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A Tripartite Model of Suicide Grief: Meaning-Making and the Relationship With the Deceased

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Abstract

This paper considers suicide grief in the context of meaning-making and the grieving person's relational world. Specifically, the paper focusses on the interaction between the relationship with self and the development and adjustment of relationship with the deceased, and increased vulnerability to suicidal ideation during these processes. These relational issues are considered within the theoretical and research context of a Tripartite Model of suicide grief. The model outlines a process of adaptation, from engaging with the intentional nature of suicide, through reconstruction of the death story, to repositioning the suicide and pain of the deceased's life. The metaphors of *Trying on the shoes*, *Walking in the shoes* and *Taking off the shoes* are used to illustrate and discuss different dimensions of the grief process.

A Tripartite Model of Suicide Grief: Meaning-Making and the Relationship With the Deceased

Suicide bereavement can be understood as a special case of grief, with complex meaning-making issues that challenge the development, nature and adjustment of the continuing bond or relationship between the bereaved and the deceased. Research has identified an increase in intensity and duration of grief reactions in suicide grief, and a significant clustering of distinct themes related to challenges to the bereaved person's assumptive world, psychosocial processes, health issues, depression, work and family functioning that can complicate the bereavement process (Brent, Moritz, Bridge, Perper, & Canobbio, 1996; Jordan, 2001; Jordan & McMenamy, 2004; Murphy, 1996; Murphy, Johnson, Wu, Fan, & Lohan, 2003; Range, 1998; Worden, 1996). Those bereaved report less social support and feelings of rejection and stigma within both family and community (Attig, 1996; Centre for the Advancement of Health, 2004; Cerel, Jordan, & Duberstein, 2008; Range, 1998; Range & Calhoun, 1990). The essential difference between a suicide death and other types of death is that the death is not the result of natural causes, accident or homicide; it is a self-inflicted, intentional act by the deceased, and this distinction tends to define the content of grief themes, familial disruption and psychosocial process issues that eventuate.

Rubin, Malkinson and Witztum (2003) suggested that one of the main sources of trauma occurs "when the previous representation ... of the deceased is shattered by the self-volition of the death" (p. 668). Anger and abandonment themes found in suicide bereavement can be understood as a response to feelings of profound hurt and betrayal of the fundamental relational pact of trust (Clark, 1995; Wertheimer, 1991). Research suggests that bereaved families struggle with the antecedent conditions to the death, fears for the safety

of other family members, secrets, self-blame and a range of issues that silence communication within the family and affect grieving processes (Cerel, Jordan, & Duberstein, 2008; Linn-Gust, 2001). Jordan (2001, p. 95) explained, "suicide is an unusual form of mourning experience, because losing a loved one to suicide may elevate the mourner's own risk for suicidal behaviour and completion". Many researchers have reported an increased risk of developing grief complications in suicide bereavement, with the attendant risk of suicidal ideation and behaviour (Brent et al., 1996; Currier, Holland, & Neimeyer, 2006; Kim, Séguin, Therrien, Riopel, Chawky, & Lesage, 2005; Latham & Prigerson, 2004; Mitchell, Kim, Prigerson, & Mortimer, 2005; Mitchell, Kim, Prigerson, & Mortimer-Stephens, 2004; Runeson & Asberg, 2003).

Challenges to Meaning-Making in Suicide Grief

A starting point for the research by Sands (2008) discussed in this paper is the proposition that meaning-making processes are activated to help individuals to make sense and coherence of events that disrupt existing meaning structures (Janoff-Bullman, 1989, 1998; Neimeyer, Prigerson, & Davies, 2002), and that self-narratives play a central role in this process (Neimeyer, 2001; Neimeyer, Prigerson et al., 2002; Neimeyer & Levitt, 2001). Meaning-making is a complex, relational, ongoing process that is central to grieving and fundamental to the conceptualisation of grieving in current theories of grief (Davis, Wortman, Lehman, & Silver, 2000; Martin & Doka, 2000; Nadeau, 1998, 2000, 2001; Neimeyer, 2000a, 2000b, 2000c, 2002; Silverman & Klass, 1996; Walter, 1996). Ayres (2007), as the narrator in his film based on his experience of his mother's suicide, captured in a few poignant words the struggle provoked by suicide grief:

