you currently engage or can engage in to stay connected to and to continue to nurture your child. In your child's response letter, have them affirm your plans and express what they want for you moving forward.

Common Clinical Scenario:

Identity Challenges

Session 5

Identity Before and After Loss

- Describe link between meaning and identity
- Highlight core aspects of identity that remain
- Assist parent with maintaining/transforming identity as “parent”
- Explore changes that are welcome or currently valued
- Highlight choice in how to think about your identity and who you want to be

Session 5

Reflection Questions: Who Am I?

- 1) Think about a time before your child became ill. Write down four answers to the question, “Who was I before my child became ill?” based on how you viewed yourself then. These can be positive or negative, and may include personality characteristics, beliefs, values, things you did, roles you had, relationships with people you knew, etc... For example, answers might start with, “I was someone who ,” (e.g., was passionate, optimistic, organized, worried a lot) or “I was a ___” ... (e.g., homemaker, entrepreneur, sister, brother, mother, father).
- 2) Next, write four answers to the question, “Who was I while my child was ill?” These can once again be positive or negative responses, and include personality characteristics, beliefs, values, things you did, roles you held, relationships with people you knew, etc.

Session 5

Reflection Questions: Who Am I?

- 3) Now write four answers to the question, “Who am I now?” These can once again be positive or negative responses, and include personality characteristics, beliefs, values, things you did, roles you held, relationships with people you knew, etc. Take some time to think about how your loss has affected your answers and your sense of identity. How has what you’ve been through affected who you are, what you value, and the things that are most meaningful to you?
- 4) Finally, write down four answers to the question, “Who do I want to be?” Consider the person you would like to be in the future. Your responses may include characteristics, values, or roles you’ve already listed or some that you hope to work toward.

Clinical Scenarios:

- Challenges with Sense-Making
- Challenges with Connecting to Sources of Meaning

Session 8

Your Story as a Source of Meaning: The Future

- Link sources of meaning and values that grew out of past experiences to what matters now and moving forward
- Highlight how connecting to sources of meaning offers hope and the promise of a fulfilling and meaningful future
- Discuss how current sources of meaning can be maintained
- Troubleshoot challenges to connecting with these sources of meaning

Session 8

Reflection Questions

How Does One Create a Life Worth Living in the Face of Grief?

We are the authors of our story, and while there are many aspects of life beyond our control, including painful losses, how we write the story of our lives is within our control. Having known unthinkable tragedy and a type of suffering that only those who have experienced it can understand, what do you think a life worth living looks like? What are its ingredients? Over what parts do you have control? In what ways would you like to keep your child a part of your story? What are two small steps you could take to take control and help to create this life?

Session 10: Attitude as a Source of Meaning: Encountering Life's Limitations

- Describe Frankl's proposition that the last vestige of human freedom is the ability to choose our attitude in the face of suffering
- Provide psychoeducation about transcendence and the ability to co-exist with grief and related suffering
- Explore "how" one faces adversity can be a source of meaning
- Highlight how have made choices in the past that were aligned with values
- Introduce Living Legacy Project

Session 10

Reflection Questions

- 1) What are some of the life challenges you faced in the past? How did you cope or deal with them at the time?
- 2) Since your loss, what are the specific challenges you have faced, and how are you coping or dealing with them now? What choices do you make each day to engage in life despite your grief?
- 3) Please describe a time when you felt especially proud of how your child faced a challenge. This may of course include a time during their illness, or another challenging time in their life.
- 4) Have you ever felt glad about or even proud of how you chose to face a particularly challenging situation? In coping with your loss, what choices do you feel you have in how you face it? What ways of responding to your grief would be most aligned with your values and the type of person you strive to be?

Clinical Scenarios:

- Challenges with Adaptive Meaning-making
- Coping with Guilt and Regrets

Session 13: Revising Your Story: Reconstructing Emotional Thoughts and Events

- Identify emotionally evocative thoughts or events that remain troubling (e.g., related to anger, guilt, regret)
- Highlight choice of how to view particularly challenging moments or experiences
- Facilitate meaning reconstruction, encouraging a stance self-compassion and non-judgmental acceptance where more maladaptive meanings have been made
- Provide psychoeducation about the hindsight bias and engaging a compassionate response, “What would you tell a friend...?”
- Begin to process feelings about upcoming termination of treatment

Session 13:

Reflection Questions

- 1) In addition to the deep grief they typically feel, bereaved parents often experience feelings of regret, anger, or guilt related to their child's illness and death. Looking at aspects of your experience that continue to cause you the most distress, is there a way to think about things with more compassion toward yourself?
- 2) Parents also often struggle with making sense of their child's illness and death. What aspects of this do you continue to struggle with the most? Even if you do not believe it at this time, can you imagine a way of thinking about your and your child's story that would be helpful and would feel more comfortable?
- 3) Another common and natural reaction for grieving parents to have is to ask, "What if...?" and to question how they cared for their child. Write a letter to your child focusing on your efforts to meet their needs before and throughout their illness.

