

UNDERSTANDING THE EXPERIENCES OF LOSS AMONG FILIPINO SUICIDE-BEREAVED PARENTS

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ABSTRACT

Suicide is becoming a global phenomenon with the increasing cases, particularly among adolescents. With these occurrences, parents experience bereavement, left in state of grief and uncertainty. This study aimed to broaden the understanding of the lived experiences of parents who have lost a child through suicide. Eight (8) parents who have been suicide-bereaved for 2 to 5 years have participated through face-to-face interviews. After transcribing and categorizing the significant statements from the interview transcription, two essential themes emerged from the data: The Aftermath of Losing a Child and Experiencing the Meaning of Loss. These themes provide a deeper understanding of their experiences of loss, from the moment of losing their child, to after the incident, and the meaning of loss for them since the death of their child up to the present. These findings place emphasis on the grief process of suicide bereavement, as they continue life as a parent. Additionally, these themes provide a realization of the significance of this phenomenon from the parents' perspective.

Keywords: loss, suicide bereavement, suicide-bereaved parents

INTRODUCTION

According to the World Health Organization (2014), there are more than 800, 000 people who commit suicide every year around the world. It is estimated that every person dies by suicide every 40 seconds. There are plenty of cases of suicide globally; it may be the loss of a child, parent, sibling or spouse. Värnik (2012) conducted a study of suicide rates in selected leading countries of high-risk suicide worldwide. It was established that from the past decades, the suicide growth shifted from Western Europe to Eastern Europe and

currently shifting to Asia. Countries like India and South Korea were recorded to have the most number of suicide cases in Asia (Yang, 2012; Bharati, 2013). Alongside the issues of suicide, bereavement from suicide has an effect on people and those who are bereaved may develop major depression or post-traumatic stress disorder (Tal Young, et al. 2012). In support to this study, people that have been bereaved by suicide, grieve inversely and have other needs compared to those people who have been bereaved by other causes of death (Clark & Goldney, 2000 as cited in Wilson & Marshall, 2010). Compared to other forms of death, death by suicide is different as the person died of his or her own choosing and volition. Thus, people who are bereaved due to suicide may have an entirely different experience compared to those bereaved by other causes of death. Furthermore, it might be essential to have a more in depth understanding of their experiences as it could aid in counseling individuals, particularly parents, who are undergoing bereavement from suicide. Researches in suicide bereavement in the field of psychology are limited for the reason of lacking in methodologically research studies comprising those that have been bereaved through suicide (Ali, 2015). With this study of suicide-bereaved parents, wherein the issues are little known, it is more appropriate to use qualitative approach in order to explore the underlying thoughts of the participant's experience.

Since this study required profound interviews to further understand the experiences of these parents, qualitative approach was indeed needed, as some significant information could not have been obtained if quantitative approach was be used. Also, qualitative approach developed a thorough understanding of the phenomenon through the words of the participants.

The World Health Organization (WHO) investigated the research and data about suicide around the world, which involved 172 countries, recognizing Southeast Asia had made up almost a third of the annual rate (Vila, 2014). In the Philippines, adolescents to young adults aged 15-24 years old were reported to have higher suicide rates as compared to other age groups (Redaniel et al., 2012). With the increasing rate of suicide in the Philippines and few studies conducted, this study aimed to broaden the understanding

among people who have lost a loved one through suicide, more specifically, the feelings of parents in losing their children through suicide. The purpose of this research was to identify and explore the lived experiences of parental bereavement and aimed to understand the experiences of what losing a child means to suicide bereaved parents.

Suicide

According to the World Health Organization (1998), suicide is defined as “the act of killing oneself deliberately initiated and performed by the person concerned in the full knowledge or expectation of its fatal outcome”. The intention to die or stop living characterizes for inclusion of definition of suicidal behavior (De Leo et al., 2006). . In the United States of America, suicide is the 10th leading cause of death (American Foundation for Suicide Prevention, 2013). Among the American population who are aged 45-64 years old had the highest suicide rate (19.1%), 85 years and older had 18.6% rate while adolescents while the young adults who are aged 15-24 years old had 10.9% suicide rate per 100,000 people of the American population. While in the United Kingdom, the Office for National Statistics (2015) declared that the suicide rate for 2013 was 11.9 deaths per 100,000 people in the population.

Similar to international researches, there are more females who attempt suicide than males but more males have recorded to complete suicide than females in the Philippines (Redaniel, Lebanan-Dalida, & Gunnell, 2012). Local suicide records have shown that suicide is higher in adolescents to young adults aged 15-24 years old as compared to other age groups. Redaniel, et al., (2012) stated that the rate of suicide has decreased between the years 1970s to early 1980s but consistently increased from the year 1984 to 2005. In 2014, National Statistics Office (NSO) quantified that the suicide rate in the Philippines had increased from seven out of every 200,000 men, and two out of every 200,000 women during 1984 to 2005.

Bereavement

Sabar (2000) defined bereavement as the situation of a person that creates feelings to lose someone through death who was emotionally significant to them. It is what a person goes through when their loved one dies. Sudden death of a person undoubtedly gives a traumatic experience to their significant other, such as the parent, sibling, son,

daughter, or life partner (Supiano, 2012). As the person experiences bereavement, suicide survivors undergo a process of recovery from the death of a person who was closely attached to them, and these create changes in the person's attitude and feelings (Sabar, 2000). Whether the death of a loved one is anticipated or unexpected, the impact of the loss differs in comparison with accidental loss, loss from an illness or suicidal loss. In the study of Miyabashi & Yasuda (2007), the differences among causes of death on the impact of bereavement of bereaved parents and spouses were explored. Their study showed that the unanticipated loss caused more severe bereavement as compared to the anticipated loss. The study of Fielden (2003) investigated the phenomena of suicidal death, which is an intentional and self-inflicted act Sands (2009), to the bereaved loved ones.