If everyone has one story that defines and shapes who they are, then this is mine ... Most of all, this story is about my mother. I write it over and over, trying to understand her and all the things that she did. We [my sister and I] never talk about my mother. Neither of us knows what to say. The night my mother died I remember thinking I should cry now, but I didn't. In all these years I've never shed a tear for her. Instead I write about her, bringing her back to life over and over. Trying to understand her, or perhaps to punish her, or just to remember, to feel, to accept, to forgive – to love. (Ayres, 2007)

These words stress the significance of story in making meaning, and how the self-narratives that a person constructs come to define, shape and possibly confine that person. Ayres' (2007) story is about his hurt and confusion about his mother's suicide and his attempts to make meaning. And it is a story about relationships: his

relationship with his mother, with himself and others, and the silence of these issues in his relationships. This research addressed the issues Ayres struggles with: how do the bereaved make meaning and “story” a suicide death in a way that creates the possibility of healing the relationship with the deceased, with the self, and with others?

Neimeyer (1999) noted how a loss event could cause a severe dislocation of the narratives people tell themselves about who they are and their world as they understand it. The process of making meaning cannot be negative; however, the meanings constructed can be negative or detrimental to improved grief outcomes. The influence of meaning-making processes can be tracked in the self-stories or narratives people use to explain life events to themselves and others. This research applied meaning-making as a theory and as an interpretive method of data analysis to increase insight into the construction of relational meaning-making. The ability to make meanings that make sense and find benefit in the death are linked with improved grief outcomes and positive self-growth (Currier et al., 2006; Murphy, Johnson, & Lohan, 2003). However, a suicide death can stretch the limits of the bereaved in making meanings that allow them to integrate the death event. Range (1998) described the search for meaning by those bereaved by suicide, as “emotionally draining ... because they are struggling with existential questions for which there are not ultimate answers” (p. 215). Currier et al. (2006) found vulnerability to complications in grief following a violent death when the griever was unable to make sense of the experience. Neimeyer et al. (2006) found that when there is an inability to make sense of the death and high attachment to the deceased the consequent grief distress increases the possibility of bereavement complications developing.

Challenges to the Relationship With the Deceased in Suicide Grief

The study specifically explored the concept of “continuing bonds”, the term formulated by Klass, Silverman, and Nickman (1996) for the postloss attachment of the bereaved to the deceased. This attachment is described in the Tripartite Model (Sands, 2008) as the relationship between the bereaved and the deceased. Current theories of grief allow that continuing bonds and imaginal interactions between the bereaved and the dead are part of a complex process in which the bereaved realign from the living person to a constructed imaginal presence of the deceased, that becomes an ongoing presence in the bereaved person’s life (Klass et al., 1996). Boerner and Heckhausen (2003) conceptualised the development of continuing ties with the deceased as a process of transformation that involves both disengagement from the living person and connection or reconnection with a mental representation as the ties with the deceased are transformed. Marwit and Klass (1996, p. 305) noted that the deceased played “an active role in the ongoing lives of survivors”, providing a valued role model to the bereaved in their lives. Klass (2006) noted that the relationship or connection with the deceased could be positive or negative, in the same manner as continuing bonds in living relationships can be subject to a variety of pathological elements.

There are multiple storytelling difficulties in a death due to suicide that influence the development and maladaptive or adaptive nature of the relationship with the deceased. Many researchers have noted the difficulty of making meaning of a suicide death (Clark, 1995; Jordan, 2001; Linn-Gust, 2001; Neimeyer et al., 2006; Wertheimer, 1991). Rynearson (2001) examined his compulsion to return repeatedly to the death event in efforts to make meaning and find a way to live with the intentionality of his wife’s death, and observed how the dissonance between the killing action of the deceased and the caring actions of the bereaved destabilises and disrupts the narration of the dying story, creating “a structural dead end that fundamentally complicates retelling” (p. 21). Neimeyer et al. (2006) highlighted concerns for those bereaved that have an intense attachment or bond to the deceased coupled with an inability to make sense of the death. Walter (1996) noted the significance of the “last chapter” about the life of the deceased and its importance for the relationship with the deceased in the ongoing life of those bereaved.

