

Effects of Experiencing a Close One's Suicide on Children and Adolescents: Significance of Implementing Postvention Measures

Wpływ doświadczenia samobójczej śmierci bliskiego na dzieci i młodzież. Znaczenie podejmowania działań postwencyjnych

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Received: 11 Oct 2024

Revised: 12 Dec 2024

Accepted: 27 Mar 2025

Published: 30 Jun 2025

Abstract: The reported high incidence of suicides in Poland and worldwide is associated with a growing need to support those experiencing bereavement due to suicide. In this context, the increase in suicidal behaviour among children and young people observed in recent years is particularly worrying. Literature emphasises the difficulty of engaging in dialogue about the taking of one's own life by a loved one, as well as the tendency to exclude this topic from conversations and to stigmatise it. Meanwhile, research dedicated to analysing the role of creating narratives about the experience in question suggests that being able to describe feelings and experiences and share them with others has a beneficial effect on the way grief is experienced. The aim of this paper is to consider the benefits and difficulties of sharing the loss of a loved one to suicide in the context of children and young people's bereavement. To provide answer to the research question, a systematic review of source literature was conducted, which is enriched by references to testimonies of people experiencing the loss in question. Based on the materials collected, the author presents findings and suggestions relevant to providing support to children and adolescents affected by bereavement caused by suicide.

Keywords: suicide, bereavement, children, adolescents, communication

Abstrakt: Odnotowywana wysoka częstość występowania samobójstw w Polsce i na świecie wiąże się ze zwiększoną potrzebą niesienia wsparcia osobom przeżywającym utratę bliskich spowodowaną targnięciem się na własne życie. W tym kontekście szczególnie niepokojący jest obserwowany w ostatnich latach wzrost liczby zachowań samobójczych w grupie dzieci i młodzieży. W literaturze podkreśla się trudność prowadzenia dialogu o odebraniu sobie życia przez bliską osobę, a także skłonność do wykluczania z rozmów tego tematu i jego stygmatyzacji. Tymczasem badania poświęcone analizie roli tworzenia narracji o omawianym doświadczeniu wskazują, że możliwość opisanie uczuć i przeżyć i podzielenie się nimi z otoczeniem ma korzystny wpływ na sposób przechodzenia żałoby. Celem artykułu jest rozważenie korzyści i trudności związanych z dzieleniem utraty bliskiej osoby w wyniku samobójstwa w kontekście przeżywania żałoby przez dzieci i młodzież. W odpowiedzi na postawiony problem badawczy przeprowadzony został systematyczny przegląd literatury przedmiotu, który wzbogacony jest odwołaniami do świadectw ludzi przeżywających omawianą utratę. Na podstawie zgromadzonych materiałów sformułowane zostały spostrzeżenia istotne dla praktyki udzielania wsparcia dzieciom i młodzieży dotkniętym utratą bliskiej osoby spowodowaną samobójstwem.

Słowa kluczowe: samobójstwo, żałoba, dzieci, młodzież, rozmowa



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INTRODUCTION

According to the WHO report, over 720,000 people die by suicide worldwide every year (WHO 2000-2023). The scale of this phenomenon in Poland is reflected in statistical data provided by the National Police Headquarters (KGP) and the Central Statistical Office (GUS), which indicate an upward trend in the number of suicidal behaviours. According to KGP and GUS data from the period of 2017-2023, approximately 12,016 suicide attempts are made in Poland every year, and approximately 5,220 suicidal behaviours end in death.

Literature on the topic provides estimations on the extent to which the experience of loss affects the immediate environment of a suicide victim. It is estimated that, on average, this type of death has an impact on 5-10 people close to the deceased (Shneidman 1973: "at least 5"; Wroblewski 2002: "10"; Berman 2011; Gmitrowicz 2010: "6-10"), who, when afflicted by the loss, inevitably face a difficult mourning process. It should be noted, however, that the majority of studies devoted to the analysis of this process focus on the impact of suicide on the closest relatives of the deceased (e.g. Chen and Laitila 2023; Runeson and Wilcox 2023; Creuzé et al. 2022; Spillane et al. 2017), which may result in underestimating the significance of experiencing bereavement by those who shared their life with the deceased, although were not related with him or her by blood ties.