Suicide-bereaved parents

Suicide bereavement is one of the other types of bereavement. There has been recent studies that discussed whether bereavement succeeding suicide, is unlikely to the other types of bereavement (Jordan 2001; Ellenbogen & Gratton, 2001; Bailey, Kral, & Dunham, 1999 as cited in Flynn, 2009). Suicide bereavement has been poorly understood, which in some existing studies in mental health, it had been reported with mixed findings, with some are showing preeminent rates of depression, anxiety, shame, and social isolation (Bailey et al., 1999; Jordan, 2008; Mitchell, et al., 2009 as cited in Bolton, et al., 2013). There has been an agreement among those who work with bereavement, that there are intricate and unique features of it succeeding suicide that differed it from other types of bereavement (Knieper, 1999; Clark & Goldney, 2000; Jordan, 2001; Cvinar, 2005 as cited in Flynn, 2009). Suicide-bereaved parents are somehow similar to those non-suicide-bereaved parents for the reason that they both experienced losing a child. People who have been bereaved by suicide, grieve inversely and have other needs compared to people who have been bereaved by other cause of death (Clark & Goldney, 2000 as cited in Wilson & Marshall, 2010). Suicide-bereaved parents, may experience higher feelings of guilt, shame, and blame compared to non-suicide-bereaved parents. Researchers have suggested that bereaved-families struggle for the safety of other family members, self-blame, secrets, and issues that silenced communication in the family which affects the grieving process (Cerel, Jordan, & Duberstein, 2008; Linn-Gust, 2001 as cited in Sands, 2009).

METHOD

A total of 8 parents (5 mothers, 3 fathers) with age ranging from 38 to 73 years old participated in this study. All of the participants were recruited through referrals from friends and friends of relatives. The researcher limited the number of target participants to eight. According to Guest, et al. (2006), a number of six to twelve participants were enough for the sample size in phenomenological studies for homogenous target audience. This was comparable to Kuzel's claim that six to eight participants were recommended for a homogenous sample (Kuzel, 1992 as cited in Guest, et al., 2006). Having eight participants sufficed for the collected data to have enough consistent information.

Focusing on the individual experiences, the phenomenological design of qualitative research approach was utilized to develop an understanding of life experiences as lived by suicide survivors. Phenomenology was the research design used because according to Creswell (1998 as cited in Padilla-Diaz, 2015), the use of phenomenology was when a study aimed to understand thoroughly the subjective human experiences that was common among a group of people. Along with this statement, this study aimed to understand the subjective lived experiences of these parents who shared something in common. The phenomenological design was most appropriate for this study since this focused on the lived experiences of the parents on how they experienced loss, how they got through the loss of their child, and on how would they find meaning from it. Correspondingly, phenomenology implied 3 to 15 participants only to be able to make the most of their lived experiences because, the more the participants, the more diversity, which may be difficult for the researchers to analyze the underlying meaning of their subjective experiences (Padilla-Diaz, 2015). Providing eight participants maximized the allotted time duration for data gathering, and coveted to establish a robust study in suicide-bereaved parents in the Philippines.

The participants were informed of the intention of the interviews as well as the conditions: (a) be more than 30 years old, (b) had lost a child to suicide for at least 2-5 years prior to participating the study. The researchers enclosed the criteria to 2-5 years on account of Broussard (2013), which stated that the shortest duration of time of losing a

child from suicide was 1.6 years and the average length of time for suicide bereavement of parents was 5.4 years. Another inclusion criterion was (c) parents residing in the Philippines. In addition to the inclusion criteria, the participants were all legally married during the time of the death of the child to provide consistency among the experiences. Seven participants were interviewed at their homes while one participant chose to be interviewed in another location (restaurant). All of the participants have met the following criteria as the researchers conducted an intake interview. The participants accomplished both Demographic Information and an Informed Consent for the Intent. The interview started by informing the purpose of the study to the participants, which was to understand the lived experiences the death of their child through suicide. The interview questions were open-ended in order to allow the participants to express their feelings and thoughts in their own manner. All interviews were audio-recorded and eventually transcribed. In order to generate themes from the data collected. Thematic Content Analysis (TCA) was utilized, which was defined by Anderson (2007) as “a descriptive presentation of qualitative data.” It is a type of qualitative analysis used to analyze the data to present themes as well as to generate themes as patterns from the extracted information in the interview transcriptions to identify the relationships between the gathered data (Aljailan, 2012). From the transcribed interviews, the researchers generated themes that encompassed the lived experiences of the suicide-bereaved parents.

Ethical considerations

Throughout the study, ethical challenges were faced such as the confidentiality of the potential participants, the method of recruitment, and data collection. The participants were given information about the nature of the research study and the procedures for gathering data. To preserve the confidentiality, any personal information was disguised and pseudonyms were used for transcription of interview. The following principles of ethical behavior, as indicated by the American Counseling Association (2014), were practiced throughout the interview process: autonomy (freedom of the participants), fidelity (commitment and trust), nonmaleficence (causing no harm), and veracity (truthfulness). These principles were applied to protect the rights of the participants.

Also, previous studies indicated that remembering traumatic events by telling the story or by writing them or by answering questions could induce short-term distress, but it was unlikely to occur for the re-traumatization or long term tribulation (Omerov, 2014). All parents who have participated mentioned that they felt relieved after sharing their experiences talking about their deceased child. According to Broussard (2013), remembering and sharing the life of their beloved deceased child caused parents to establish emotional and psychological closeness for them. In this study, parents desired for attachment to their child even after the death. Gibson et al. (2010) supported this stating that parents had a strong need for them to talk about their child's death. These parents kept the memory of their children alive to alleviate the fear of being forgotten by their child.

Table 1. Demographic Profile of the Participant

Name	Age	Name of the deceased child	Sex of the deceased child	Years since the death of the child	Age of the child upon committing suicide
Daisy	38	Justine	Male	2	16
Albert	69	Jimmy	Male	2	24
Trina	51	Allen	Male	5	17
Juliet	40	Paulo	Male	2	16
Henry	45	Lucas	Male	2	16
Stella	69	Selena	Female	5	22
Marcos	73	Randy	Male	5	20
Vicky	70	John	Male	5	21

RESULTS

In an attempt to understand the lived experiences among suicide-bereaved parents, the following participants provided sufficient and detailed personal experiences of their loss to their deceased child. Two major categories that emerged were: (a) The Aftermath of losing the child, and (b) Outliving the meaning of loss.

The Aftermath of Losing the Child

The sudden loss of a parent-child bond was an indefinable and unexplainable pain to all participants. As evidenced by the experiences of the bereaved parents, they identified specific experiences that made their bereavement process more difficult. They expressed that no one else would imagine and feel the weight of the pain they had experienced. The devastation of loss was clearly overwhelming that it made the parents felt that a part of themselves had died as well. This category corresponds to the participants' proximal experiences of loss after the death of their child from the moment of seeing them lifeless.

