

“We’ve had to learn how to talk to each other again after the loss; it was a long journey.”

Supporting Individuals Bereaved by Suicide

This booklet serves as a companion to the exhibition of personal narratives from the South East London Suicide Bereavement Service

By Dr. D. Palmer, & C. Welsby

For further information email: dpalmer@mindinbexley.org.uk



Introduction

This booklet serves as a companion to an audio-visual exhibition that presents a profound analysis of narratives collected from participants in the South East London Suicide Bereavement Service. By exploring the lived experiences of those bereaved by suicide, this study reveals the multifaceted nature of grief, the nuances of emotional support, and the varied coping strategies individuals employ. Drawing on in-depth interviews, the analysis uncovers the influences that shape the bereavement experience and highlights the significant impact of the support provided by the service. These findings are framed within the context of NHS policies, particularly the South East London Integrated Care Board (ICB) and local authority strategies aimed at suicide prevention, emphasising the urgent necessity for tailored support services and their implications for mental health policies addressing suicide bereavement.

Utilising an oral history methodology, this study prioritises the voices and agency of participants, allowing them to share their stories authentically and on their own terms. This approach not only enriches our understanding of individual experiences, but also validates the unique narratives of those impacted by suicide. By centring individual accounts, the research uncovers the diverse ways people navigate grief and loss, offering invaluable insights into the emotional landscape following a suicide. Storytelling emerges as a powerful tool for meaning-making, enabling individuals to reconstruct their understanding of loss and forge pathways toward healing. This approach aligns with the belief that narrative expression empowers bereaved individuals to weave their experiences into their life stories, thereby fostering resilience and facilitating recovery.

This study is situated within the wider academic discourse on mental health, grief, and bereavement, contributing to contemporary conversations about the critical role of community support, the transformative potential of narrative, and the pressing need for systemic reform in mental health services. Evidence suggests that community engagement significantly enhances the coping mechanisms of bereaved individuals, providing them with a sense of belonging and shared understanding. By amplifying the voices of those affected by suicide, this study aims to enrich the growing body of literature advocating for greater awareness and support for bereaved individuals.

It aspires not only to refine theoretical frameworks surrounding grief and bereavement but also to inform practical interventions and the development of inclusive mental health policies. Incorporating community narratives into public discourse can raise awareness, cultivate empathy, and challenge prevailing societal misconceptions about suicide. Ultimately, the narratives collected in this study stand as a poignant reminder of the imperative for compassion, understanding, and community involvement in the realm of suicide bereavement.

These narratives not only honour the memories of those lost but also initiate a collective healing process, inviting residents and community members to engage in meaningful discussions about grief, stigma, and mental health. Such communal storytelling reinforces the understanding that experiences of loss are interconnected, creating a rich tapestry of shared insights that can help cultivate resilience among survivors.

Dr. D. Palmer

For further information email: dpalmer@mindinbexley.org.uk



South East London (SEL): Overview of the South East London Bereavement Service

The Suicide Bereavement Service in South East London aims to provide comprehensive support to individuals affected by suicide. This service is designed to address the unique and individual needs of the bereaved, offering a range of interventions that include one-on-one counselling, support groups, practical support and community education initiatives. The service operates with a focus promoting open discussions about, and support for residents bereaved by suicide, creating a safe space for individuals to share their experiences and emotions.

The South East London service, which started in July 2021 is funded by South East London Integrated Care System and provides various programmes tailored to the needs of bereaved individuals in the London Boroughs of Bexley, Bromley, Greenwich, Lambeth and Southwark. The service is available to adults and young people and is delivered as a partnership between South East London Mind, Mind in Bexley and South London and Maudsley NHS Foundation Trust. The support team includes Suicide Bereavement Workers, Bereavement Counsellors and Community Chaplains who work across all faiths.

The service provides practical support including help with registering the death, planning a funeral and dealing with affairs of the person who died. One-on-one counselling sessions allow individuals to explore their feelings in a confidential setting, while peer support groups facilitate connection with others who have experienced similar losses. Furthermore, community outreach initiatives aim to raise awareness about the impact of suicide bereavement and promote available resources. These programs are designed to be accessible and inclusive, recognising the diverse backgrounds and experiences of those seeking support.

By offering a range of options, the service encourages individuals to engage with the support that resonates most with them, fostering a sense of agency in their healing journey. Testimonials from individuals who have accessed the Service illustrate the profound impact of these initiatives. The personal accounts highlighted in this booklet demonstrate the effectiveness in providing compassionate support among those bereaved by suicide. The positive feedback from participants highlights the importance of continued investment in such services to ensure that they remain available and accessible to those who need them most.

“At first I was hesitant, really resistant to tell my story and then sharing it... I mean who wants to hear this? ...but if it helps change things, opens up conversations and discussions and breaks down some of awful shame and guilt and taboo, barriers and all the silence then it’s worth it. Definitely... and of course if it helps someone get support from seeing it then it will have been worth it. So yes, it’s painful and upsetting but it’s also helpful too. Telling and sharing my story has been hard, I wouldn’t say it hasn’t been, but I’m glad I did it.”

This exhibition is based on powerful narratives from individuals participating in the South East London Suicide Bereavement Service. The study, consisting of 22 in-depth interviews, delves into the intricate complexities of grief faced by those who have lost a loved one to suicide. It highlights their emotional turmoil and the diverse coping strategies they employ, revealing the profound impact of these experiences.

By sharing personal stories, the study not only illuminates critical factors influencing the bereavement experience such as societal stigma, a lack of understanding from others, and the unique challenges faced by survivors, but also emphasises the transformative power of storytelling. Each narrative allows individuals to connect through shared pain and resilience, ultimately helping others who may be navigating similar struggles.

