Supplementary Table 1. Articles included in the review

<table>
<thead>
<tr>
<th>Authors</th>
<th>Design and methods</th>
<th>Participants</th>
<th>Instrument/Measures</th>
<th>Key Findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Causer et al (2021)</td>
<td>Qualitative</td>
<td>N = 19 Staff at HEI’s:</td>
<td>Survey and Interviews developed and conducted by the authors</td>
<td>Staff described how in “bearing witness” to student suicide that all subsequent experiences were shaped. This included practical tasks immediately following the death by suicide, physical, emotional and psychological changes and experiences of support.</td>
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<tr>
<td>(43)</td>
<td>Grounded theory</td>
<td>n = 8 Male (42%)</td>
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<tr>
<td>UK</td>
<td></td>
<td>n = 11 Female (58%)</td>
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<tr>
<td>Rompalo et al (2021)</td>
<td>Qualitative</td>
<td>N = 8 student affairs administrators</td>
<td>Online interviews</td>
<td>HEI administrators identified three main challenges i) lack of postvention training ii) managing notifications about the student death before it gets announced on social media iii) balancing remembering the student with a memorial while minimising the risk of suicide contagion on</td>
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<tr>
<td>(44)</td>
<td>Phenomenology</td>
<td>Gender not stated</td>
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<tr>
<td>USA</td>
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</table>
HEI administrators also stated that there are those that felt that by having memorials one was "glorifying" the deceased student.

### MIXED METHOD STUDIES

<table>
<thead>
<tr>
<th>Study</th>
<th>Design</th>
<th>Sample Description</th>
<th>Data Collection Methods</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allen et al (1993)</td>
<td>Mixed methods</td>
<td>n = 30 male (50%) n = 30 female (50%) undergraduate university students. Mean age 21 years. 75% Caucasian, 15% African-American, 9% other ethnicity</td>
<td>State-Trait Anxiety Inventory and interview (46)</td>
<td>Those bereaved by suicide are perceived to be different from individuals bereaved by other causes of death. Individuals bereaved by suicide are also viewed as more psychologically disturbed and more able to prevent the deaths compared to accidental or natural deaths.</td>
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<td>USA</td>
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<tr>
<td>*Pitman et al (2017b)</td>
<td>Mixed methods</td>
<td>N = 429 staff and students at British HEI’s bereaved by suicide:</td>
<td>Online questionnaire developed by the authors with 119 closed quantitative questions and 20 open ended qualitative questions.</td>
<td>Following their experiences of suicide bereavement, the respondents saw suicide as a tangible option, identified their shared vulnerability to</td>
</tr>
<tr>
<td>Location</td>
<td>Study Design</td>
<td>Sample Description</td>
<td>Methodology</td>
<td>Findings</td>
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<tr>
<td>UK</td>
<td>Quantitative cross-sectional; Qualitative descriptive</td>
<td>Male: not stated&lt;br&gt;Female: 82% (number not stated)&lt;br&gt;Mean age: 25.3 years</td>
<td>One out of 20 questions were the focus of this report.</td>
<td>Suicide and made personal determination to avoid dying by suicide.</td>
</tr>
<tr>
<td><em>Pitman et al (2018a)</em> (48)</td>
<td>Mixed methods</td>
<td>N = 420 staff and students at British HEI’s bereaved by suicide:&lt;br&gt;n = 71 Male (17%)&lt;br&gt;n = 349 Female (83%)</td>
<td>Online questionnaire developed by the authors with 119 closed quantitative questions and 20 open ended qualitative questions. 2 out of 20 questions were the focus of this report.</td>
<td>In the quantitative responses, the majority of the participants (75%) reported receiving informal support from friends. 41% of those who received support also received support from a mental health professional. The participants were also able to describe the experience of the support received, articulate specific support needs such as proactive support, and also outline reasons for not seeking support because they believed they would not find support valuable.</td>
</tr>
<tr>
<td><em>Pitman et al (2018b)</em> (49)</td>
<td>Mixed methods</td>
<td>N = 460 staff and students at British HEI’s bereaved by suicide:&lt;br&gt;n = 76 Male (17%)</td>
<td>Online questionnaire developed by the authors with 119 closed quantitative questions and 20 open ended qualitative questions.</td>
<td>The respondents bereaved by suicide noted specific aspects of grief which impacted their work performance, particularly sadness, poor</td>
</tr>
</tbody>
</table>
n = 384 Female (83%)

2 out of 20 questions were the focus of this report.

concentration, confusion and anxiety. Respondents also cited structural challenges in work and educational settings, such as lack of support.