Instincts are often times regarded as true. Correspondingly, parents demonstrate this utmost of the incident where they felt that something had happened to their child before actually learning of their death. Parent's instincts are present in all aspects when it comes to their children. They do not even have a least idea that their child would commit suicide. Daisy stated:

"Yes, I felt something different. The only thing in my mind is...there is a pain in my chest, as if it is being stabbed...It really hurts that I can't breathe. As if that...I only remembered my eldest. He is the only one in my mind."

Same as Daisy, another parent suddenly felt nervous that something isn't right. As Albert shared, "I felt nervous. Why is this so? Then I went home again. I looked for him [...] When I came back [...] I opened my shop, and he was there [hanging]".

As they found out about the death of their child, the different instinctive ways of Albert and Daisy was somehow foreshadowed that there was an impending danger or something awful will happen to their sons.

At the onset of seeing the lifeless body of their children, parents experienced a blank state of mind in which they felt as if the world suddenly stopped. Daisy explained, "I don't know what happened to me, my mind suddenly turned blank. I almost got hit by a car, they

[people who witness Daisy] said." Four parents gave similar responses, into which they were in a state of emotional numbness. But for Albert, he felt as if the world suddenly turned silent. As he described, "I can't hear anything...it's as if the world is silent. When I saw him... I was shocked..."

Marcos on the other hand described, "I was surprised at first, shocked, it hurt, you can't accept why it happened...what is my fault, what was my shortcoming for my son..." It is as if that they cannot believe such a thing would happen to their child, which made them staring blankly at nowhere. Vicky also felt the same, as she stated, "Then I was staring blankly since [the incident]...it is as if I cannot cry? Yes I could not cry..." Similarly to the three parents, Trina also described, "I was staring blankly. Then suddenly, I would cry. Then stares blankly again. Until I have found someone to talk to, it as if I was not in myself... [...] It was like my mind was floating..."

Upon seeing their child, these parents immediately ran towards them and enfolded them in their arms. Which made them the last person to carry and hug their child for the very last time, the same way that they were the first person to hug them after giving birth. Trina shared:

"That moment that he was hanged, I hugged him. I still hugged him. But I know that he is gone already...He's gone already...When I release my hug, I fell, and I was like a child, "Allen, no! No!""

Vicky also shared how she still tried to save her son by trying to cut down the rope he (his son) had used in committing suicide:

*"What I did was, I hugged him. I climbed up to the cabinet, I did this *does gesture* the knife? I ran here, I get the knife. Then I can't do it anymore... We fell down together... No more, he's already stiffened. And then they saw me..."*

These mothers expressed how they still want to hug their children even if they were lifeless already. At the time of seeing their children lifelessly, there are questions in their mind longing for the reason why their child committed suicide. As for every parents, they

all wanted to see their children grow and be successful in their lives. But for these particular parents who had lost their child, nothing can ever compare to the pain they have experienced. Marcos said, "For the pain it's really...different, you'll really going to feel different... It's really... You're blaming yourself... You don't know why, what is the reason, you're asking yourself, "Did I have any shortcomings?"

For these two mothers, they felt that their pain was even more unbearable compared to the fathers as they are the ones who gave birth to their children and nurtured them. Losing a child was the most painful experience for Daisy and Vicky because, they were the ones who gave birth to their child. For nine months, they carried their child and took care of them and cherished every single moment they had with them. Then only losing them not by accident or any illnesses, but by suicide. Daisy and Vicky shared:

"It is very painful for me because I was the one who gave birth to him... [...] I was the one who raised him, I was the one who took care of him. Everything. That is what painful for a parent. It is more painful for a mother...because the mother always experience what their child feels..." – Daisy

"It is very painful. It is as if, because he came from you...as a mother. But it is very painful, the different pain... [...] But the mother, always has different feelings towards her son. It is the most painful...of all pains...the most painful..." – Vicky

The findings from this theme demonstrated the incomparable pain experienced by mothers, that no other than a mother would experience the amount of pain they have felt.

Most parents expressed the suicide of their child as an unexpected episode in their lives, that they would have never thought that the cause of death of their child would be committing suicide. The participants experienced disbelief expressing how they did not even had a slightest idea that their child will take its own life. They had no idea that their child would commit suicide knowing that as a parent, they gave everything they can to their child. As what had Marcos said:

*"When he came home that morning, we don't know that he will do it because he was alone there...
[...] Nothing. We don't have a doubt. We don't have an idea that he will do it. Because we know
that we didn't have any shortcomings..."*

Though most forms of death are indeed unexpected, what is different from the suicide death is that it is intentional. No parents would have wanted to lose their child in any possible way. It is something that they struggle to accept. What also hurts the most with this, is that these parents lost their child not in accident nor through illnesses, but because they chose to end their own lives. Albert and Trina said:

*"It's difficult...I'm struggling... I'm just forcing myself to accept it...because he was gone
already...[...] What I can't accept is what he gave me...that he was suddenly gone... That is
what I can't accept from him..." - Albert*

*"I can't really accept that, he's not yet dead [...] I cried a lot...I want to tell him, stand up,
you're not (dead)... You're thinking that, this isn't real, right? Something like that..." - Trina*

Through all these unexpected manner of death and unacceptance, some parents have reported that they wish to ease the pain they felt by joining their deceased child. They found the loss of their child as undesirable that they pondered to experience departure from life. Others wished they should have been the one to die rather than their child. Daisy expressed, "That's what I told myself, why I wasn't the one who was taken away, not my child... *sobs* My son was the one who suffered from all that we did..."

With all the problems and pain they are all experiencing, Juliet wanted to be with his deceased child by wishing and asking his son to get her life. She explained:

*"What I want is, every time I will have a problem, he would just take me with him. Because I feel,
that I will be fine...if I will be gone too...[...] I would always tell him, take me with him too. So
that all my problems will end..."*

These parents who yearn to follow their deceased child may somehow have higher risk of having suicidal ideation.

Losing a child means losing a companion in life and in the things that these parents do with their children. It was losing the person whom they considered as their partners in doing their work, taking care of their other children, and also as their accomplice. As two parents shared:

'He is always with me in my work, anywhere my work is, he is always with me... That is what I always remember...that now, I am already alone...' – Albert

'He is my right hand...in taking care of them (other siblings) before...' – Trina

Parents encountered a sudden loss of parent-child attachment that resulted to difficulties in engaging with their daily tasks, particularly those tasks that involves sentiment with one another. For Juliet, she had lost her every day companion in her daily tasks and sometimes, in her meetings, particularly now that her husband might leave sooner to work abroad. As she shared:

'Ever since he was gone, it is very hard for me... Before I am confident to go out and go to meetings... If I do not like to attend, I always ask him to do so... If I want to attend, he will always tell me, "I will come with you, I will take care of you momma"

One thing that always happened when losing a loved one was recognizing all the good things that person had done. For these parents, nothing hurt more than losing a child whom have been so loving and always affectionate towards them. As Vicky shared, “What I admire about him, is that he is affectionate. Because before, they were really pampered to the things they like. Since only us were here, my husband were not around, that is why everything they want is given to them.”