“Every story is different, really different, but the pain of loss feels universal... and it’s horrendous.”

The findings from the narratives highlight the success of the Suicide Bereavement Service, illustrating its positive impact on individuals coping with the loss of a loved one to suicide. These compelling insights not only highlight the effectiveness of the support provided but also emphasise the urgent need for similar services to be replicated across various communities.

By implementing comprehensive and accessible resources, we can ensure that more individuals receive the vital support they need during such challenging times, ultimately fostering resilience and healing in the wake of tragedy.

“There needs to be more awareness and understanding about what we go through, and we need to be able to talk... that’s the problem; we don’t talk enough.”

This study aims to contribute to the broader discourse surrounding suicide bereavement, fostering a culture of openness and understanding that mitigates stigma and encourages individuals to seek help. The exhibition plays a vital role in promoting participant agency by empowering individuals to share their stories, creating a profound connection that can resonate with others.

By openly expressing their experiences, participants not only honour their loved ones but also offer solace and understanding to those who may feel isolated in their grief. This sharing fosters a supportive environment where individuals can find strength in vulnerability, helping to diminish stigma and encouraging others to share their own journeys. In doing so, the exhibition cultivates a culture of empathy and understanding that benefits not only individuals but also the wider community, inspiring collective healing and support in the face of loss.

By examining personal stories, the research highlights critical factors that influence the bereavement experience, including societal stigma, the lack of understanding from others, support systems, and the unique challenges faced by survivors.

“The ripple effects of suicide extend far beyond the individual you know... its far reaching, apart from what I’ve experienced it impacts families, friends, colleagues and can even divide us... but the impact is huge... friends, and others in the local community. All those who knew him really. It’s awful.”

Suicide is a significant public health issue that affects individuals and communities globally. The World Health Organization estimates that nearly 800,000 people die by suicide each year. This staggering number represents not just the loss of life but also the profound implications for those left behind. Families, friends, and loved ones of individuals who die by suicide often face a unique and complex grief process.

This experience, known as suicide bereavement, is characterised by a myriad of emotions, including guilt, shame, confusion, anger, and isolation. These feelings can be particularly intense and complicated, as survivors may grapple with unanswered questions about their loved one’s struggles and the circumstances surrounding their death.

“I felt so angry at my loved one for leaving me with so many unanswered questions.”

“Like my world ended right there. The shock and horror were overwhelming.”

The significance of understanding suicide bereavement in mental health discourse cannot be overstated. It demonstrates the need for targeted support systems that specifically address the nuanced experiences of bereaved individuals. Traditional grief models may not fully encapsulate the dynamics of suicide bereavement, highlighting the necessity for tailored interventions that validate and support the practical, spiritual and emotional journeys of those affected.

Moreover, the effects of suicide reverberate beyond the immediate family, influencing entire communities. Research indicates that communities with higher rates of suicide often experience a collective sense of distress and trauma. This collective grief can manifest in various ways, leading to increased vulnerability to mental health issues among community members. Furthermore, the stigma surrounding mental health and suicide can create an environment where open discussions are avoided, further complicating the recovery process for bereaved individuals.

“It felt like I was in a dark big tunnel with no way out; I didn’t know who to reach out to. Shock, despair, anger... devastation isn’t the word for it. I mean I was so alone, and people look the other way. They can’t face it, so they avoid you. Well, that’s what I found anyway. They avoided me when I needed them most.”

“There is a shared sorrow, a shared understanding a sharing of experiences... you can’t put a price on that. It got me through a very dark and destructive period.”

The study employs a qualitative narrative research design to explore the personal experiences of individuals bereaved by suicide. Through semi-structured interviews, participants can share their stories in their own words while addressing key topics. This approach recognises the importance of personal narratives in shaping identities and experiences, particularly in the context of grief. The research is guided by existing literature, emphasising the need to contextualise experiences within cultural and social environments, thus enabling a deeper analysis of how these factors influence the grieving process.



The project steering group helped develop sensitive research tools, which were rigorously tested to ensure appropriateness. Interviewers were trained to provide emotional support, adhering to ethical principles that protect participant welfare. Participants received an information sheet detailing ethical guidelines, fostering trust and encouraging open dialogue.

To maintain a supportive environment, participants could pause or withdraw from interviews if distressed, and some were referred back to the service for additional support.

The study involved 22 participants, ranging from 9 months to 2 years post-bereavement, with an average of 18 months since their loss. The majority of participants accessed one-to-one support services, reflecting a proactive approach to their grief. The demographic diversity included individuals who lost siblings, partners, mothers, friends, and children to suicide, providing a broad perspective on the grieving process. The participants' average age of 48 signifies a life stage where they balance various responsibilities, potentially affecting their coping mechanisms.

Interviews, conducted online, were flexible and accommodating, allowing participants to articulate their experiences fully. The qualitative data collected through these interviews were analysed using content analysis to identify key themes and insights. The findings provide important feedback for the Suicide Bereavement Service, enhances understanding and support for those affected by suicide, highlighting the complexity of their grief and the necessity for tailored support services. Overall, the study and exhibition seek to honour participant voices and contribute to a better understanding of suicide bereavement, informing future project delivery, research and intervention strategies.

“It’s all a blur when I found... well let me say it’s a shock, a day like no other.”

In the aftermath of loss, participants frequently described an emotional state characterised by a “haze” or “shock” that profoundly impacted their ability to seek support.

“I was walking around in a big, long blank haze... I really wasn’t here. I was in a haze... that’s the way to describe it.”