In response to this observation, Jordan and McIntosh (2011) suggest that when analysing the effects of suicide on those left behind, it is necessary to take into account the nature of the relationship between suicide survivors and the deceased, which they refer to as a psychological bond, rather than a blood bond (Jordan and McIntosh 2011, 7). Such a broader approach to experiencing a loved one's suicide allows, among other things, to reflect on the scars that may be left on the lives of children when a member of their peer group takes his or her own life (cf. Andriessen et al. 2024; Chatizow 2018; Czabański 2009). Addressing this issue is particularly important due to the alarming increase in the number of suicidal acts among children and adolescents.

According to KGP data, in 2023, people aged 13 to 18 made over 2,000 suicide attempts, which indicates a significant growth in the number compared to previous years (cf. KGP and GUS data from 2017-2023). The increasing frequency of suicidal behaviours among children and adolescents is addressed in the literature on the topic (Szadkowski and Podemska 2022; Schonfeld et al. 2023; Morris-Perez et al. 2023) as well as in social debate (e.g. Dziewit 2020). The occurrence of these disturbing changes is often linked with the COVID-19 pandemic, which constituted a particular challenge for young people (Liu et al. 2023; Kim et al. 2022; Mayne et al. 2021; Gracia et al. 2021). The sense of increased anxiety related to the need to face threats to health and life, global organizational chaos reinforced by disinformation (related to gathering and creating knowledge about the new phenomenon) as well as the imposed social isolation (experienced at the stage of development when relationships with a peer group are crucial for building future social competences) must have had an impact on young people.

The increased incidence of suicidal behaviours undoubtedly requires a response such as developing programs aimed at supporting young people. However, it should be noted that literature is dominated by studies devoted to providing support to people experiencing a suicidal crisis, while those emphasizing the importance of undertaking postvention activities among people who have experienced the suicide of a loved person are published much less frequently. Considering that suicide-related bereavement constitutes a significant risk factor for the occurrence of suicidal tendencies in survivors (Logan, Kryszyska and Andriessen 2024; Pitman et al. 2020; Pitman et al. 2016; Brent and Mann 2006; Roy and Janal 2005), it may be stated that undertaking postvention actions in a group of young people affected by suicide of a loved one simultaneously constitutes a preventive measure.

The observed neglect in addressing the topic of providing support to suicide survivors may stem from society's ongoing tendency to marginalize and stigmatize this experience. Research focused on the examination of the taboo around suicidal death (Marek and Oexle 2024; Overvad and Wagoner 2020; Pitman et al. 2018; Chapple, Ziebland and Hawton 2015), noted a tendency to avoid discussing suicide with mourners. It was found that people affected by such a loss are treated by society with less sympathy and are often held responsible for the death of their loved ones (Feigelman and Cerel 2020; Pitman et al. 2018; Sveen and Walby 2008). Suicide survivors are also more likely to feel shame associated with the experience (Levi-Belz and Hamdan 2023; Tal Young et al. 2012). This way, the tabooization and stigmatization of the phenomenon of taking one's own life leads to exclusion and progressive social isolation of people affected by the suicide of a loved one (Hanschmidt et al. 2016).

Taking into account difficulties associated with sharing this experience in a social reality that fails to facilitate the process of working through suicide bereavement, researchers (including Calhoun and Tedeschi 2006; Rynearson 2001; Sands 2008) emphasize the benefits of providing suicide survivors with the possibility of creating a narrative about their loss. The possibility of creating a space for dialogue that could provide those left behind with support in the process of understanding their bereavement seems particularly important in the case of young people. For this reason, it is necessary to consider the benefits and difficulties associated with sharing bereavement by children and young people inflicted by such a loss.

The first part of this article presents the results of a systematic review of literature on the impact of a loved one's suicide on the lives of children and young people. The next part reconstructs the results of research on the role attributed to creating a narrative about this experience by suicide survivors. In the final part, the article focuses on the importance of creating a narrative in the process of healing from the loss of a loved one to suicide, taking into account both the benefits and difficulties associated with engaging in a dialogue. This part presents the results of literature review, as well as testimonies of people experiencing bereavement. Reflection on the power of dialogue in supporting people suffering after the suicide of a loved one was supplemented by a review of methods based

on narrative techniques that are used in the work with suicide survivors as well as by highlighting what is most important for the practice of providing support to people affected by suicide.

1. THE IMPACT OF THE EXPERIENCE OF SUICIDAL DEATH OF A LOVED ONE ON CHILDREN AND ADOLESCENTS

Literature devoted to the analysis of how children and adolescents cope with the suicide of a loved one repeatedly emphasizes the challenge that going through the experience of such a loss constitutes for young people and how it can affect their lives.