At this point that they are gone, these parents cannot help but to compare their deceased child to his siblings and shows immense admiration toward their deceased child. Daisy and Trina expressed:

"He is really the most affectionate of all my children. He is the one who is very close to me. [...] He is really affectionate. Even though there are lot of people around, he is not shy to hug me..." – Daisy

"He is very affectionate to me. His siblings are always jealous. [...] And he really likes to sit beside me when I am in bed and then we just talk about things." – Trina

Moreover, by remembering the positive attributes of their children, this could compensate with their thoughts that their children died in an unacceptable way, especially since in the Filipino culture, suicide is perceived as a sinful manner of dying. Now through these new connections needed to be formed, these parents used the picture of their deceased child as a medium to commemorate the moments of them together and to establish new connections as if their child is still alive. As one parent (Juliet) stated, "Sometimes I looked at the picture of him, I'll just stare at him ... [...] last night, and I looked at his picture. I said, "You know, even if you are there already, you know I still cannot accept," [...] I'm still constantly talking to him, to the picture whenever I'm struggling ..."

Most of the parents admire their deceased child by looking at their pictures to provide a reason for them to remember old memories prior to the death of their child. Parents withdraw from acknowledging occasions such as birthdays and regular holidays. Celebrations such as these are usually associated with joyful commemorations, but with the experience of sorrow after the loss, some parents could not see the intention of making happy memories asserting what else was there to be happy about following the death of their child. Daisy shared how she felt during last New Year and Christmas celebration, remembering her deceased son:

*"Last New Year and Christmas, we were still together that time. *crying * Now I don't feel like celebrating any occasions anymore. I was only crying last Christmas, [...] what else can I be happy about? My son was gone...." – Daisy*

Losing their companion somehow made them incomplete. These parents have been experiencing hardships in facing their lives ever since they lost their child. Daisy shared, "I'm really sad. Especially when I see all of my children and he is not there. I am really crying... I see my children complete and he is the only one who is not there."

Some parents feel the presence of their deceased child after their death. Some felt as if they are being hugged and some even reported seeing an image of their deceased child. One parent shared:

"His movements, his actions, it seems like it's still what he does. That he is still here. Whenever there seems to be a problem, he prompts. So ... I feel like...he is not yet gone. Here is still here. – Juliet.

As some parents reported sensing the presence of their child, there are some who experienced dreaming about their deceased loved one as they sleep. One parent narrated:

"When I dream sometimes, she's just there. She said she'll just change clothes [...] I told to myself I was dreaming but I'm awake. She said she has no clothes, and that she'll change clothes. But I sent her some clothes. Sometimes she said she was freezing from cold..." – Stella

Parents expressed self-recrimination where parents felt an extreme guilt. Some felt that they are responsible for their child's death. Others perceived they have failed to fulfill their responsibility as a parent. They questioned themselves on what were their shortcomings as a parent. Parents reported their self-blaming thoughts having a sentiment of 'If only' or 'I should have' statements. As one parent stated:

"If only I was a parent who really took care of my child, maybe it will not be a problem to my son... [...] I really have big regrets. If I only knew, if only I could go back in time, I should have done it right...to really become a mother."

Some parents report not only they blame themselves for the child's suicide but also they perceive that they had a mistake raising their children. Marco questioned himself, "Where did I go wrong?" and felt displeased of having a lack of knowledge in the cause of his child's death. "I did not know what my shortcomings were. Of course. It irritates me why. Why he had done that..." "

Experiencing the Meaning of Loss

The parents had their own strategies to cope with grief and bereavement. At some point, parents considered the meaning of loss and comprehend of living through the now as they aspired for the quest for meaning and strive to breathe a new life from catastrophe. This category corresponded with the meaning of lived experiences of parents of their ongoing lives as their bereavement process unfolds.

Notwithstanding of the sudden loss of their child, most parents disclosed the positive changes that happened to their family. They managed to spend time with one another since the death of their child. This led them to focus on the surviving children and supporting family members. Albert and Trina revealed that they had a closer bond among their family members. Albert reported that his remaining children often visit him during occasions. As for Trina, she observed that her remaining children became more attached with one another as compared before the suicide of her child. As these two parents stated:

My children have their spouses too. Visits, and calls, they were satisfied with just that. Now, not anymore. They have time, like for birthdays, or if they have time they would come here, they would visit... "- Albert

"Before, small things lead to fight. Now it's no longer done. You can really see their (siblings) concern to one another. They love each other. They help each other"- Trina

After the death of the child, the family somehow became more attached and warm to each other. In these results, Albert expressed how his other children come to visit him more often after the death of his other son. While for Trina, she had observed that her children became more close to each other and helped each other cope with the loss of their brother.

Filipinos have been known to be religious and endowed with strong faith in God. Religion played a major role for the parents where they sought their belief in God as solace during their difficulties. Parents acknowledged that praying helped them cope with loss. It paved the way to alleviate the physical and emotional pain that has been endured in their hearts. One parent often engaged in praying the rosary and communicating to God to contemplate her child:

"I always pray [...] that she would be forgiven... I'm praying rosary. I always pray for her during mass... [...] I always hope that she also ask for forgiveness...so the Lord would forgive her because I think she was not yet forgiven" – Stella

As for Trina, she disclosed that praying to God in times of bereavement helped her cope with bereavement. As she stated:

"I realized that I was praying [...] it's like I let go of it ... [...] "I was just enlightened of why You (God) took my son." [...] That's what I would look for, that mission. [...] I pray every night that I asked him for forgiveness ...then it was gone. Because, I gave it all out. So I said that I would give You my child. Then, I was enlightened. "

By means of continuous prayers, these parents have learned to accept the death of their child, as to what God has planned for their lives. In accordance to this, Filipinos have been known to be religious that sometimes they believe that God has plans for everything that they are going through. As for these suicide-bereaved parents, they realized that the only thing that was left for them to do was acceptance. Henry perceived that his child would have not taken away if God did not plan to. As Henry narrated, "If you will not be taken by the Lord, you will not be. Maybe if I accept it to myself, that it was his time already..."

