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Exploring the complexities of suicide bereavement research

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Abstract

Statistics indicate a projected increase in the number of suicides by those in receipt of mental health services in England. Research has also shown that the impact of suicide on individuals who have lost someone to suicide have an increased risk of poor physical and mental health, including a higher risk of suicidality. However, research within suicide bereavement is limited due to the lack of methodologically robust studies involving those bereaved through suicide. This paper will offer an overview of current debates in the suicide bereavement literature and discuss a forthcoming qualitative study that will examine the impact of suicide by those in receipt of mental health services on their families. The current research will utilise a constructivist grounded theory approach. Analysis of the data will include a process of coding and comparison, leading to theory generation. This study aims to contribute to knowledge of the impact of suicide on family members (where the deceased was in receipt of mental health services) and how to provide effective post-intervention support for these particular families.

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1. Introduction

Research examining the impact of suicide on family members and friends has been limited. The latest statistics for suicide published by the Department of Health (DH) in 2014, estimate a 13% increase from 2010 to 2011, with figures anticipated to rise from 1,175 to 1,333. These statistics are based on individuals who were in receipt of mental health services the year prior to their death. Acting on this growing issue, the most recent national suicide prevention policy by the DH, outlines current developments in public policy which advocate a need for introducing

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strategies to target the increase of suicide (DH, 2012). A recent addition to this strategy acknowledges the impact of suicide within family and communities, and the importance of including information and support not only for close friends and family members, but also those who are indirectly related, including health professionals. This policy further highlights that those affected by the suicide of a loved one, may be at a higher risk of mental health problems including suicidality. Therefore, recommending a need for effective and timely practical support to assist the grieving process and promote the recovery of individuals affected by suicide. Determining the exact number of individuals in a person's social network who are affected by a suicide is difficult to establish from current literature, with approximations varying from 6 individuals to 100 people (Cerel, Padgett, Conwell, & Reed, 2009). Despite this uncertainty, the increase in suicide numbers confirms that more individuals will be exposed to and affected by a suicide in the near future.

Internationally, suicide figures published by the World Health Organization (WHO, 2014) reported approximately 804,000 suicides in 2012. It is important to acknowledge that under-reporting of figures may occur in some countries where suicide is still classed as illegal, as well as the contentiousness of recording a death as suicide. The WHO further adds that globally, suicide is attributed to 50% of violent deaths in men and 71% in women. In terms of suicide prevention within the international context, WHO advocate that communities can prove to be a useful resource in providing social support to individuals at risk of suicide, as well as supporting bereaved individuals.

Whilst it is acknowledged that a wealth of information in this area exists, this paper will only aim to highlight current debates within grief and bereavement research literature, specifically in relation to suicide. Accepting that a comprehensive literature review is beyond the scope of this paper, the focus will be on the complexities in suicide bereavement research, and draw attention to gaps in knowledge in understanding the experiences of those who have lost someone to suicide. This paper will also introduce a forthcoming empirical study which will aim to understand the impact of suicide on family members, where the deceased was in receipt of mental health services prior to their death.

1.1. Conceptualising key terms

In order to contextualise key debates within suicide bereavement literature, it is necessary to conceptualise key terms. Reviewing empirical literature within suicide research has uncovered disagreement and difficulties amongst researchers in operationalising key terms. In particular, providing a term to describe individuals who have lost someone to suicide has brought much contention (Cutcliffe & Santos, 2012). Emerging suicide bereavement literature has proposed the term 'suicide survivor' (Jordan & McIntosh, 2011), which describes a "person who has lost a significant other (or a loved one) by suicide, and whose life is changed because of that loss" (Andriessen, 2009, p.43). Whilst most researchers agree with this definition (Farberow, 2005), Andriessen (2009) outlines limitations of the definition and also recognises that using the term suicide survivors can be confused with someone who has survived a suicide attempt. Suicide survivor was also originally used to include only family or relatives of the deceased, however, recent research now includes individuals who may not be related or closely linked with the deceased, but may have been in some way affected by the suicide such as friends for example (Cutcliffe & Santos, 2012). It is, therefore, not clear who in a person's social network would be considered to be a suicide survivor. However, for the practical purpose of this paper, suicide survivor will be used to describe someone affected by a suicide, and it is a term widely used and accepted in literature.

Zisook and Shear (2009) further discuss difficulties in conceptualising other key terms in this research area such as 'bereavement', 'mourning, and 'grief'. They argue these terms are used interchangeably and fail to recognise the subtle differences in meanings. They define 'grief' as "the emotional, cognitive, functional and behavioural responses to death", and describe 'mourning' as the "behavioural manifestations of grief, which are influenced by social and cultural rituals, such as funerals, visitations, or other customs" (Zisook & Shear, 2009, p.67). Furthermore, Bereavement is described as "the objective reality of a loss" by Klein and Alexander (2003, p.261).

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