Research conducted in a group of children who experienced a parent's suicide allowed to observe a higher incidence of behavioural problems (i.e. hostility, aggression, risky behaviour) and inclination to withdrawal, reduced affect, and a tendency to burden themselves with a sense of guilt (Silvén Hagström, Forinder and Hovén 2024; Watson et al. 2021). Those findings were confirmed by research in which symptoms indicating the development of depression were more frequently observed in children affected by a parent's suicide (Berg, Rostila and Hjern 2016; O'Brien et al. 2015, Wilcox et al. 2010; Brent et al. 2009; Melhem et al. 2008). Such children showed greater difficulties in establishing interpersonal relationships, reported persistent low mood, and were also observed to be less effective in their actions, which led to their progressive withdrawal from taking on new challenges and activities (Pham et al. 2018; Pfeffer et al. 2000). It was found that these symptoms, which may indicate the development of disorders (mainly affective disorders and anxiety disorders), were most severe in young people in the first months after the suicide of a loved one (Cerel et al. 1999). In addition, children who experienced parental suicide are more likely to engage in risky behaviours such as the use of psychoactive substances (O'Brien et al. 2015; Hamdan et al. 2013; Brent et al. 2009), or violence. They may also demonstrate suicidal behaviours (such as self-destructive acts, suicidal thoughts and attempts) (Guldin et al. 2015; Geulayov et al. 2014; Jakobsen and Christiansen 2011; Cerel and Roberts 2005).

Children who witnessed a sibling commit suicide were similarly affected. In the first six months after such a loss, the children under research were seven times more likely to experience depression than the control group (children who had not experienced a sibling's suicide) (Brent et al. 1996). It was noted that the risk group for the occurrence and development of symptoms of depression includes primarily children who have been diagnosed with mental disorders in the past or have a family history of mental disorders (especially affective disorders) (Halonen et al. 2021; Elsayed et al. 2019; Qin, Agerbo and Mortensen 2002).

While scientific literature predominantly emphasizes the experiences of children losing close relatives, it is essential to consider the risks faced by children and adolescents encountering the death of non-related close individuals. In studies conducted by Julie Cerel's research team, 15.5% of adolescents reported that in the past year they had experienced a suicide attempt by a peer, and 3.2% confirmed that

they had experienced a suicidal death of a peer during that time (Cerel, Roberts and Nilsen 2005). The aforementioned increase in suicidal behaviours among young people prompts reflection on the impact of a child's suicide on their peer group.

Research analysing the impact of suicide committed by a child on its peers reports (based on data from interviews conducted with these children four times over three years after their peer's death) that children affected by such an experience are prone to developing symptoms of depression, or posttraumatic stress disorder (PTSD). It may also lead to suicidal thoughts (Brent et al. 1993). It was also noted that children undergoing such an experience show an increased tendency to engage in risky behaviours (e.g. psychoactive substance abuses, violence) or to attempt suicide in the future (Cerel, Roberts and Nilsen 2005). It is also important to highlight the significance of the bond that the child had with the deceased peer, namely, research has shown that the closer the mourner is to the deceased, the higher the risk that the child will develop symptoms of post-traumatic stress disorder (Melhem et al. 2004). In this regard, it should be noted that adolescence is the period of first romantic relationships, which may also coincide with the experience of a loved one's suicide.

The reported incidence of suicide among both near relatives and non-relatives in the cohort of children and adolescents is associated with an increased need to provide support to those affected by the bereavement (cf. Parrish and Tunkle 2005). Unfortunately, the literature on the topic indicates that suicide survivors find it difficult to talk about this experience (Rinne-Wolf, Finkeldei and Kern 2024). Moreover, there is even a tendency to exclude and stigmatize people who were in a close relationship with the suicide victim (Zyl 2020; McMenemy, Jordan and Mitchell 2008), which hampers the willingness of mourners to share this experience with others.

2. TALKING TO A CHILD ABOUT THE EXPERIENCE OF A LOVED ONE'S SUICIDAL DEATH

Research indicates that most children are not told that a loved one died by suicide (Cain and Fast 1966), even when the circumstances of the loss clearly suggest this cause, and the children may have been indirectly engaged in the event, e.g. they were present when the body was found (Cain and Fast 1966).