Some parents perceived that God destined their child to die in a certain time and in that kind of way, leaving them not to withdraw questions to God of why the event of loss had happened, despite the pain it brought to the parents. As one parent explained:

"So that's what...what the Lord (had planned) [...] That it was really his destiny. That is His (God) way. That his life, is definitely only until there. And, every person has his or her own time, with its own way..." – Marcos

After all the sufferings of loss, parents signalled a wake-up call of letting go. Despite the pain that each of them have encountered, some parents have managed to have hopes and learn to withstand with the experience they have faced. Parents tried to be strong and went away with the feelings of agony, despair, and shock. They made realizations to themselves of moving forward and continuing life to the present. One parent perceived that her experience as a mother was a lesson learned; that she learned her mistakes and would act differently to prevent the suicide to occur on her family. As Daisy narrated:

"But because of what happened to my son, I have been enlightened about my family. What happened to me was a great lesson [...] I realized that...I still have my parents, I have my children who are waiting for me ... [...] It became a lesson for me as a mother. A lesson for taking (care) of my children....I was enlightened."

As for Stella, she sees it as a challenge to her life perceiving that she would not be given a trial that she could not handle. As Stella reported, "Maybe it was just a test. I would not be—I told myself. I would not be given a challenge that I cannot overcome. That is why I handled it well. Some parents thought of remaining strong to accept the death of their child. As said by Albert, "What else would I have to do...I'll just accept it...Since he is gone anyway. Even if you say that you cannot accept, nothing will happen. Because you will just suffer. Right?"

The participants experienced meaning reconstruction through contemplating positive thoughts by focusing on their remaining children, establishing a closer relationship with the family, and entrusting their deceased child to God. Through this meaning-making process, bereaved parents were able to attempt to understand the meaning of their child's sudden death. Across all the participants, the intensity of pain varied but similarities were

found in terms of change. One global theme emerged across all eight participants. This global theme emerged as bereaved parents narrated their lived experiences as an implication to understand parental bereavement.

The Lived Experiences of Suicidal Loss

With all the basic themes that had been formed from the data analysis of the participants and classified into two categories: *The Aftermath of Losing the Child* (which discusses the experience of loss of the parents) and the *Experiencing the Meaning of Loss* (which focuses on the meaning itself) an abridged of *The Lived Experiences of Suicidal Loss* conceptualized from all the analysis. This theme focuses on their entire outlook on experiences of loss. It is also more likely a journey about the experiences of these suicide-bereaved parents' loss transitioning towards aiming for acceptance.

DISCUSSION

The current study identified and explored the lived experiences of suicide-bereaved parents in Metro Manila, it did not only reveal the painful mourning of the participants surviving from suicide but also the change to recovery. The identified findings of the study were consistent with the meaning reconstruction theory processes (sense-making, benefit-finding, and identity change) (Neimeyer, 1998 as cited in Schultz, 2012) that occurred among the suicide-bereaved parents. Most participants demonstrated making sense to the loss.

The people bereaved by suicide have experienced the aftermath of the loss. In the study of McDougall (2008 as cited in Buckels et al., 2015), parental instinct is “the most powerful of instincts” (p. 68) and “is the source, not only of parental tenderness, but of all tender emotions and truly benevolent impulses, is the great spring of moral indignation, and enters in some degree into every sentiment that can properly be called love” (p. 275).

There is a strength of mother-child bond and the biological predisposition for mothers in wanting to touch and hold their child (Sugrue, et al., 2014), it is as if their way of saying goodbye to their deceased child, of longing to touch and hug them for the last

time. Participants demonstrated the incomparable pain experienced by mothers, that no other than a mother would experience the amount of pain they have felt. Similar challenges experienced by mothers have been reported in the study of Sugrue, et al (2014) that stated that mothers who lost a loved one experienced a more profound of pain it brought.

At the onset of seeing the lifeless body of their children, parents described their experience as a blank state of mind in which they felt as if the world suddenly stopped. This was consistent with the study of Gall et al. (2014) that suicide-bereaved people experienced disbelief, numbness, and misperception after seeing the lifeless body of the child, and defining that moment as surreal and a “chaos in the mind”. People who were bereaved by suicide experienced the similar emotions as anyone who mourned for the sudden death of a loved one such as the sudden death endured by the parents is seen as unexpected, traumatic, and hard to accept. The view expressed by parents was that there were no parents who would have wanted to lose their child in any possible way. Losing a child was a heart-breaking experience for parents to feel regardless of their child’s age (Omerov, 2014). The pain of experiencing of losing a child through suicide did not go with their expectations on how life would be for their children (Sugrue, et al 2014). What hurts most with these parents was that they have lost their child neither by accident nor illness, but because the children chose to end their own lives, which the parents struggled to accept. Though most forms of death were indeed unexpected, what was different from the suicide death is that it is intentional. In support to this, on the research by Gall et al., (2014), most of the bereaved persons felt the suicide of their loved one as an unexpected and sudden onset on their lives.

While it was known for the suicide survivors of a significant other to feel hurt and anger after the sudden death of their loved one, the findings of the study is consistent with the literature that guilt has been reported among suicide-bereaved individuals (Lam, 2014; Omerov, 2014; Groos & Shakespeare-Finch, 2013). Feelings of extreme guilt and self-blame was perceived by parents where they felt that they were responsible for their child’s death. This demonstrates the stigma, which plays a role in the bereavement of an individual (Pompili, et al., 2013). This was aligned with the findings of Sugrue, et al. (2014) that parents resent these feelings because they see themselves as failure as a parent resulting to

self-accusations and feelings of guilt. The study suggested that the feelings of self-blame are action for the parents to learn the mistakes to prevent the suicide occurrences to happen again. A unique feeling of overwhelming grief was associated with their child's death (Rawlinson, 2010) since guilt is an emotional response of the suicide-bereaved individuals (Schultz, 2012).

Participants also expressed that they yearned to die in order for them to follow and go along with their child. Parents, especially mothers, had a strong desire to search for their child in the afterlife to reassure that the child is safe, and that the only way for them to put themselves at ease is to die themselves (Sugrue, et al., 2014) which was observed in the present study. Parents who yearned to follow their deceased child may have higher risk of having suicidal ideation which was supported by a study that people who have been bereaved by suicide displays high-risk potential for suicide (Krysinska, 2003 as cited in Sugrue, et al., 2014).