Challenges to the Relationship With the Self in Suicide Grief

This study considered the influence of suicide on the bereaved person’s relationship with the self. Current theories of grief emphasise the uniquely personal process of grief for each individual, and recognise that this process involves changes at a fundamental level to the individual’s sense of identity and assumptions about their world, and the possibility that these changes can provoke a search for meaning and growth through grief (Attig, 2004; Calhoun & Tedeschi, 1999; Hedtke & Winslade, 2004; Janoff-Bulman, 1998; Landsman, 2002; Neimeyer, 2001, 2002; Neimeyer, Botello, Herrero, Pacheco, Figueras, & Werner-Wilder, 2002). Attig (2004) described this process as relearning the world. Janoff-Bulman’s (1989) model of underlying assumptions upon which humans organise their lives offers insight into the challenge that death presents to people’s relationship with self and the reverberations of the impact of trauma on their assumptions about their world. Those bereaved by suicide have repeatedly reported their grief experience as a shattering of their sense of self (Barrett, 1989; Bolton, 1986; Jamison, 1999; Lukas & Seiden, 1990; Neimeyer, Botello, et al, 2002). Betrayal of trust is one of many issues with which those bereaved by suicide wrestle (Clark, 1995; DePrince & Fred, 2002; Wertheimer, 1991). In an educational film on suicide, a bereaved child asks, “Why did he do that to me?” (Sands, 2003). How do those bereaved understand the meaning of the death in terms of their relationship with the deceased in ways that are positive for their relationship with themselves? Jamison (1999) addressed the deeply personal meaning of a suicide death, asking, “How can killing oneself, in the context of other lives, ever be seen as anything but a highly personal ... act?” (p. 292). For those bereaved, whose life and love were entwined with the deceased, suicide can be a devastating assault on their relationship with self and their assumptive world.

The Study

The study used a hermeneutic interpretive methodology to analyse audio recorded participant conversations and writings, in the belief that those bereaved by suicide are

the “experiential experts” on the phenomenon of suicide grief. Data analysis generated three central organising themes through which to further interpret data. Data derived from a cross-section of 16 adult male and female participants, all of whom voluntarily attended a suicide bereavement group of 30 hours over three months. Participation in the research was voluntary on completion of the group program. The study included a range of relationships of loss, and participants were between six months to three years bereaved. The study did not consider individual differences but instead constituted a representative cross-section of bereavement group participant data. The group case study method of collecting data provided the opportunity to gather data from an interactive, less structured setting than interviews provide.

The model (Sands, 2008) proposes a tripartite process of adaptation to illustrate the different relational dimensions of the grief process in suicide bereavement (see Figure 1). The multi-directional arrows represent the non-linear nature of grief processes. The first phase of the model is *Trying on the shoes: Understanding the relationship* and is concerned with the bereaved engaging with the intentional nature of a suicide death. A suicide death sends a message to those who care about the deceased, but the message is difficult to decode and understand. The impact of the intentional nature of suicide surfaces in a range of relational themes that saturate group discussions, commonly explored through various forms of “why” questions. The intentional nature of suicide tends to subsume the deceased, and challenges grievers’ understanding of the foundations of their relationship with the deceased.