No comprehensive research has been undertaken to evaluate the effects on children of receiving inaccurate information regarding the true cause of a loved one's death. The literature contains numerous testimonies given by people from whom the truth was concealed, and analysing these accounts underscores the dangers of withholding the exact cause of a loved one's death from a child (Lukas and Seiden 2007; Mueller Bryson 2006; Swan Miller 2000). Cases of individuals who suffered such a loss in childhood draw attention to the risk of learning the truth under circumstances that are not adapted to the child's understanding of the world or linguistic abilities. Minors sometimes overhear information about the real cause of a loved one's death when family members or peers are talking

about it; children may also be deliberately informed about it. Such an indirect way of conveying the information may not be appropriately adapted to children's sensitivity. Consequently, in order to protect children from finding out the truth in inappropriate circumstances, parents primarily rely on their own evaluation of the child's developmental stage, the scope of their knowledge of the event (including whether they were a witness or participant) and their ability to manage past crisis situations when determining whether to engage in such discussions (Cain 2002). This evaluation allows them to adjust the type of message to the child's competences. Recognizing the difficulty of conducting such a conversation, it is recommended to return to the subject of the experience of a loved one's suicide also after some time has passed since the event, in order to evaluate the child's understanding of this experience and get to know what meaning the child ascribed to it.

Analysis of the significance of narrating the experience of a loved one's suicide is the focus of research conducted by, among others, Diane Sands (2008, 2009). The researcher attempted to describe changes in the narrative related to suicide in the form of the Tripartite Model of Suicide Bereavement. The author notes that construction of such a narrative depends on an individual's relationship with his or her environment, with the deceased, and with his or her self-perception. The researcher observes that each of these narratives is subject to changes over time, and she distinguishes three stages in their formation: *Trying on the shoes*; *Walking in the shoes*; and *Taking off the shoes*. The analyses conducted by Sands illustrate how these narratives evolve as individuals derive meaning from their experiences through communication, discourse, and recounting the loss. The results of this study highlight the significance of people (particularly children) having the opportunity to talk about their bereavement and thus share it with others.

3. GIVING MEANING TO THE EXPERIENCE OF A LOVED ONE'S SUICIDAL DEATH

Source literature consistently emphasizes the intense need of mourners to understand the meaning of losing a loved one to suicide. Neimeyer devoted a series of works to discussing the key question of how giving meaning to the experienced loss affects the way in which the suicide of a loved one is dealt with (Neimeyer, Prigerson and Davies 2002; Neimeyer and Wogrin 2008). The importance of deriving meaning from one's own experience of suicide survivals is also emphasized by the results of empirical studies (Keesee, Currier and Neimeyer 2008; Currier and Neimeyer 2006; Holland, Currier and Neimeyer 2006) and clinical data (case studies), which affirm the "primacy" of the process of reconstructing the meaning for the possibility of accepting the loss (Stewart and Neimeyer 2007; Neimeyer, Herrero and Botella 2006; Neimeyer, Keesee and Frotner 2000).

Based on conducted observations, researchers identified three basic methods by which mourners try to incorporate the experience of a loved one's suicide into their life narratives.

The first of these involves an attempt to integrate the experience of death into the narrative of one's life in order to make it coherent, i.e., to make it a part of one's life. The deceased's relatives then strive to identify the crucial moments of this experience - to name the most important factors and recognize significant situations - and try to understand them by finding the role they played in the course of events:

Every memory had to be analysed.

And every word. (cf. Bärffuss 2017, 40)

A similar strategy for integrating one's life after the suicide of a loved one is the second method identified by researchers, namely, an attempt to give meaning to the experienced loss by isolating its significant aspects and recognizing their beneficial influence on the course of events. Mourners reflect on the influence of the deceased's suicidal death on the life they shared together, seeking to identify the necessary changes caused by that death, e.g. the departure put an end to the psychological pain that afflicted the loved one:

I feel so bad. I lost my only daughter on February 21st, 2020. It feels like a 25-pound weight on my chest. It seems surreal. I don't know exactly how we're going to cope with it, but I keep telling her I'm not angry. That her mommy would rather carry the weight of pain in her heart than for her to have to go through life feeling sad, alone, unsure of herself and her future. The unknowns. You are not alone in your grief (Arlene engels 2020).

The final method distinguished by researchers for processing the experience of a loved one's suicide is related to the mourners' endeavour to establish a new identity that incorporates the sense of loss. A crucial aspect of this process of internal transformation is cultivating an attitude of openness to identifying oneself with a group of people affected by bereavement, and thus the ability to look at oneself from the perspective of another person who has experienced the suicide of a loved one.:

Why did all this happen? What part did other people play in it? Why did the survivor of this loss suffer so much? How long is the list of its painful consequences that are related to my own problems? (...) And why, in the more than 40 years since my mother died, has no one ever told me that what I was going through was part of what most people go through when someone close to me dies? That would have helped. (cf. Lukas and Seiden 2007, 20).