The death conceived a physical disconnection between the parents and the deceased children which these parents recognized that the continuance of parent-child attachments was indeed impossible, and that new connections were needed to be formed and maintained to continue experiencing the attachment they had for their deceased child (Omerov, 2014). Participants from the present study expressed admiration for their deceased child by looking at their pictures to provide a reason for them to remember old memories prior to the death of their child. This was aligned with the findings of Broussard (2013) that the bereaved parents were motivated to strengthen their connection towards their deceased child through recalling and reflecting on the memories of their child before the death. Now through these new connections needed to be formed, parents used the picture of their deceased child as a medium to commemorate the moments of them together and to establish new connections as if their child was still alive. Participants did not only report the use of pictures as a medium but also the way of remembering and preserving the positive memories they had with their deceased child when they were alive. This act served an essential purpose in the lives of these parents (Broussard, 2013). Moreover, by remembering the positive attributes of their children, this could compensate

Moreover, by remembering the positive attributes of their children, this could compensate with their thoughts that their children died in an unacceptable way, especially since in the Filipino culture, suicide is perceived as a sinful manner of dying. This was supported by Broussard (2013), by encompassing the positive memories as component of the parent-child connection for suicide-bereaved parents that these thoughts were contemplate as an effortless memory. In addition to the memories of the deceased, parents encountered the feeling or presence of the deceased and also reported their child's appearance through their dreams, which is explained by Bennett & Bennet (2000) as experiences of after-death communication. Loved ones who appear in the dreams of the bereaved parent served as the continuing of communication of the parent-child relationships (Broussard, 2013; Hunt, 2011). After-death communication involved the person alive and the deceased to interact with one another either by sensing, dreaming, or sense of smell (Bieschel, 2014). It was reported that parents behave as though the deceased one was still present and the way of interaction is through dreaming (Sabar, 2000). As the study of Hunt (2011) suggested the child appearing in the parent's dreams indicated that parents perceive that their child was either in pain or happy. The present study suggested that there was interaction between the parent and child due to continuing the emotional bond they have for each other.

Besides the grieving and mourning of the loss, the participants expressed the significance of coping through coping and interpersonal support especially toward the family members. After the death of the child, the families of the bereaved person provided comfort with the bereaved through the family support. According to the study of Schultz (2012), family relationships of the suicide-bereaved persons changed in terms of closeness with one another. Based from the experiences of the parents who lost their child, family bonds were strengthened among the remaining family members to support one another. This was consistent with the findings of the study that the participants reported closer relationship within the family. However, these findings were in contrast with the study of Gall, et al. (2014), where the suicide survivors reported a negative reaction from a family member, and desired to withdraw from them. This explained that the emotional closeness within the family after the suicide depended on the suicide-bereaved person on how they would perceive the death of their loved one. This also suggested that that not all families who would encounter a sudden death of their loved one through suicide would result to closer relationship, rather it would result to tensions within the family.

Participants did not only express their way to cope through family support but also to God. Bereaved individuals rely on their religious beliefs, and that is making sense of the death (Stevenson, 2014). In the present study, consistent findings were found in the study of Lichtenthal, et al. (2013), that the loss of their child was perceived as part of God's will. Parents expressed their reliance to God and that their faith in God is strengthened after the loss. Similar study of Hunt (2011) has shown that parents have the belief of having God as their comfort. Individuals often believe that death is not the end of their lives but rather an alteration for the betterment of life with God, and as an outcome, suicide-bereaved create faith-based acknowledgement as regards to God's roles in their experience (VandeCreek & Mottram, 2011). Bereaved individuals attempt to develop and maintain their connection to God (Bousso, 2010). It is known that religion has been a part of the Filipino culture. Filipino families tend to cope with the help of God through spiritual communication. Torres (2008) described Filipinos to have "ingrained sense of religion" that leads them to church. Relying to God is a way for the bereaved individuals to find sense in the meaning of life. One of the processes of meaning-making theory by Neiyemer et al. (2008), includes the process of sense-making which is the process for the bereaved ones to find sense in the experience of loss. For Filipinos, religion is the way for them to alleviate the loss by praying.

Self-reflection and moving forward is also part of the way to find meaning after the loss. The bereaved parents expressed that they need to accept a good reason for the suicide of their child (Gall, et al., 2014), and this serves as an individual's search for meaning in bereavement process (Fielden 2003), thus, renouncing guilt. All of these experiences brought about by losing a child through suicide were a very surreal and unforgettable happening for them. The results of the present study support the study of Gall, et al. (2014) bereaved parents start to reconstruct a positive outlook in their lives and engage in self-reassurance as they obtain acceptance.

CONCLUSION

Suicide is catastrophic life experience that devastates the lives of any individual, not only because of the prevalence of the suicide cases but also the sorrow that a suicide survivor could face. This study explored the lived experiences of suicide bereavement. As specified by the parent's experiences, results suggested a model for understanding parental bereavement: The Lived Experiences of Suicidal Loss. The ability to make sense of the death, fostering adjustments through benefit-finding, and achieving acceptance from the loss is essential for grieving of suicide-bereaved parents.

The research findings of the study demonstrate the underlying lived experience of the suicide-bereaved parents who dealt with bereavement after the death of their child. This study explored themes of meaning-making among suicide-bereaved parents. Meaning reconstruction theory gives attention to the literature of bereaved parents due to their experience after the death of a child and facing challenges to find meaning out of the loss. Searching for the meaning in the lives of the bereaved individuals, especially for parents, is a difficult challenge, since parents are held responsible for their child (Omerov, 2014). According with the previous research about bereaved parents, not all parents could not make sense or find benefit out of the loss (Lichtenthal, et al., 2010). While many parents failed to find meaning that they experienced the grief process as painful and weakening (Keesee et al., 2008), others searched for meaning to reconstruct their lives in response to loss. Previous studies reported that the themes that associate the meaning-making involves on dependency on religious beliefs of God's plan and spirituality in the life after death (Davis et al., 1998; McIntosh et al., 1993; Murphy et al., 2003 as cited in Lichtenthal, et al., 2010). The study of Lichtenthal et al. (2010) found out that the belief of death is a part of God's will was associated with the sense-making, which is consistent in the present study where in the parents put their trust on their strong faith to God.