*Pitman et al (2018c) (50)

Mixed methods

(Quantitative cross-sectional; Qualitative descriptive)

n = 27 staff and students at British HEI’s bereaved by suicide:

n = 76 Male (17%)

n = 384 Female (83%)

Following cross-sectional survey participants invited for face to face interview

Most of the respondents bereaved by suicide who were non-British perceived that others blamed them or their relatives and friends as being responsible for the decedent’s suicide. They further described that they experienced a lack of support from both friends and professionals and this was experienced as stigmatising.

QUANTITATIVE STUDIES

Bailley et al (1999) (51)

Quantitative

Descriptive

Canada

N = 350 university students

n = 259 bereaved by natural causes

n = 57 bereaved by accident

Grief Experience Questionnaire (52)

Impact of Event Scale Texas Revised Inventory of Grief (53)

Questionnaire developed by the authors

Individuals bereaved by suicide reported feeling responsible for the person’s death compared to the other bereaved groups (accident and natural causes).
n = 34 bereaved by suicide

n = 90 Male (26.2%)

n = 253 Female (73.8)

n = 7 Other

Mean age: 20.75 years

87.9% Caucasian


USA

Quantitative

Cross-sectional

N = 118 undergraduate university students:

n = 31 bereaved by natural causes

n = 8 bereaved by accident

n = 6 bereaved by murder

n = 4 bereaved by suicide

Male: 41% (number not stated)

Female: 59% (number not stated)

94% Protestants (number not stated)

In this sample of undergraduate students, four of the decedents died by suicide.

Prigerson et al. (2008) revised and shortened the Inventory for Traumatic Grief into a 13-item questionnaire that can be used to measure complicated grief and diagnose prolonged grief disorder (55).

Demographic and background questionnaire developed by the authors
<table>
<thead>
<tr>
<th>Study</th>
<th>Country</th>
<th>Design</th>
<th>Sample Size</th>
<th>Details of Sample</th>
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<tbody>
<tr>
<td></td>
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<td>n = 322 Male (33.4%)</td>
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<td>n = 632 Female (65.6%)</td>
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<td>n = 134 bereaved through accidents:</td>
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<td></td>
<td>n = 20 bereaved through homicide</td>
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<td></td>
<td></td>
<td></td>
<td>n = 75 bereaved through suicide</td>
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<tr>
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<td></td>
<td></td>
<td></td>
<td>n = 648 bereaved through illness</td>
</tr>
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<td></td>
<td></td>
<td>n = 87 bereaved through unknown causes</td>
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</tbody>
</table>

75 out of 964 deaths were due to suicide. Suicide is categorised under sudden death bereavement. Sudden death bereavement was associated with increased likelihood of complicated grief symptomatology and increased likelihood of generalised anxiety disorder.

<table>
<thead>
<tr>
<th>McIntosh &amp; Kelly (1992) (62)</th>
<th>USA</th>
<th>Quantitative, Cross-sectional</th>
<th>N = 174 university students:</th>
<th>Demographic questionnaire developed by authors</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td>Suicidal Behaviors Questionnaire (63)</td>
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<td>Impact of Event Scale (64)</td>
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<td>Revised UCLA Loneliness Scale (65)</td>
</tr>
</tbody>
</table>

Thosebereaved by suicide and accidents felt a greater need to understand the death. 87 percent of those bereaved by suicide also indicated that they felt stigmatised by others. There was no difference to the guilt felt by those bereaved by suicide when compared to those bereaved by natural causes and accidents.
**Texas Revised Inventory of Grief (TRIG) (53)**

- \( n = 55 \) Male (32%)
- \( n = 119 \) Female (68%)

**Online questionnaire developed by the authors.**

The group of those bereaved by suicide had higher shame, stigma, guilt and responsibility scores when compared to those bereaved by other means.