The narrative styles regarding the experience of suicide discussed above help the bereaved in rendering this event essential in their life. In their narratives, they express and simultaneously construct their relationship with the deceased, with others and with themselves.

This observation leads to the conclusion that engaging in conversation may facilitate the processing of the discussed loss; however, as highlighted in the literature on the topic, this contradicts the difficulty associated with sharing such an experience (McMenamy, Jordan and Mitchell 2008; Cvinar 2005; Ellenbogen and Gratton 2001), a difficulty which, notably, arises from both sides. For this

reason, knowing the benefits of initiating a dialogue, it is necessary to consider the possibilities of supporting people affected by the loss as well as their environment in starting a dialogue.

CONCLUSION

Based on the review of source literature, it can be stated that preparation for providing support to young people experiencing the suicide of a loved one should be preceded by in-depth research that will allow to gain a better understanding of children affected by bereavement. The current research, that is mostly focused on analysing the experience of parental suicide, should be expanded to include the impact of suicide on a peer group. The increase in the number of suicidal behaviours among young people indicates a high probability of children and adolescents facing the suicide of a close person.

In addition, most of the cited research include cross-sectional studies conducted for a short period of time and in clinical groups (i.e. children hospitalized due to the occurrence of developmental disorders). Meanwhile, the research results presented in the article, pointing to the changing perception of the discussed experience over time (cf. Sands 2008, 2009), underline the need for conducting longer observations which would take into account, as postulated by Sands (2008, 2009), the mediating influence of relationships with the environment, with the deceased loved one and with oneself on the way of experiencing such a loss. Researchers positing the impact of these relationships suggest that it is not the act of suicide itself that leads to the occurrence of problems in children, but rather that these difficulties are indicative of the dysfunction of the family and environment that occurred before and after the experience of loss (Lindqvist, Johansson and Karlsson 2008; Cerel et al. 2000; Shepherd, Barraclough 1976). In this context, it is also very important to enhance communication with the child, so that he or she can share their experience with the environment and begin to construct a personal narrative on this topic.

Observing how those affected by the loss in question try to talk about this experience in a space that is unfavourable to it, researchers drew attention to the effectiveness of using narrative techniques in the process of supporting the sharing the experience of a loved one's suicide. Researchers noted the effectiveness of narrative techniques in facilitating the expression of feelings related to the suicide of a loved one, particularly in environments that are not conducive to such discussions. The creativity in the scope of suggested approaches to engaging in conversation with mourners makes it impossible to discuss all methods of work proposed in literature on the topic. Therefore, I will now present the most frequently occurring and thoroughly described techniques.

The first one is the so-called restorative retelling (Rynearson 2001, 2006). The approach is based on attempts to describe or imagine the death of a loved one in such a way as to deliberately avoid the overwhelming focus on the tragedy of their death and to aim at redirecting thoughts to other aspects of this event. This

may involve, for example, focusing on the issue of transformation experienced by the person moving into the spiritual realm (e.g.: at the moment of death an angel takes and carries the soul of the deceased). In turn, re-story is a technique of coping with the death of a loved one that aligns with the individual's experience of loss (Steward and Neimeyer 2007; Shear and Frank 2006). An alternative method for articulating challenging, traumatic experiences is through creating free notes or, more methodically, maintaining a diary. This practice supports the process of searching for meaning in the experience of a loved one's suicide, facilitates the coherence and integration of the narrative, and mediates its incorporation into the broader context of the mourners' experiences (Neimeyer, van Dyke and Pennebaker 2008; Steward and Neimeyer 2007; Pennebaker and Chung 2007). It is also worth mentioning here the writing of letters aimed at rebuilding the relationship with the deceased. In this context, an interesting example is the book *Letters to Mitch* (Dunn 2016), which, among various themes (including "reconciliation with the deceased"), presents elements of the experience that the literature in the field of suicidology refers to as "post-traumatic growth" after the experience of a loved one's suicide (cf. Neimeyer et al. 2002).

The use of specific narrative techniques in work with young people affected by the suicide of a loved one may serve as an effective starting point for initiating a dialogue about this experience, as well as an indication of readiness to offer support during the mourning process. The various means of expression utilized by individuals affected by the discussed loss, such as letters, notes, books and diaries, suggest that art therapy may be particularly useful in work with the discussed age group (e.g. Edmonds 2016).

Funding: This research received no external funding.

Institutional Review Board Statement: Not applicable.

Conflicts of Interest: The author declares no conflict of interest.

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