Session 14: Creating Significance: Reactions to Moving Forward

“I was snorkeling alone in the warm, sunny, clear waters of a tropical lagoon and experienced, as I often do in the water, a deep sense of pleasure and coziness. I felt at home. The warmth of the water, the beauty of the coral bottom, the sparkling silver minnows, the neon-bright coral fish, the regal angel fish, the fleshy anemone fingers, the esthetic pleasure of gliding and carving through the water, all in concert created an underwater elysium. And then, for reasons I have never understood, I had a sudden radical shift in perspective. I suddenly realized that none of my watery companions shared my cozy experience. The regal angel fish did not know that it was beautiful, the minnows that they sparkled, the coral fish that they were brilliant. Nor for that matter did the black needle urchins or the bottom débris (which I tried not to see) know of their ugliness. The at-homeness, the coziness, the smiling hour, the beauty, the beckoning, the comfort- none of these really existed. I had created the entire experience! (...) It was as though I peered through a rent in the curtain of daily reality to a more fundamental and deeply unsettling reality.”

- Irvin Yalom, *Existential Psychotherapy*, 1980, p. 219

Session 14: Creating Significance: Reactions to Moving Forward

- Highlight choice of how to view greater significance of loss
- Provide psychoeducation distinguishing meaning-as-comprehensibility from meaning-as-significance (Janoff-Bulman & Frantz, 1997)
 - Both negative and positive impact may be acknowledged, carefully, using parent's own words
 - Can be linked to attitude as a source of meaning and choice, highlighting Yalom's (1980) passage, *not* a prescription for turning lemons into lemonade
- Normalize the ability of individuals to experience multiple emotions at once (e.g., sadness and pride) and discomfort with "forward" movement
- Highlight how chose to continue to engage in life may be something witnessed in the child and part of the child's legacy
- Process feelings about upcoming treatment termination

Session 14:

Reflection Questions

- 1) One of the ways we create meaning of tragic life events is by considering their greater significance in our and others' lives and their impact on the world. Have you thought about the significance of your child's illness or death in this way? Are there any lessons that you learned from your child and your experiences? This may overlap with your thoughts about your child's legacy that you have previously shared, so please feel free to reiterate those thoughts or share any new reflections.
- 2) Are there any ways that you feel you or others have changed in ways that you appreciate since your child's death? For example, some parents have described a change in priorities, an increased sense of compassion for others, a change in the way they view certain relationships, improvements in relationships, or recognition that they can cope with stressful situations better. Have any of these or other changes occurred in you or your family? Has this experience deepened your gratitude about anything you have?

Demonstration and Q&A

Acknowledgements

We are indebted to the bereaved individuals who have shared so much as part of our research and our research team members and collaborators. Special thanks to Holly Prigerson, Ph.D., William Breitbart, M.D., Robert Neimeyer, Ph.D., David Kissane, M.D., Lori Wiener, Ph.D., Janice Nadeau, Ph.D, and Sherry Schachter, Ph.D. for their invaluable contributions to this work.

We are grateful for support for the Center for Advancement of Bereavement Care from Sylvester Comprehensive Cancer Center. Grant funding for Wendy Lichtenthal's research includes National Institutes of Health grants R03 CA139944, K07 CA172216, R21 CA218313, R01 NR019637, R01 NR019831, R21 MH095378, and P30 CA008748, and American Foundation for Suicide Prevention grant DIG-0-085-21.



Thank you



If you are interested in training opportunities at the Center for the Advancement of Bereavement Care (CABC) or have questions, please reach out at cabc@miami.edu or wendy.lichtenthal@miami.edu.



Meaning-Centered Grief Therapy Reading List

1. Frankl V. *Man's Search for Meaning*. Boston: Beacon Press, 1992
2. Breitbart W, Poppito S. *Individual Meaning-Centered Psychotherapy for Patients with Advanced Cancer: A Treatment Manual*. New York: Oxford, 2014
3. Lichtenthal WG, Cruess DG. Effects of directed written disclosure on grief and distress symptoms among bereaved individuals. *Death Stud* 2010; 34(6):475-499. PMID: 24482856 PMCID: PMC3909885
<https://www.ncbi.nlm.nih.gov/pubmed/24482856>
4. Lichtenthal WG, Currier JM, Neimeyer RA, Keesee NJ. Sense and significance: A mixed methods examination of meaning making after the loss of one's child. *J Clin Psychol* 2010; 66(7):791-812. PMID: 20527057 PMCID: PMC3745996 <https://www.ncbi.nlm.nih.gov/pubmed/20527057>
5. Lichtenthal WG, Burke LA, Neimeyer RA. Religious coping and meaning-making following the loss of a loved one. *Counselling and Spirituality* 2011; 30(2):113-136.
6. [Lichtenthal WG](#), Breitbart, W. Finding meaning through the attitude one takes. In R. A. Neimeyer (Ed.), *Techniques in Grief Therapy: Creative Strategies for Counseling the Bereaved* (pp. 161-164). New York: Routledge; 2012
7. Lichtenthal WG, Neimeyer, RA. Directed journaling to facilitate meaning-making. In R. A. Neimeyer (Ed.), *Techniques in Grief Therapy: Creative Strategies for Counseling the Bereaved* (pp. 165-168). New York: Routledge; 2012