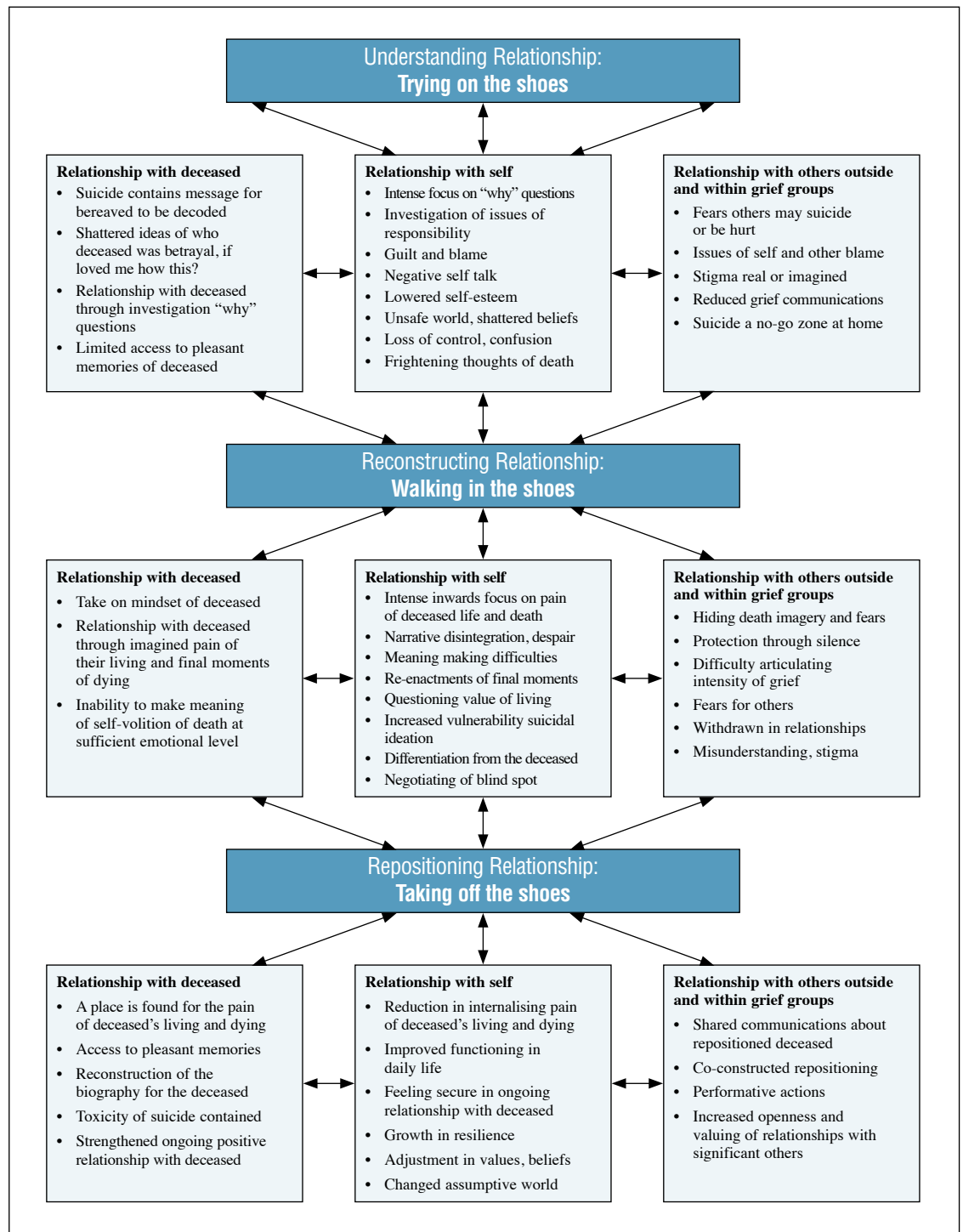


Figure 1. The Tripartite Model of Suicide Grief

These questions can be understood as part of an ongoing dialogue that is both internal and external. This paper focusses on the second and third phases of the model, *Walking in the shoes: Reconstructing relationship* and *Taking off the shoes: Repositioning relationship*. Within these sections two relationship areas are covered: the relationship with the deceased and relationship with the self.

Walking in the shoes: Reconstructing relationship

Walking in the shoes: Reconstructing relationship is concerned with reconstruction of the death story and the prevalence of themes that focus on the pain of the life and death of the deceased. Research data suggested that the bereaved constantly either physically or in imagination return again and again to the death scene and the sequence of events prior to the death. Why do those bereaved by suicide do this? The pain of the life and death of the deceased is a major meaning-making challenge for the bereaved. There is a need to understand the mindset of the deceased, and the activity of reconstructing the death story assists the bereaved in meaning-making efforts that facilitate development of the relationship with the deceased and integration of the loss (Rynearson, 2001; Walter, 1999).

Research suggested that during reconstruction of the death story the relationship between the bereaved and the deceased tends to be developed and maintained through the pain and trauma of the deceased's life and death. A bereaved participant explains how thoughts of the deceased lead inevitably to the horror of the death: "It's there every day, I think it colours – it's in every pore of my skin ... I guess 'cause it was so traumatic ... I can't get that vision out of my head." (Sands, 2008, p. 111) The bereaved are vulnerable in reconstruction processes and can become so immersed in walking in the shoes of the deceased and imagining their mindset that they experience similar hopelessness and suicidal ideation. There is significant difficulty in reconstruction efforts because the deceased's death is a statement about not resolving the pain of living; a statement that leaves a message for the bereaved that maybe they will not be able to resolve their pain. Those walking in the shoes of a suicide victim can be drawn into experiencing a challenge to their assumptive world, similar to the challenge that the suicide victim experienced. This is the bereaved at their most vulnerable. It is also possible for the bereaved to stay interminably trapped in ruminating within the mindset of the deceased. To be supported in these meaning-making processes and standing in the shoes of the deceased at the moment of death, to realise that you are different and want to live, can assist navigation of the *blind spot* that is the incomprehensibility at the core of suicide. Navigating the *blind spot* is not about making meaning that is profoundly comprehensive so much as getting to a place of meaning that allows the bereaved to reinvest energy in living.

