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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.

<u>Objective</u>: Suicide is widely acknowledged as a pervasive global public health issue<sup>1</sup>. Support for those bereaved by suicide (postvention) is a neglected area of research<sup>2</sup>. Suicide loss survivors (SLSs) struggle with guilt, stigma, and a drive to comprehend<sup>3</sup>. This study aimed to assess the ramifications of bereavement by suicide within a cohort of peer-support group members.

<u>Method</u>: 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 Analysis<sup>4</sup>. 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          | $\bar{x} = 10.06$ |

<u>Results</u>: 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.

'For six months I didn't go "... I do want the NHS...to out my house...I had no look at their practices and desire...to go anywhere.' Decohesion how they can of life improve...because, if anything, I just want 'I just feel like you're change'. '... I just felt Ben very...isolated and a lot was forgotten in life and in of the time you just death.' wear a mask, and you 'But the doctors themselves Frustration You just mask how you're The beacon of seem to be at a loss. They with 'the feeling, and you just get wear a peer support weren't able to signpost system' mask' on with it, because or...suggest anything.' other people don't understand.' "... I felt for the first time ... everyone in the room understood my grief 'I'd fall into that cycle of thinking Perpetual through what had happened and essentially.' conflicts trying to work out why and how "...I've said this to the lady that runs I could have changed it...' the group...I've told her that I think she saved my life.'

## 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.



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