RECOMMENDATION

This study highlighted the understanding of meaning of loss for parents who have lost their children through suicide. The findings emphasized on the meaning-making processes of Filipino suicide-bereaved parents. Theoretically, this study supported the

previous researchers regarding the meaning reconstruction theory. No recommendations can be made since consistent findings were found that strengthened the assumptions on meaning-making processes.

For practical recommendations, attention and grief interventions must be given to the grieving parents to acknowledge bereavement following the death of their child. Since there is a lack of research promoting meaning-making for interventions to bereaved individuals, (Lichtenthal et al., 2010), clinical implications that promotes meaning-making is encouraged. It is also recommended that clinicians should assess family support to the bereaved ones who seek help to effectively prevent other problems such as complicated grief, prolonged grief disorder or heightened risk of distress such as major depressive disorder or posttraumatic stress disorder (PTSD). These distresses can be address by giving psychotherapeutic interventions focusing in family therapy.

REFERENCES

- Alhojailan, M.I. (2012). Thematic analysis: A critical review of its process and evaluation. *WEI International European*, 8-21.
- Ali, F. (2015). Exploring the complexities of suicide bereavement research. *Procedia – Social and Behavioral Sciences*, 165, 30-39.
- American Counseling Association. (2014). *Code of Ethics*. Alexandria, V.A.: Author.
- Anderson, R. (2007). Thematic Content Analysis (TCA): Descriptive presentation of qualitative data. (Unpublished manuscript)
- American Foundation for Suicide Prevention. (2013). *Facts and figures: Suicide deaths*. Retrieved from: <http://www.afsp.org/understanding-suicide/facts-and-figures>
- Bennett, G., & Bennett K.M. (2000). The presence of the dead: An empirical study. *Mortality*, 5(2), 2000.
- Bharati, S., Mallik, S., Datta, P., Mukhopadhyay, A., Datta, D., & Haq, S. (2013). Socio demographic profile and suicidal intent of attempted suicide cases: A hospital based study in West Bengal, India. *National Journal of Medical Research*, 3(2), 122 -125.

- Bieschel, J. (2014). Assisted After-Death Communication: A Self-Prescribed Treatment for Grief. *Journal of Near-Death Studies*, 32(3), 161-165.
- Bogensperger, J. & Lueger-Schuster, B. (2014). Losing a child: finding meaning in bereavement. *European Journal of Psychotraumatology*, 5, 1-9.
- Bolton, J. M., Au, W., Leslie, W. D., Martens, P. J., Enns, M. W., Roos, L. L., Katz, L. Y., Wilcox, H. C., Erlangsen, A., Chateau, D., Walld, R., Spiwak, R., Seguin, M., Shear, K., & Sareen, J. (2013). Parents bereaved by offspring suicide. *JAMA Psychiatry*, 70 (2), 158-167.
- Bousso, R.S., Serafim, T.D., & Misko, M.D. The relationship between religion, illness and death in life histories of family members of children with life-threatening diseases. *Rev. Latino-Am. Enfermagem*, 18(2), 156-162.
- Braun, M.J. & Berg, D.H. (1994). Meaning reconstruction in the experience of parental bereavement. *Death Studies*, 18, 105-129.
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3 (2), 1-41.
- Broussard, J.H. (2013). Surviving suicide: Understanding the lived experiences of bereaved parents. *ProQuest*. 1-224.
- Buckels, E. E., Beall, A. T., Hofer, M. K., Lin, E. Y., Zhou, Z., & Schaller, M. (2015). Individual differences in activation of the parental care motivational system: Assessment, prediction, and implications. *Journal of Personality and Social Psychology*, 108(3), 497-514.
- De Leo, D., Burgis, S., Bertolote, J.M., Kerkhof, A.J.F.M., & Bille-Brage, U. (2006). Definitions of Suicidal Behavior. *Hogrefe & Huber Publishers*, 7(1), 4-15.
- Dogan, N. & Toprak, D. (2015). Trends in Suicide Mortality Rates for Turkey from 1987 to 2011: A Joinpoint Regression Analysis. *Archives of Iranian Medicine*, 18(6), 355-361.
- Fielden, J.M. (2003). Grief as a transformative experience: Weaving through different lifeworlds after a loved one has completed suicide. *International Journal of Mental Health Nursing*, 12, 74-85.
- Flynn, L. (2009). Is suicide bereavement different? The experience of support after suicide. *Grief Matters*, 12(1), 18-21.

- Gall, T.L., Henneberry, J., & Eyre, Melissa. (2014). Perspectives on the needs of individuals bereaved by suicide. *Death Studies*, 38, 430-437.
- Gibson, J., Gallagher, M., & Jenkins, M. (2010). The experiences of parents readjusting to the workplace following the death of a child by suicide. *Death Studies*, 34, 500-528.
- Guest, G., Bunce, A., & Johnson, L. (2006). How many interviews are enough? An experiment with data saturation and variability. *Field Methods*, 18(1), 24. doi: 10.1177/1525822X05279903
- Groos, A. D. & Shakespeare-finch, J. (2013). Positive experiences for participants in suicide bereavement groups: A grounded theory model. *Death Studies*, 37, 1-24.
- Harrell, M.C., & Bradley, M.A. (2009). *Data Collection Methods: Semi-structured interviews and focus groups*. Santa Monica, California: RAND Corporation.
- Hibberd, R. (2013). Meaning reconstruction in bereavement: Sense and significance. *Death Studies*, 37, 670-692.
- Keesee, N. J., Currier, J. M., & Neimeyer, R. A. (2008). Predictors of grief following the death of one's child: The contribution of finding meaning. *Journal of Clinical Psychology*, 64(10), 1145-1163.
- Kim, J., & Hicks, J.A. (2015). Parental bereavement and the loss of purpose in life as function of interdependent self-constructual. *Frontiers in Psychology*, 6, 1-7.
- Lam, W.C. (2014). In their own words: Perceived experiences and family functioning of suicide survivors before and after suicide loss. *Philadelphia College of Osteopathic Medicine*, 1-173.
- Leenaars, A.A. (2010). Edwin S. Shneidman of suicide. *Suicidology Online*, 1, 5-18.
- Li, J., Laursen, T.M., Precht, D.H., Olsen, J., & Mortensen, P.B. (2005). Hospitalization for mental illness among parents after the death of a child. *The New England Journal of Medicine*, 352(12), 1190-1196.
- Lichtenthal, W.G., Currier, J.M., Neimeyer, R.A., & Keesee, N.J. (2010). Sense and Significance: A mixed methods examination of meaning making after the loss of one's child. *Journal of Clinical Psychology*, 66(7), 791-812.
- Lim, M., Lee, S.U., & Park, J.I. (2014). Difference in suicide methods used between suicide attempters and suicide completes. *International Journal of Mental Health Systems*, 8(54).