This narrative encapsulates the disorientation many feel after bereavement, making it challenging to navigate their grief and reach out for help. Alongside this haze, feelings of guilt, stress, and anger often surfaced. Participants reported grappling with self-blame, questioning what they could have done differently.

“I kept thinking, if only I had noticed the signs... it eats at you.”

“I keep thinking what was it, why didn’t I notice ...what happened that day, what if, and if only I had done this or that?”

“Out of the blue I get angry and then it might pass and then I feel overwhelming or I... guilt or I get upset and think was it me, was it me all along?”

This guilt compounds the emotional turmoil, making individuals feel even more isolated and reluctant to seek support.

The emotional turmoil leaves them unsure of how to proceed:

“I don’t think I would have reached out if they hadn’t called me. I was just so lost.”

This highlights the vital role of proactive support services during such vulnerable periods. Research suggests the importance of early intervention in the bereavement process. Neimeyer et al. (2006) notes that timely support can influence recovery outcomes significantly. Jordan and Hinds (2016) found that individuals who received immediate outreach after a suicide reported feeling less isolated and more connected to resources.

Many participants articulated that they would have struggled to seek support independently without initial contact from the Suicide Bereavement Service.

One Shared:

“I would have never thought to reach out for help. I was in such a dark alone kind of place, and I needed that push.”

This aligns with studies showing societal stigma creates barriers to seeking help.

The effectiveness of outreach efforts is supported by Currier et al. (2008), which highlights proactive support in reducing adverse psychological outcomes.

“I was in such a bad place; that phone call made me feel like I wasn’t alone anymore.”

Another noted:

“Honestly, just knowing someone was there made it a little easier, even when I was so angry at the world.”

By actively reaching out to individuals in distress, the service facilitates access to necessary support and resources, ultimately promoting healing and recovery.

By actively reaching out to individuals in distress, the service facilitates access to necessary support and resources, ultimately promoting healing and recovery.

“God, I didn’t sleep a wink the night before this... thinking about this and worrying I couldn’t get a word out without coming across as a wreck.”

The interview process revealed diversity in how participants approached discussions about their loss. Some participants were succinct, while others elaborated on their loved ones, recounting cherished memories.

“I wanted to share everything about them; it felt important.”

While another shared:

“It’s in their memory; it’s also my memory, and I want to share it. I can never let them go, and sharing things and talking and memories helps me.”

A third participant expressed:

“Every story I tell I guess keeps their spirit alive in some way.”

Highlighting the significance of sharing memories. This variability indicates that the length and depth of interviews can significantly influence the richness of data collected and emotional processing.

As highlighted by Riessman (2008), narrative interviews can provide a therapeutic platform for individuals to articulate their grief, allowing them to express emotions that may have been suppressed. This is particularly valuable in suicide bereavement, where feelings of guilt and anger complicate the grieving process. Sharing personal stories can facilitate a sense of agency, as participants feel control over their narratives.

“Telling my story felt like I was having something back...it was my time, my experience, and I want it to be heard and heard loud.”

“I guess listening to me and my experience and understanding the emotional and the mess and chaos and upside-down world of it all helps and can... I suppose only help others... if they are in same boat.”

Reflections on the interview process revealed that some participants experienced distress during discussions. Researchers were trained to recognise signs of emotional discomfort, ensuring they could provide support as needed. This reinforces the necessity for researchers to possess skills when dealing with difficult topics.

The flexibility in interview length and structure enhances participant comfort. By allowing participants to dictate the pace, researchers create a supportive environment leading to more meaningful data collection.

“I appreciated that I could take breaks when it got too much... I could get a tea and come back to it... it made me feel safe in a way.”

The variability in emotional expression during interviews highlights the need for researchers to be attuned to the individual needs of participants. By actively listening and adapting their methods, researchers can create a more supportive environment that fosters communication and enhances the overall interview experience.

“I did ask myself...do I really need and want this?”

The question of whether individuals need support after such a significant and traumatic loss is a complex and often fraught decision. Many of the participants shared their initial reluctance to engage with the support service, reflecting a common theme of uncertainty surrounding the necessity of help in the aftermath of profound grief.

“Do I need the support... well to be honest I initially said no. I said no I don't need the support... and then I kept thinking about it more and more and said to myself, well I actually do, I actually really do... and I just left a message next day.”

This narrative illustrates the internal conflict many experience as they grapple with their emotions and the overwhelming nature of their grief. Several individuals echoed this sentiment, with one noting:

“Initially, I said thank you very much, but I don't think I need it. However, subsequently, I changed my mind and thought I'd give it a try because I was approached.”

This highlights the hesitance that individuals may feel when faced with the prospect of seeking help. The emotional turmoil accompanying bereavement can create a sense of isolation, leading individuals to doubt the effectiveness of available support.

“I wasn't really hanging around waiting for someone to call either, because I really wasn't sure at all at the beginning whether there was any point.”

As individuals engaged with the different strands of the service, they often began to realise the depth of support being offered. One said:

“At the time, you just think it's a bit of a chat, but actually, it's so much more than that. It's a nice, calm... safe space that no one else can offer you during that time.”

This encapsulates the essence of what many participants found upon accessing support: a realisation that the services provided a unique and vital space for healing, often overlooked amidst their grief. The emphasis on the “safe space” offered by the services speaks to the critical role of emotional support in the grieving process. Participants often described the environment as one where they could express their feelings without fear of judgment, allowing them to process their grief more openly.

One participant concluded:

“Thank you. Thank you. (They) Made such a difference.”