The excerpt that follows illustrates the nature of both the relationship with the deceased and the relationship with the self. This mother is two years' bereaved and still in the constant shadow, not only of her son's suicide but the dark companionship of her own suicidal fears. She is consumed in thinking about reconstruction questions, "What if?" and questions of intent, "Why?" She connects with him through thinking about "the

fact it was suicide". The circumstances of the death remain confused and she continues to struggle with the self-volition of his death. The place she is with her son is the nightmare day he died. In this "surreal" place she cries over the things that she can't change and the things that remain undone. At night she lies in bed praying to die from a heart attack. The quotes in this article described as from "participants" are taken from conversations and writings of study participants in Sands' research (2008).

Two years on my world is worse as I think about what if? Why?... But it is not a place where I would do anything but at the same time I pray every night I have a heart attack. I don't know why I'm on this earth ... I ... think about the actual suicide, how and how long did it take, it's too painful ... The fact it was suicide is always there and does stop me moving on ... the pain is still as bad ... it's just a real struggle ... I think about the day [he] was found a lot, any time of day. The events on that day are quite a blur ... I can't understand how [he] could do what he did. I often go there in my mind but still can't come to terms with it ... That day will always remain a nightmare. It seems so surreal ... I wish I could have seen [him]. We weren't allowed to – I wish I had a lock of his hair, I will always just wish ... I just wish I had some insight as to how much pain [he] was in ... you just go on with a part of your heart missing and the suicide issue is just huge.

The next excerpt is from a mother who is six months' bereaved. The death place is where connection between the bereaved mother and deceased daughter takes place. The mother is drawn back into the death story again and again, struggling with insoluble questions. She tries to sequence and order events. She describes her anguish and confusion about how long it took for her daughter to die and the persistent horror of the visual image from when she found her daughter. At this point the mother walks in her daughter's shoes right up to the moment of death. She fears: "I will end up doing it myself". However, there is differentiation between herself and her daughter: the mother wants to keep herself safe by not knowing too much about hanging.

I think about it every day ... Time is skewed ... I'm confused how long it took her to pass away ... To visualise her when I saw her. Pure fear, shock, panic. To think about her being alone: what she was doing and thinking on her last moments on earth? Why would she leave everything and everyone? Her heart stopping, that is horrific, thinking about the actual moment her heart stopped beating. ... Why didn't I hug her and be with her and kiss her ... Why didn't I go in the ambulance with her? Why didn't I go to the hospital morgue and spend time with her there ... The sight of her – so still, not moving ... gone ... Could I have saved her if I tried? How long did she suffer for before she died? What if she changed her mind halfway through but it was impossible to save herself ... I need to know how hanging works and how long it would have taken her to go. I'm scared if I know too much about how to hang I will end up doing it myself.

In the next excerpt it is important to recognise that this young woman is walking in her father's shoes in order to reconstruct the death event, to help her understand how he could kill himself. Like a forensic investigator, the daughter examines the position of the furniture, the proximity of the post to the hanging spot and the length of the drop. Step by step she moves herself into re-enacting his death. Her conclusion is that "[her] dad did not want to stop or pull out". She reflects that she would try to live, and this is the point of differentiation and adjustment in the relationship with her father. Hard as this knowledge is to accept she tells us this has helped her.

All I could think about was what was he thinking at that very moment when he put the rope around his neck, when the last thing he saw was the family portrait in front of him. Did he think of us? Did he struggle? Did he do it then try to pull out? So many questions ... I know if I can't breathe I struggle and try anything to get air ... I had to see if he could get out if he wanted to. Well I know with the fall only a very short one – I know my dad's neck could not have snapped ... No furniture or anything was moved ... Dad hung himself on the start of a spiral staircase. ... I re-enacted my dad's hanging ... I put the chair in the exact place dad kicked it from. Everything was the same. Well I put the rope on and I now know if dad wanted to get out of it he could have, the chair was close enough ... I could put my feet up on and lift myself up. My dad was bigger and a lot stronger ... My dad did not want to stop or pull out – I get much more peace knowing ... so this has helped me.

