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'You just wear a mask': An Interpretative Phenomenological Analysis study to explore the impacts of bereavement by suicide among UK peer support group members.

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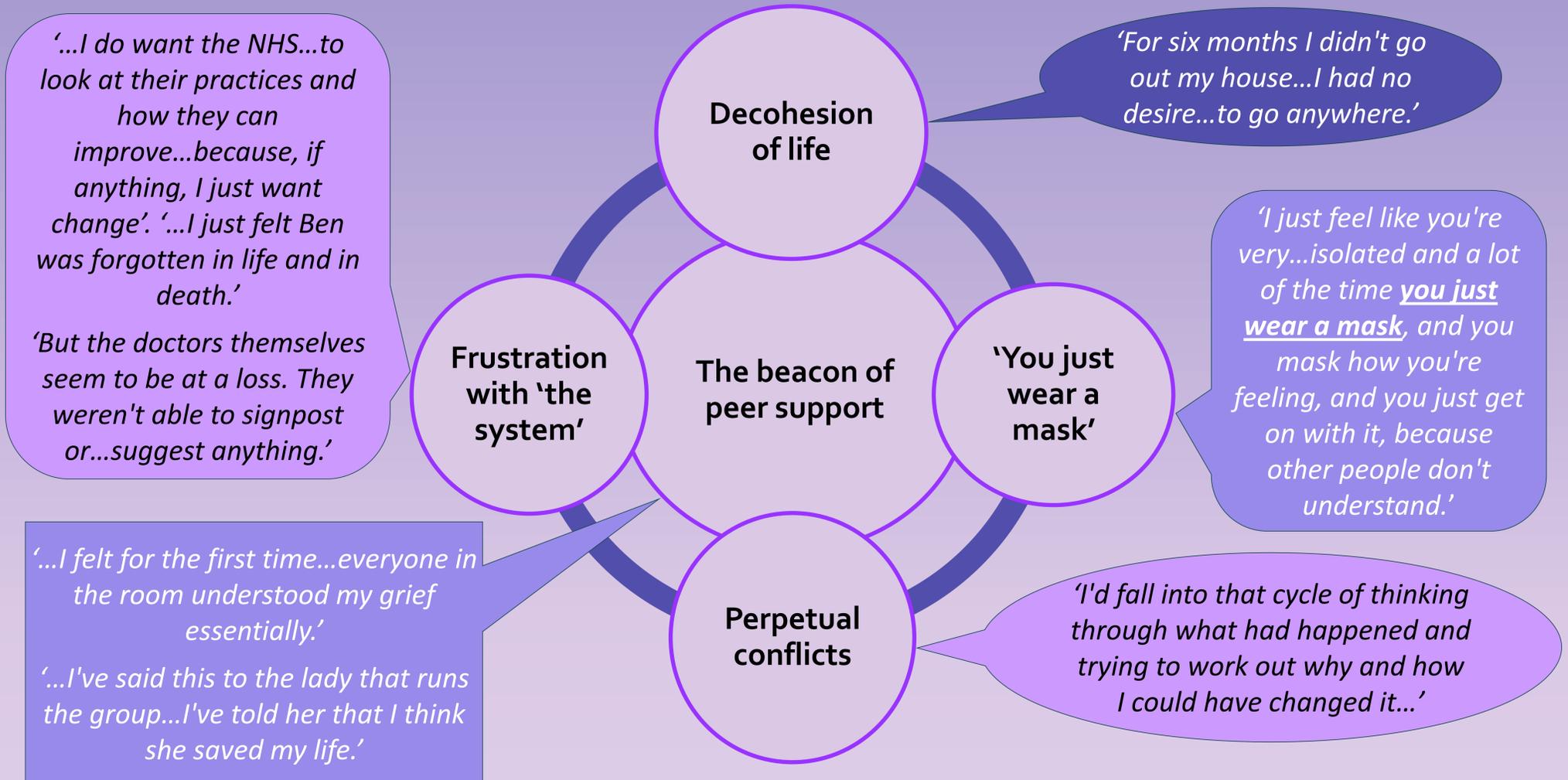
'You just wear a mask': An IPA study to explore the impacts of bereavement by suicide among UK peer support group members.

Objective: Suicide is widely acknowledged as a pervasive global public health issue¹. Support for those bereaved by suicide (postvention) is a neglected area of research². Suicide loss survivors (SLSs) struggle with guilt, stigma, and a drive to comprehend³. This study aimed to assess the ramifications of bereavement by suicide within a cohort of peer-support group members.

Method: Data were collected using in-depth face-to-face and online semi-structured interviews. Audio-recordings of the interviews were transcribed and analysed via Interpretative Phenomenological Analysis⁴. Eight people, recruited from a UK Peer Support Group, participated:

Age	Sex	Relationship of the person lost	Age of the person lost	Sex of the person lost	Years since loss
50	F	Son	21	M	2
23	M	Sister	28	F	3
65	F	Daughter	38	F	2.5
52	F	Brother (1)	21	M	25
		Brother (2)	15	M	21
33	F	Brother	25	M	6
23	F	Father	44	M	12
55	F	Partner	60	M	4
26	F	Father	42	M	15
$\bar{x} = 40.88$	F = 7 / M = 1		$\bar{x} = 32.67$	F = 2 / M = 7	$\bar{x} = 10.06$

Results: Five Group Experiential Themes emerged (diagram below). Findings provide insights into the mindset of a cross-section of those bereaved by suicide and the all-encompassing, pervasive, life-shattering consequences of becoming a SLS. These include the duality of their inner torment and public persona, perpetual possession of conflicting thoughts and perspectives, and alienation.



Implications for practice:

- Peer support is a cornerstone of suicide bereavement coping strategies and offers a unique environment where SLSs feel truly understood and accepted.
- Emergency workers, healthcare professionals, funeral directors, and coroners need to be (better) informed, regarding the impact of suicide bereavement, to facilitate both greater empathy and signposting of services available to SLSs, including peer support, early, consistently and with appropriate follow-up.
 - SLSs should have a voice in policy setting and procedures should encompass their lived experience.