Meaning-Centered Grief Therapy Reading List

8. Lichtenthal WG, Neimeyer RA, Currier JM, Roberts K, Jordan N. Cause of death and the quest for meaning after the loss of a child. *Death Stud* 2013; 37(4):311-342. PMID: 24520890 PMCID: PMC3929231
<https://www.ncbi.nlm.nih.gov/pubmed/24520890>
9. Lichtenthal WG, Corner GW, Sweeney CR, Wiener L, Roberts KE, Baser RE, Li Y, Breitbart W, Kissane DW, Prigerson HG. Mental health services for parents who lost a child to cancer: If we build them, will they come? *J Clinical Oncology* 2015; 33(20):2246-53. PMID: 26033819 PMCID: PMC4486343
<https://www.ncbi.nlm.nih.gov/pubmed/26033819>
10. Lichtenthal WG, Sweeney CR, Roberts KE, Corner GW, Donovan LA, Prigerson HG, Wiener L. Bereavement follow-up after the death of a child as a standard of care in pediatric oncology. *Pediatric Blood & Cancer* 2015; 62(Suppl. 5):S834-69. PMID: 26700929 PMCID: PMC4692196 <https://www.ncbi.nlm.nih.gov/pubmed/26700929>
11. Lichtenthal WG, Breitbart, W. The central role of meaning in adjustment to the loss of a child to cancer: Implications for the development of Meaning-Centered Grief Therapy. *Curr Opin Support Palliat Care* 2015; 9(1):46-51.
12. Lichtenthal WG, Breitbart W. Who Am I? In Neimeyer R (Eds) *Techniques of Grief Therapy: Assessment and Intervention* (pp. 165-168). Routledge, 2015
13. Neimeyer, RA, Lichtenthal WG. The presence of absence: The struggle for meaning in the death of a child. In Stevenson R, Cox G (Eds.) *Children, Adolescents, and Death: Questions and Answers* (pp. 247-261). Baywood, 2017.

Meaning-Centered Grief Therapy Reading List

14. Lichtenthal WG, Lacey S, Roberts K, Sweeney C, Slivjak E. Meaning-Centered Grief Therapy. In Breitbart W (Ed.), *Meaning-Centered Psychotherapy* (pp.88-99). New York, NY: Oxford University Press, 2017.
15. Lichtenthal WG, Panjwani A, Masterson M. Consulting the deceased. In Neimeyer R (Ed.), *Techniques of Grief Therapy 3.* (pp. 273-276). New York, NY: Routledge, 2021
16. Lichtenthal WG, Masterson M, Panjwani A. The meaningful conversation. In Neimeyer R (Ed.), *Techniques of Grief Therapy 3.* (pp. 329-333). New York, NY: Routledge, 2021
17. Lichtenthal WG, Catarozoli C, Masterson M, Slivjak E, Schofield E, Roberts KE, Neimeyer RA, Wiener L, Prigerson HG, Kissane DW, Li Y, Breitbart W. An open trial of Meaning-Centered Grief Therapy: Rationale and preliminary evaluation. *Palliat Support Care*, 2019; 17(1):2-12. <https://www.ncbi.nlm.nih.gov/pubmed/30683164>
18. Lichtenthal WG, Roberts KE, Catarozoli C, Schofield E, Holland JM, Fogarty JJ, Coats TC, Barakat LP, Baker JN, Brinkman TM, Neimeyer RA, Prigerson HG, Zaider T, Breitbart W, Wiener L. Regret and unfinished business in parents bereaved by cancer: a mixed methods study. *Pall Medicine* 2020; 34(3):367-377. <https://www.ncbi.nlm.nih.gov/pubmed/32020837>
19. Lichtenthal WG, Roberts KE, Pessin H, Applebaum A, Breitbart W. Meaning-Centered Psychotherapy and cancer: Finding meaning in the face of suffering, *Psychiatric Times* 2020; 37(8):23-25. <https://www.psychiatrictimes.com/view/finding-meaning-in-the-face-of-suffering>