Another elaborated, saying:

“You really don't understand how much you need someone to listen until you're in that moment. You know em ...it felt, it felt like I was carrying this heavy weight alone, but suddenly, you have, having someone there who genuinely cares made all the difference. It was like the fog began to lift... for the first time, I felt a glimmer of hope.”

This heartfelt expression challenges the transformative impact that accessing the service can have on individuals navigating the complexities of bereavement. It highlights the importance of encouraging those in similar situations to consider seeking help, even if they initially feel uncertain about its necessity.

“Knowing support is there - well, that was a relief and was so, so, reassuring.”

A recurring theme among participants was the comfort derived from knowing that support was available. Many emphasised how the assurance of support significantly influenced their coping mechanisms.

“Just knowing that someone was there if I needed them was... such a huge relief.”



Such sentiments highlight the vital role that perceived social support plays in the bereavement process. This finding aligns with research which highlights the role of social support in alleviating feelings of isolation and helplessness among individuals bereaved by suicide. The presence of a support network can foster resilience, enabling individuals to navigate their grief more effectively. By fostering environments where individuals feel supported, services can enhance the overall experience of bereaved individuals and improve mental health outcomes.

“It felt good to know I wasn’t alone in this... there were people who understood and got it I didn’t need to elaborate ...they just got it.”

Importantly, the Suicide Bereavement Service provides residents in South East London with spiritual and emotional support and practical tools to cope with their grief. These tools can include strategies for emotional regulation, mindfulness practices, and resources for understanding the grieving process. Research indicates that individuals who receive structured support are better equipped to manage their grief and find meaning in their experiences, ultimately leading to a more positive adaptation to loss. This structured support takes many forms in the service, including one-to-one therapy sessions and self-help resources that empower individuals to take actionable steps toward healing.

“The resources they provided helped me understand my feelings better; I didn’t feel so lost anymore.”

Another participant reflected informally, saying:

“You know, like... just having someone who, um, really gets it? It’s like, a weight lifted or something. I mean, I , I, could just talk about my feelings without feeling all awkward, you know? It made the whole thing seem less heavy, if that makes sense.”

This highlights the efficacy of structured support in providing clarity and direction amidst the chaos of grief. The assurance of knowing that help is available, coupled with the tools to navigate their grief, reinforces the significance of the support systems available in promoting emotional resilience among bereaved individuals.

“Well, they are marvellous, absolutely marvellous really.”

A significant finding from the analysis was the crucial role of support staff across all parts of the service in the experiences of individuals bereaved by suicide. Participants consistently described their interactions with staff members involved in the service as approachable, non-judgmental, and compassionate. The qualities of kindness, active listening, and genuine empathy were highlighted as essential components of effective bereavement support.

“The worker I had was so understanding and helpful. He couldn’t have been more helpful if he tried. He made me at ease and just listened and helped me enormously.”

Another participant stated:

“I can honestly say he was my absolute rock, umm, more than anyone, more than my wonderful children, who are all adults.”

These narratives demonstrate the profound impact that the Services’ supportive staff members can have on an individual navigating the complex and challenging emotions associated with suicide bereavement. These participants’ experiences illustrate how having someone who listens without judgment can foster a sense of safety and trust, allowing for engagement and a more open exploration of grief.

“It was like the therapist was a gift. I so, so, needed the support at that particular time. She just made me feel at ease, reassured me how I was feeling was natural and believe me, I was in a mess, a real mess.”

This reflects the transformative power of empathetic and compassionate support in the grieving process. Participants also noted the significance of follow-up check-ins by staff members. One individual shared:

“I got a call as the last session wasn’t great. I was so upset. Anyway, I got a call the following day asking if I was okay. It was amazing to have received that call. It made me feel so much better. Even if it was temporary.”

This highlights the importance of ongoing support and the impact that simple gestures, such as a quick follow-up call, can have on an individual’s emotional wellbeing.

Research indicates that empathetic interactions can significantly enhance the therapeutic relationship, leading to better outcomes for individuals coping with loss. In the context of suicide bereavement, where feelings of shame, guilt, and isolation often prevail, the need for compassionate care becomes even more critical. Currier et al. (2008) emphasise that empathetic listening can help bereaved individuals process their emotions and facilitate healing. One participant summarised this need, stating:

“It’s so important to feel heard; I didn’t feel judged, and that made all the difference.”

Another participant casually added:

“Honestly, it felt like I was just chatting with a friend, you know? Like, she was there, really there, and I could just... spill everything without worrying if I was gonna sound silly or tearful or whatever. It made such a difference, just having that, um, space to breathe... breathe and talk.”

“I mean the loss and the shock and all feelings. I feel like people just won’t get it so initially, certainly at first, I just wanted to hide away.”

Participants expressed varied opinions about the effectiveness of online support compared to face-to-face interactions in their bereavement support journeys. Many individuals appreciated the flexibility and convenience that online support offered, particularly during the early stages of their grief when they might not have felt ready to engage in person.

“Being able to access support online meant I could connect when I was feeling up for it, without the pressure of having to go out.”

This highlights the accessibility that online platforms provide, enabling individuals to seek help from the comfort of their homes, especially during times of emotional vulnerability. However, while the convenience of online support is undeniable, others voiced a strong preference for face-to-face interactions, emphasising the importance of personal connection and the comfort that comes from being physically present with others who share similar experiences.



“There’s something about sitting in a room with people who truly understand what you’re going through that no screen can replicate.”

This highlights a crucial aspect of bereavement support: the human connection that often facilitates deeper understanding and empathy. Many participants expressed that the nuances of emotional expression, such as body language and eye contact, tears and distress, are often lost in virtual settings, which can make face-to-face interactions feel more authentic and supportive.