The next excerpt gives insight into the bereaved person's relationship with the deceased and how it impacts on their relationship with the self, while inside the mindset of the deceased. For this man his relationship with himself is submerged within his brother's pain.

Staring into the middle distance and go into a state of suspension – that's often what might be happening inside. I suppose ... like time stands still, I feel – I feel like that ... space where I am where there is no time where I reflect back and forwards. My brother is there ... the whole – the whole um – the energy is about him and well the sadness that he went and um – trying to feel like I'm connecting ... But that feeling is a way of being with my brother ... there's a lot of sadness and lot of guilt ... I just like to have really given him a big hug but I didn't, I didn't get a chance.

The last excerpt in this section gives insight into the isolation of the relationship with self. The woman describes how she is haunted by her reconstruction of the violent image of the suicide jump and her relationship with the deceased. Other people are not part of her world. She is alone, maybe too fragile to make it to the future. In fact she feels that she is walking on "that cliff" up to the moment of death. However, she pulls away from the cliff, telling us, "I can't bear to be near the edge of a cliff". This is an important moment in which she differentiates from the deceased and experiences fear and the need to keep herself safe.

The violence of her jumping haunts me and I feel I want to shake her. I want to ask her – I want to know what she was feeling ... I feel alone even though I'm surrounded by people ... I'm lost ... I don't really want to do anything ... I feel so fragile, like I am walking on that cliff and to fall off would be the natural progression ... The effort is to pull back and find the energy ... I have withdrawn because I don't have the energy ... to participate. When I think of her I think of the violence, the image of her being airborne, the image of her smashed up body... I can't bear to be near the edge of a cliff ... When I think of how she died I feel physically sick ... I want to throw up and ... Sometimes I dry retch with horror.

Taking Off the Shoes: Repositioning the Relationship

Research suggested that repositioning themes tend to surface once the bereaved have differentiated from the deceased and negotiated the incomprehensibility of the *blind spot* at the centre of suicide. The bereaved are ready to take off the shoes of the deceased and are no longer intensely focussed on questions of intent and on their reconstruction of the death story. Grieving continues however this shift in focus facilitates adaptation assisting as one participant noted "other layers of subtle grief" to be experienced. During repositioning, the relationship with the deceased adjusts from maladaptive to adaptive as the death event and pain of the deceased's life are separated from more nurturing memories. Repositioning tends to validate the suffering of the deceased but not their decision to kill themselves. Analysis of group data suggested that repositioning importantly assists in re-establishing a sense of order and safety in the world, while also repairing broken trust and increasing personal efficacy. Repositioning narrates difficult meaning-making issues and facilitates positive memories of the deceased. The development of an ongoing relationship with the deceased can occur regardless of whether the bereaved believe in an afterlife or are religious. A mother describes the concept of repositioning and how she is forming an adaptive relationship with the deceased as a valued presence in her life. For this mother the pain in her daughter's life and death had taken over her memories of her daughter, so much so that her living experience of her daughter was, as if she had "never been". But now she is drawing her daughter's essence back into her life.

I have made a really conscious effort to have things around me that were hers and that she or I gave her, or she gave me, or things of significance ... I just kind of draw her essence back into my life ... And it's getting there ... you don't stop your relationships with the people that you care about when they are alive so you are not going to suddenly come to a point where you stop developing a relationship with someone that's died. To me it's ongoing and some bits are good and lots aren't good and you just hang onto the good bits but you try and like move on with it.

To understand the next piece, I refer the reader to an earlier excerpt where this man talked of how he connected with his brother in a pain-filled place in which time was suspended. Now he tells us that his relationship has adjusted and that there are many more

pleasant memories through which he can relate to his brother. This is allowing other subtle layers of grief to be experienced.

I have ... learned to step outside of it and see it grow smaller, giving perspective and allowing it to disperse ... rather than clumped into a focus point. Instead the painful feelings are washed through with many more pleasant memories ... there is no point in focussing on the worst point in his life ... I have learned to focus on the rest of his life ... and see the whole picture, not just the bad part ... Good and bad but washed in together ... my emotions have shifted and I [feel] less anger underneath and other layers of subtle grief [are] being uncovered.

In the next excerpt this person explains the adjustment in relationship with the deceased. The suicide is placed in a time context, that happened “then” but “now we are over here” and the relationship with the deceased has shifted from reconstruction of the death to relating with him as a wise, nurturing guide.