**Composite International Diagnostic Interview screen for lifetime depression (69)**

- Individuals bereaved by suicide were significantly less likely to receive informal support compared to those bereaved by natural causes and likely to report delayed receipt of support. In this sample 25 percent (one in four) people bereaved by suicide had received no formal or informal support. 6 percent of the sample bereaved by suicide were significantly less likely to receive informal support compared to those bereaved by natural causes.

**UK**


- \( N = 3432 \) HEI staff and students who had experienced a sudden bereavement of a close contact.
- \( n = 2106 \) bereaved by natural causes
- \( n = 712 \) bereaved by sudden unnatural causes
- \( n = 614 \) bereaved by suicide
- \( n = 648 \) Males (19%)
- \( n = 2784 \) Females (81%)

**UK**

*Pitman et al (2017a) (68) Quantitative Cross-sectional

- \( N = 3432 \) HEI staff and students who had experienced a sudden bereavement of a close contact.
- \( n = 2106 \) bereaved by natural causes
- \( n = 712 \) bereaved by sudden unnatural causes
- \( n = 614 \) bereaved by suicide
- \( n = 648 \) Males (19%)

**Quantitative Cross-sectional**

- Online questionnaire developed by the authors.
- 10-item stigmatization subscale of the Grief Experience Questionnaire (GEQ) (67).
- Secondary measures three related GEQ subscales: shame, responsibility and guilt (52).
<table>
<thead>
<tr>
<th>Study</th>
<th>Design</th>
<th>Country</th>
<th>Sample Details</th>
<th>Instruments</th>
<th>Findings</th>
<th>Supplemental Material Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>Silverman et al (1994) (71)</td>
<td>Quantitative</td>
<td>USA</td>
<td>n = 2784 Females (81%)</td>
<td></td>
<td>suicide reported attempting suicide since the bereavement.</td>
<td>BMJ Publishing Group Limited (BMJ) disclaims all liability and responsibility arising from any reliance placed on this supplemental material which has been supplied by the author(s) BMJ Open doi: 10.1136/bmjopen-2022-068730:e068730. 13 2023;BMJ Open, et al. Allie S-LN</td>
</tr>
</tbody>
</table>
$n = 13$ death by unanticipated natural causes

Mean age: 20.25 years.

$n = 36$ Male (39%)

$n = 56$ Female (61%)

$N = 112$ undergraduate college students

$n = 18$ bereaved by suicide

$n = 13$ bereaved by accident

$n = 10$ bereaved by anticipated natural causes

$n = 10$ bereaved by unanticipated natural causes

$n = 5$ bereaved by homicide

Mean age: 20.5 years old

$n = 32$ Male (29%)

$n = 80$ Female (71%)

An Imagined Group ($n=56$ potential comforters) reported no bereavement within the past two years and no experience of comforting a bereaved person in

Impact of Event Scale (64)

Multiple Affect Adjective Check List-Revised

Perceived Recovery (78)

Interpersonal Support Evaluation List (72)

Perceived Recovery (75)

Perceived Social Support Scale (76)

Helpful/Unhelpful Support (79)

Theoretically based guidelines for scoring facilitativeness of support developed from interviews with bereaved persons (80)

Scale for Prediction of Outcome after

Individuals bereaved by suicide remembered receiving support that was unhelpful and filled with blame while the non-bereaved individuals imagined giving more support.
the past year. Each person was individually matched on gender and age to a bereaved person.

Bereavement adapted from Parkes (81)

Thornton et al (1989) (82)  
USA  
Quantitative  
Descriptive  

<table>
<thead>
<tr>
<th>Study</th>
<th>Design</th>
<th>Sample Size</th>
<th>Gender Distribution</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>N = 89 undergraduate university students</td>
<td></td>
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<td></td>
<td>When death was caused by suicide males were perceived better as a close friend or club member than females. When a child or adolescent died by suicide, more blame was attributed to the griever. The participants perceived the deceased was as having been more psychologically unstable when death was by suicide rather than by illness.</td>
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<tr>
<td>n = 28 Male (31%)</td>
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<tr>
<td>n = 61 Female (69%)</td>
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*Note: these six articles are part of a single study by Pitman and colleagues*