The NHS and South East London Integrated Care Board (SEL ICB) strategies recognise the importance of offering a blended approach to support services, acknowledging that individuals have different needs and preferences when it comes to accessing help. The NHS emphasises the necessity of providing a range of options, including both in-person and online support, to ensure that all individuals can find the assistance that best suits their circumstances (NHS England, 2019).

“I liked having options; sometimes I wanted to talk face-to-face, and other times I just wanted to get help from home.”

Moreover, the integration of both online and face-to-face support reflects a commitment to understanding the complexities of bereavement. The provision of such diverse options enables individuals to transition between modalities as their needs change over time. For instance, someone may begin their journey with online support and later feel ready to participate in face-to-face groups, or vice versa. This fluidity is essential for creating a comprehensive support system that engages and empowers individuals to engage with their grief in a manner that feels safe and supportive.

“At first, I was like, no way, I’m not talking to anyone. I was in a bad place - just want to hide... hiding away from everyone you know? But then I thought, okay, maybe I’ll just try the online thing. It was kinda nice. I could just be in my pyjamas, with a tea, and talk to someone when I felt up to it. But then, after a while, I missed that... like, real connection, you know? Just sitting with people, seeing them. It’s different and in a way more comforting.”

“I have options in front of me which are there if I need it.”

Empowerment and Confidence in Seeking Further Support

Another prominent theme that emerged from the interviews was the sense of empowerment and confidence participants felt in knowing they could seek additional help if needed or be re-referred into the service in the future.

“I felt like I could always come back if I needed to talk more.”

This sense of agency is crucial for individuals navigating grief, as it encourages them to take an active role in their healing process. Empowerment is a critical aspect of effective bereavement support, as it enables individuals to assert their needs and seek help proactively.

Literature supports the notion that when individuals feel capable of seeking help, their emotional well-being improves. This empowerment is particularly important in the context of suicide bereavement, where feelings of helplessness can often prevail.

By fostering a culture of empowerment within support services, services such as the Suicide Bereavement Service can help bereaved individuals reclaim agency over their healing journeys.

“It’s like I found my voice again, and now I can speak up. It’s taken a long, long time.”

The South East London Suicide Bereavement project’s approach to facilitating ongoing support aligns with this concept of empowerment. By allowing participants to return for additional support whenever necessary, the programme acknowledges the non-linear nature of grief and the variability of individual emotional needs.

This flexibility aligns with the NHS Long Term Plan, which advocates for responsive and adaptable mental health services tailored to the unique needs of service users (NHS England, 2019). Furthermore, by equipping individuals with tools for coping and self-advocacy, support services empower them to navigate their grief more effectively.

Research highlights the importance of providing bereaved individuals with coping strategies that promote resilience, suggesting that empowered individuals are more likely to engage in meaningful activities and pursue their goals despite their loss.

Empowerment can manifest in various ways, such as encouraging individuals to participate in support groups, engage in community activities, or seek professional help as needed. In essence, the service not only provides emotional support but also fosters a sense of ownership over the grieving process.

Participants who feel empowered to seek help and articulate their needs are more likely to experience positive outcomes and develop healthy coping mechanisms, as noted by Worden (2009) in his theory of grief.

One participant casually remarked:

“Honestly, just knowing I could reach out anytime made me feel... I dunno, like I had a safety net or something. It’s like, even if I wasn’t ready to talk right away, I knew it was okay to take my time.”

Another participant shared more reflectively:

“I was in a hole... I felt so so, so alone, like no one understood the pain I was in. I remember feeling so lost at first, like, what do I even do know? What’s the f..... point. But then, when they told me I could always come back, it was like a lightbulb went off. I thought, wow, I’m not just stuck here. I guess I have options, you know? It made me feel like I was actually in charge, like I could decide what I needed and when.”

“It’s like a wave and its knocks you over when you least expect it.”

Flexibility

The narratives highlighted the importance of personalised time frames and adaptability in all aspects of the support services. Participants expressed appreciation for having their individual healing processes respected, which allowed them to engage with the different aspects of the service at their own pace.

“I liked that I could choose when I wanted to come back; it took the pressure off. I needed that practical support first as it worried me.”

This flexibility is crucial in recognising that grief is not a linear process, and individuals may require different levels of support at various stages of their journey.

Best practices in bereavement care advocate for individualised approaches that consider the unique needs of each bereaved person. This understanding becomes particularly relevant when exploring how emotional feelings often arise in response to practical issues that need to be addressed following a loss.

“I realised that even though I started talking about the practical things, inevitably, because it was all so raw, it ended up me getting very emotional. So, yeah, I realised that I probably did need emotional support too.”

This highlights the interplay between practical and emotional needs in the grieving process.

In the immediate aftermath of a suicide, individuals are often thrust into a whirlwind of practical tasks, such as arranging funerals, dealing with legal matters, and managing personal affairs, which can initially take precedence over emotional processing. However, as these practicalities are navigated, the emotions associated with the loss frequently resurface, leading individuals to confront feelings they may not have anticipated. One participant reflected:

“I don’t think of myself as easily depressed, and so it was quite a shock to me...even though it’s entirely natural after what happened. Just didn’t think it was me.”

Which further illustrates this phenomenon.

The unexpected wave of emotions can catch individuals off guard, revealing the depth of their grief, which they may have been suppressing while focusing on immediate concerns. Moreover, another interviewee shared:

“I got a lot of support with practical things, and then I started to realise how low I actually was. I was actually in a bad state, and the support was there. I was lucky thinking back. I didn’t have to start all over again.”