I feel so guided by him [the deceased] – and I didn't feel that before ... when you evolve ... you are wiser ... And the way he died, his death that he did it to himself – that feels kind of like, well that just happened then and now we are over here and he is helping.

When the relationship with the deceased adjusts from maladaptive to adaptive, the relationship with the self improves. The bereaved often report a sense of peace or calm and a decrease in feelings of guilt and blame. Having reached a cognitively complex level in constructed meanings about the suicide, the bereaved can forgive themselves and forgive the deceased for leaving them in that way. This mother explains her belief that her daughter is somewhere “good” and no longer trapped in the death event. Her grief is not dammed up because of the intensity of relating with the deceased through the death story:

I no longer feel that my daughter's death was my fault. It's like a great weight has been lifted. I believe she is somewhere good ... I have the strength to go on with life ... Grief is no longer a roller-coaster but more ebb and flow. I am finding a place in my life for her suicide.

The following words have a redemptive quality, acknowledging the extraordinary resourcefulness and strength needed to reach a place where it is possible to forgive the self. The metaphor of “place” suggests that the pain is contained, no longer seeping over everything.

To survive this loss has required every strength, and every ounce of knowledge and experience gained throughout my life ... I never thought I could forgive myself for what happened ... it has found a place within me.

A mother describes how she has taken down a shrine for her daughter. The relationship is no longer centred on her death. The mother has repositioned the daughter as “part of [the family] again”. The expression has an almost organic sense: she is not just with them but part of this family. The continuing relationship with her daughter has the promise of accessing good memories. Her functioning has improved and she is no longer a high risk for suicide.

[I am] Calmer, more at peace, and less hard on myself. My daughter has another place no less significant but different in the family ... it isn't the full shrine any more ... I have actually sort of put her back into the family again. Rather than making her stand out and the others around, she is part of them again, and now I feel a lot more at peace with that ... I am working better at work as well, my concentration ... what I was finding it hardest to come to terms with is how do I survive after she is gone. And I am starting to learn that – yeah I can survive, now, but ... I would have been really high on that suicide list. I was not stable.

In the next excerpt this woman talks of how being able to grieve within the group, to put on the shoes and walk into the “black hole” into which her sister had “disappeared” and find her sister, to bring her “back”, have helped her to feel safer. Significantly, she is no longer relating to her sister within the black hole. The relationship has adjusted and she is now able to identify her thoughts, fears and sadness as grief, not as indications of suicidality and mental illness.

[I feel] Safer ... I'm not scared anymore that I have a mental illness. I've been able to verbalise the thoughts, images and fears that I couldn't share with anyone else outside this group. I have been able to bring my sister back from the black hole I felt she had disappeared into. I have been able to share my sadness with my family.

Conclusion

This study applied current theories of grief to the issue of suicide grief, surfacing critical themes in grief group conversations and writings. The group data supported a tripartite model of suicide grief. The model proposes that initially the message of a suicide death provokes the bereaved to engage with questions of intentionality and to *try on the shoes* of the deceased. As the bereaved begin to reconstruct the death story they find themselves *walking in the shoes* of the deceased, trying to make meaning of the pain in the deceased's life and death. These meaning-making activities are relational and challenge the relationship with the self, the deceased and significant others. Analysis identified the prevalence of the bereaved forming maladaptive relationships with the deceased. The intense focus and rumination on reconstruction can increase the vulnerability of the bereaved to suicidal ideation and possible suicide. However, when there is safety and containment that supports the bereaved in reconstruction efforts, they can navigate the incomprehensible nature of suicide and differentiate themselves from the deceased, choosing life. It is important to stress the non-linear nature of these grief processes. As ruminations on the death story lessen, space is created for positive remembering, repositioning, development and adjustment to an adaptive valued relationship with the deceased. In this process, as illustrated in the data, the trust, connection and collaboration developed within the grief group are beneficial. Significantly, the prevalence of relating to the deceased through reconstruction of the death story and the relationship between this and increased suicidal ideation requires further research to determine

how and when these activities shift from effective meaning-making strategies to become active suicidality. It is important to note that the study data derived from group participants who constituted a small sample. It is not claimed that the model and study findings are representative of all people bereaved by suicide. Rather, these findings are put forward to encourage further research into the implications of the model for education and practice issues, and in particular the theory, interventions and outcomes of suicide grief group and counselling programs.

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