- Lin, Y.Y., Huang, X.Y., Chen, C.Y., & Shao, W.C. (2009). The lived experiences of brokered brides who have attempted suicide in Taiwan. *Journal of Clinical Nursing*, 18, 3409 - 3420.
- Maple, M., Edwards, H. E., Minichiello, V., & Plummer, D. (2013). Still part of the family: The importance of physical, emotional, and spiritual memorial places and spaces for parents bereaved through the suicide death of their son or daughter. *Mortality*, 18(1), 54-71.
- Miyabashi, S. & Yasuda, J. (2007). Effects of loss from suicide, accidents, acute illness and chronic illness on bereaved spouses and parents in Japan: Their general health, depressive mood, and grief reaction. *Psychiatry and Clinical Neurosciences*, 61, 502-508.
- Neimeyer, R.A. Laurie, A., Mehta, T., Hardison, H., & Currier, J.M. (2008). Lessons of loss: meaning-making in bereaved college students. Wiley InterScience, 121, 27-39.
- Nyatanga, B. & de Vocht, H. (2008). Instituition in clinical decision-making: A psychological penumbra. *International Journal of Palliative Nursing*, 14(10), 1-5.
- O'Connor, R.C. & Nock, M.K. (2014). The psychology of suicidal behavior. *Lancet Psychiatry*, 1-13.
- Office for National Statistics. (2015). *Suicides in the United Kingdom, 2013 Registrations*. Retrieved from: http://www.ons.gov.uk/ons/dcp171778_395145.pdf
- Omerov, P.L. (2014). Parents who have lost a son or daughter through suicide. *Karolinska Institutet*, 1-142.
- Omerov, P.L., Steineck, G., Nyberg, T., Runeson, B., & Nyberg, U. (2013). Psychological morbidity among suicide-bereaved and non-bereaved parents: A nationwide population survey. *BMJ Open*, 1-10.
- Parker, H.A. & McNally, R.J. (2008). Repressive coping, emotional adjustment, and cognition in people who have lost loved ones to suicide. *Suicide and Life-Threatening Behavior*, 38(6), 676-687.
- Pompili, Shrivastava, Serafini, Innamorati, Milelli, Erbuto, Ricci, Lamis, Scocco, Amore, Lester, & Girardi. (2013). Bereavement after the suicide of a significant other. *Indian Journal of Psychiatry*, 55(3), 256-263.

- Poorolajal, J., Rostami, M., Mahjub, H., & Esmailnasab, N. (2015). Completed Suicide and associated risk factors: A Six-Year Population Based Survey. *Archives of Iranian Medicine*, 18(1), 39-43.
- Rawlinson, D.F. (2010). Exploring the lived experiences of suicide bereavement peer support program participants. *Library and Archives Canada*, 1-186.
- Redaniel, M.T., Lebanon-Dalida, M.A., & Gunnell, D. (2011). Suicide in the Philippines: time trend analysis (1974-2005) and literature review. BioMed Central Public Health, 11(536), 1-9.
- Sabar, S. (2000). Bereavement, Grief, and Mourning: A Gestalt Perspective. *Gestalt Review*, 4 (2), 152-168.
- Sands, D. (2009). A tripartite model of suicide grief: Meaning-making and the relationship with the deceased. *Grief Matters*, 12(1), 10-17.
- Schultz, L. E. (2012). The lived experiences of parental suicide bereavement for emerging adults. 1-308.
- Sinyor, M., Schaffer, A., & Cheun, A.H. (2014). An Observational Study of Bullying as a Contributing Factor in Youth Suicide in Toronto. *Canadian Journal of Psychiatry*, 59 (12), 632-638.
- Stevenson, M. (2014). Being a bereaved parent: Early bereavement experiences and perspectives on paediatric palliative care and bereavement services. *Faculté des études supérieures*, 1-180.
- Sugrue, J.L., McGilloway, S., & Keegan, O. (2014). The experiences of mothers bereaved by suicide: An exploratory study. *Death Studies*, 38, 118-124.
- Supiano, K.P. (2012). Sense-Making in suicide survivorship: A qualitative study of the effect of grief support group participation. *Journal of Loss and Trauma*, 17, 489-507.
- Tal Young, I., Iglewicz, A., Glorioso, D, Lanouette, N., Seay, K., Ilapakurti, M., & Zisook, S. (2012). Suicide bereavement and complicated grief. *Clinical Research*, 14, 177-186.
- Torres, S. (2002). Understanding the persons of Philippine origin: A primer service for rehabilitation service providers. United States of America: Center for International Rehabilitation Research Information and Exchange.
- VandeCreek L. & Mottram, K. (2011). The perceived roles of God during suicide bereavement. *Journal of Psychology and Theology*, 39(2), 155-162.
- Van Orden, K.A., Witte, T.K., Cukrowicz, K.C., Braithwaite, S.R., Selby, E.A., & Joiner,

- Värnik, P. (2012). Suicide in the world. *International Journal of Environmental Research and Public Health*, 9, 760-771.
- Vila, A.C. (2014, September 9). WHO: Someone commits suicide every 40 seconds. *The Philippine Star*. Retrieved from <http://www.philstar.com/health-and-family/2014/09/09/1367141/who-someone-commits-suicide-every-40-seconds>.
- Wilson, A., & Marshall, A. (2010). The support needs and experiences of suicidally bereaved family and friends. *Death Studies*, 34, 625-640.
- Wong, P.T.P. & Tomer, A. (2011). Beyond terror and denial: The positive psychology of death acceptance. *Death Studies*, 35, 96-106.
- Wood, L., Byram, V., Gosling, S., & Stokes, J. (2012). Continuing bonds after suicide bereavement in childhood. *Death Studies*, 36, 873-898.
- World Health Organization (2014). *First WHO report on suicide prevention*. Retrieved from: <http://www.who.int/mediacentre/news/releases/2014/suicide-prevention-report/en/>
- Yang, S. (2012). A life history of a Korean adolescent girl who attempted suicide. *Death Studies*, 36, 253-269.
- Zech, E., & Stroebe, M. (2010). Bereavement: Contemporary scientific perspectives for researchers and practitioners. *Psychologica Belgica*, 50, 1-6.