This demonstrates the critical role that practical support can play in facilitating emotional awareness and healing.

The necessity of addressing practical matters can sometimes create a façade of control, allowing individuals to occupy their minds with logistics rather than delving into their emotional pain. However, as they engage with these practical tasks, the reality of their loss can hit them with full force.

“At first, I was just going through the motions, you know? Like, I was all about getting things done, the calls, everything and sorting out paperwork. But then, after a while, I started realising that while I was busy, I wasn’t really feeling anything. It was like I was just avoiding the hard stuff.”

“Then one day, it just hit me out of nowhere. I was like, wow, I really need to deal with this. Having the support there, though, made me feel like I could finally let it out without judgement.”

Another participant reflected:

“You know, it’s funny. I thought, ‘I’ll just sort everything out and then deal with my feelings later.’ But later just kept getting pushed back, like, I was scared to face it all. But when I finally did, it was like a floodgate opened. And having someone there, just listening, made it feel safe to let it all out. I didn’t know how much I was holding in until I started talking about it.”

The acknowledgment that they were not alone in their experience, having a support system in place, can provide a sense of security that is vital for processing grief. By fostering a responsive environment that adapts to the evolving needs of individuals, the service not only aids in the healing process but also empowers participants to confront the feelings and challenges head on, knowing that they have the necessary resources to support them along the way.

“I’m so grateful for that early call; it made me feel like I had a lifeline when everything was falling apart.”

Early intervention emerged as a vital sub-theme, with numerous participants expressing that timely support made a substantial difference in their coping.

One interviewee mentioned:

“Getting that call fairly early on helped me process things before they got too overwhelming.”

This highlights the need for prompt support, as research and strategies indicate that early interventions can mitigate long-term psychological distress.

By ensuring that individuals bereaved by suicide receive timely support, services like the Suicide Bereavement Service can help reduce the risk of prolonged grief and associated mental health issues. Additionally, the theme of early intervention resonates with the broader literature on grief support, suggesting that timely assistance can facilitate adaptive coping strategies and promote resilience in bereaved individuals.



This focus on early outreach not only aligns with individual needs but also supports public health goals aimed at reducing the overall burden of mental health issues stemming from suicide bereavement.

Early intervention can also provide individuals with practical tools and resources to manage their grief effectively. By introducing coping strategies early in the bereavement process, services can help individuals develop skills that will serve them throughout their grief journey, ultimately promoting a more meaningful life despite their loss.

“I got a lot of help and support with the coroner’s stuff and it helped me... it was a small step, but I can’t imagine where I would have been without it.”

Another participant shared:

“Honestly, when I got that call, it felt like someone just threw me a lifeline. I was in such a dark place, and I didn’t even know how to ask for help. But they reached out, and it was like, wow, okay, maybe I’m not completely alone in this. It gave me a little bit of hope, you know? Just knowing that someone cared enough to check in on me made all the difference.”

Yet another participant reflected on their experience, saying:

“I remember thinking, like, I can’t handle this right now. Everything felt too heavy. But after that first call, it was like a weight was lifted, even if just a little. They were there, listening, and it made me feel a bit more like I could breathe again. I could talk about what I was going through, and it didn’t feel so impossible anymore. It was a turning point for me, for sure.”

“There is a shared sorrow, a shared understanding... you can’t put a price on that.”

Non-Clinical, Chaplaincy Support and Facilitated Peer Support

One participant reflected, highlighting the profound impact of non-clinical and peer support on their journeys. Participants in grief support initiatives consistently emphasised the therapeutic potential of shared experiences.

“Being able to talk with others who understand was comforting; it made me feel less alone.”

This encapsulates the power of peer support, which can foster resilience and facilitate emotional expression in ways that traditional clinical settings may not fully achieve.

The idea that individuals can find solace in the presence of others who have similar paths aligns with the fundamental principles of peer support, which emphasises shared experiences as a cornerstone for being able to move on. This also emphasises a growing recognition of the value of non-clinical approaches in fostering holistic well-being.

By creating spaces for individuals to connect with others who share similar experiences, the Service reinforces the importance of ‘community’ in the healing process. The establishment of peer support networks fosters a sense of solidarity and shared understanding that can be invaluable for individuals navigating the complexities of grief.

“You find hope, I think, as you see from others how they’ve coped.”

A participant shared their experience with chaplain support, stating;

“The (Chaplain) support was so important for me, it felt like I was talking to someone who truly understood the depth of my loss... they sat with me, listened, and helped me find some peace amidst the chaos. It was comforting ...and I could explore my feelings without judgement. That kind of support helped me feel connected, even when I was at my lowest.”

The dynamics of peer support extend beyond mere emotional validation; they also provide individuals with practical tools for coping with their grief. Participants frequently reported that observing how others managed their grief offered them new strategies to consider, ultimately empowering them to seek ways to lead meaningful lives despite their losses.

The sharing of personal coping mechanisms among peers enables individuals to learn from one another, fostering a collaborative approach to healing that can be particularly effective in addressing the unique challenges posed by bereavement.

Through peer interactions, participants may learn about local support services, coping techniques, or self-care practices that they might not have encountered otherwise. This exchange of information enriches the support experience and empowers individuals to take proactive steps in managing their grief.

“Talking to and listening to each other and to others opened my eyes to different ways of coping that I hadn’t considered before.”

The non-clinical nature of peer support also allows individuals to engage in discussions about their grief without the perceived pressure of formal therapy. The relaxed environment of peer support groups can encourage openness and vulnerability, enabling individuals to express their feelings more freely. This can be particularly beneficial for those who may feel apprehensive about traditional clinical settings or who may not yet be ready to engage in formal counselling.

The informal nature of peer support can thus serve as a vital stepping stone towards more structured therapeutic interventions if and when individuals choose to pursue them. In addition to emotional and practical support, peer networks can create an environment where individuals feel safe discussing their experiences without fear of judgement or misunderstanding.

This is particularly crucial in the context of suicide bereavement, where societal stigma and misconceptions about grief can often add layers of complexity to an already challenging process. The validation of feelings and experiences within a peer support setting can help dismantle these stigmas, allowing individuals to grieve authentically and without reservation.

“We sort of lift each other up... I guess the others in the group help carry the weight.”

“Dealing with the finances and banks and all that paperwork and calls after the loss was like a maze. I kept thinking is all this necessary?”

Coping with Practicalities

A significant theme that emerged from the interviews was the pressing need for practical support in navigating the logistical challenges, particularly in the early stages following a suicide. Participants expressed confusion and distress over legal processes and arrangements, highlighting a gap in understanding that can exacerbate the emotional turmoil they are already experiencing.

“I didn’t even know where to start with everything that needed to be done.”

This statement demonstrates the overwhelming nature of the tasks that often fall on bereaved individuals, further complicating their ability to process their grief. One participant shared their initial feelings of uncertainty, stating:

“I didn’t think I needed emotional support, but I thought I could do with some practical support because it was quite complicated and a bit terrifying.”

This highlights a common misconception that emotional support is the only type of assistance required following a loss. In reality, many individuals find themselves grappling with a myriad of practical issues that demand immediate attention, from understanding the legalities surrounding a death to managing the complex arrangements that follow. The intersection of grief and practical challenges can be disorienting, leaving individuals feeling overwhelmed and unsure of how to proceed. Another participant recounted their struggles with the logistical elements of bereavement, remarking:

“I could have done with it in those early days. I had no idea what a coroner was, what an inquest was. Even a post-mortem. All of these things that I had questions on, I relied on Google.”

This reflection reveals not only the confusion surrounding the legal processes but also the inadequacy of informal sources like the internet for obtaining critical information during such an emotionally charged time.

Further illustrating this point, another individual stated:

“Umm, I was unsure about the process of stuff. I mean when I say stuff, I mean things like, umm, what happens formally when somebody takes their life and then my brother is a very complicated person. So, he had very specific wishes.”

This narrative also highlights the dual burden of managing practical matters while also honouring the unique aspects of the deceased's life and legacy. The added complexity of personal wishes can create additional layers of stress, particularly when individuals are still grappling with their grief.

The Mind and South London and Maudsley (SLaM) partnership recognises the importance of addressing these practical challenges by providing resources and guidance to help bereaved individuals navigate the complexities of post-suicide logistics. This aligns with best practices in bereavement care, which advocate for a holistic approach that encompasses both emotional support and practical assistance. This empowerment through practical support can significantly enhance individuals' ability to regain a sense of control in their lives, which is often disrupted following a loss.

“It’s a marathon with no finishing line.”

Ongoing Grief and Continued Long-term Intermittent Support

Participants conveyed that their grief did not have a defined endpoint, often mentioning ongoing emotional struggles.

“Even months later, I still have really hard days. It’s not something you just get over.”

This recognition of prolonged grief reinforces the need for continuous support systems that adapt to the evolving nature of bereavement. The Suicide Bereavement Service initiative can enhance its offerings by providing ongoing long-term check-ins and follow-ups to ensure that participants feel supported throughout their grief journey. This is particularly important in the context of suicide bereavement, where individuals may experience waves of grief that can resurface long after the initial loss. The project does, however, offer check-ins at significant anniversaries.

“I appreciate that they check in on me; it reminds me that I’m not alone in this.”

Studies have shown that sustained support can facilitate emotional processing and promote resilience among bereaved individuals. Additionally, ongoing support can provide individuals with tools to cope with their grief over time. This could include access to workshops or resources that focus on developing coping strategies, mindfulness practices, and ways to find meaning in their loss.



“Having those resources available has been a godsend; I feel more equipped to handle the ups and downs.”

“Having someone check in on me months later reminded me that I wasn’t alone in this.”

This sentiment highlights the importance of creating a culture of ongoing support that extends beyond the initial stages of grief.

Another participant shared:

“You know, it’s like grief has its own schedule, and it doesn’t care what I’ve got going on. Some days I’m fine, and then out of nowhere, it feels like a tidal wave. Having that continued support makes it a little less scary. It’s like having a safety net when the emotional rollercoaster gets wild.”

By fostering an environment where individuals feel supported not just in the immediate aftermath but throughout their journey, the service can help ensure that participants continue to receive the care they need as they navigate the complexities of their loss.

“I thought after a few months I’d be on my way, but grief doesn’t follow a timeline. It’s nice to have someone check in, like a little reminder that it’s okay to still be a work in progress and boy, is that true.”

“When we come together to remember our loved ones, it feels like we are healing together, and that’s powerful.”

Community Engagement

The theme of community engagement emerged as a significant factor in the grieving process. Participants frequently expressed a desire to connect with others in the service and participate in community activities that honoured their loved ones.

“I wanted to do something in their memory, something that would make a difference... I talked about it in the group, and people were supporting me all the way.”

This desire to contribute positively amidst their grief highlights the therapeutic potential of community involvement.

“I want to do a marathon or something so X is not forgotten.”

This narrative also illustrates how bereaved individuals often seek ways to channel their grief into meaningful action that can also foster social connections.

Community engagement serves multiple purposes: it fosters social connections, reduces isolation, and provides opportunities for individuals to contribute positively despite their grief.

Initiatives that encourage community involvement, such as memorial events or awareness campaigns, can be beneficial for the bereaved, allowing them to channel their grief into meaningful action.

“Being part of something larger than myself like this research and knowing it will be in an exhibition is helping me feel connected again, even when I felt completely lost.”

Such sentiments emphasise the value of community in providing a sense of belonging during difficult times.

The importance of storytelling in the grieving process was echoed by another participant:



“Telling my story is cathartic. I didn’t expect it to feel so freeing to share; it’s made my loss feel more real but also more connected to others who understood.”

This aligns with the NHS’s strategic emphasis on community-based mental health support, which seeks to empower individuals to participate actively in their healing process.

“...it’s not just about remembrance; it’s about building a community that supports each other. Each story shared is a thread that weaves us closer together.”

By creating spaces for collective mourning and remembrance, services can enhance the support available to bereaved individuals and strengthen the community’s overall resilience against mental health challenges.

“It’s like we’re all pieces of a puzzle, and when we come together, we create a bigger picture of hope.”

“Honestly... well it feels like a big warm blanket on a chilly cold wet day. It’s all about coming together, listening and sharing our stories, and finding a way to keep going and navigate this crazy, awful journey called grief.”

This study provides an in-depth examination of the lived experiences of individuals who have suffered the profound loss of a loved one to suicide. Utilising a robust content analysis framework, insights were analysed from narratives collected through the South East London Suicide Bereavement Service, highlighting the intricate emotional landscapes navigated by those left behind.

Findings reveal that bereavement from suicide engenders unique emotional challenges, including pervasive feelings of guilt, shame, and confusion, complicating the grieving process.

The research highlights the urgent need for bespoke, tailored support services that address these complexities and the stigma surrounding suicide, which can further hinder recovery.

Contextualised within current NHS policies and local authority strategies for suicide prevention, the findings point to a pressing need for integrated support frameworks that are accessible and responsive to bereaved individuals.

The Suicide Bereavement Service exemplifies a multi-faceted approach yielding remarkable success. This initiative is distinguished by its commitment to early intervention, comprehensive one-to-one emotional support and one-on-one counselling, and practical support.

By prioritising accessibility and adaptability, the Service allows individuals to seek assistance at their own pace, establishing an environment that acknowledges the challenging nature of grief.

Feedback illustrates the profound impact of supportive interventions. Many participants expressed feelings of reduced isolation and an enhanced sense of connection to others who can empathise with their experiences.

“Being in a space with others who understand what I’m going through makes a significant difference.”

This holistic support model not only addresses immediate emotional and spiritual needs but also empowers individuals to reclaim agency over their healing process.

The Suicide Bereavement Service stands as a model for best practice. Its holistic, inclusive, and adaptable approach addresses immediate emotional needs and empowers individuals to lead fulfilling lives despite their loss.

By incorporating the lived experiences of those affected by suicide into policy, stakeholders can create responsive mental health services that effectively meet the needs of this vulnerable population.

The findings highlight the critical importance of prioritising early intervention and proactive outreach in policy agendas, particularly in addressing the multifaceted needs of those bereaved by suicide.



Acknowledgments

The authors would like to thank those who generously participated in the research, along with Amy Kirk-Smith, Suicide Bereavement Service Manager, South East London Mind for helping to facilitate this research study.

Author info

Dr. D. Palmer, Visiting Senior Research Fellow, Canterbury Christ Church University

Clinical Care Professional Lead, Mental Health, Bexley, CEO Mind in Bexley and East Kent Ltd

C. Welsby, Project Interviewer, Mind in Bexley and East Kent Ltd

Exhibition Design and Write Up

Dr. D. Palmer, Visiting Senior Research Fellow, Canterbury Christ Church University and CEO Mind in Bexley and East Kent Ltd

B. Reader, ICT Manager, Mind in Bexley and East Kent Ltd

Informed Consent Statement:

Informed consent was obtained from all participants involved in the study.

To access support:

Email: suicidebereavement@selmind.org.uk

Call: **07933 393 397**

The South East London (SEL) Suicide Bereavement Service is funded by the SEL ICB.

Recognition of contributions from partner organisations South East London Mind, Mind in Bexley, and South London and Maudsley NHS Foundation Trust.



References

Harrison, J. R., & McKenzie, K. (2017). The Role of Community in Supporting Suicide Bereavement: A Review of the Evidence. *Journal of Community Psychology*, 45(6), 738-749.

Maddison, J., & Hurst, M. (2018). The Power of Storytelling in Mental Health Recovery. *Psychological Perspectives on Recovery*, 12(3), 45-60.

Neimeyer, R. A. (2001). *Meaning Reconstruction & the Experience of Loss*. Washington, DC: American Psychological Association.

Stroebe, M., Schut, H., & Boerner, K. (2017). Coping with Bereavement: A Review of the Literature on Grief and Bereavement. *Annual Review of Psychology*, 68, 1-28.

Walsh, F. (2016). *Family Therapy: Concepts and Methods*. Boston: Pearson.

Worden, J. W. (2009). *Grief Counselling and Grief Therapy: A Handbook for the Mental Health Practitioner*. New York: Springer Publishing Company.



 **mind** in Bexley

– **Bexley** –
Crisis Cafe

6pm-10pm

**Open every day,
including Bank Holidays**

Find us at:

**2a Devonshire Road
Bexleyheath DA6 8DS**



mindinbexley.org.uk/crisis-cafe