

PEER REVIEW HISTORY

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ARTICLE DETAILS

TITLE (PROVISIONAL)	Suicide postvention for staff and students on university campuses: A scoping review
AUTHORS	Allie, Sophia-Lorraine; Bantjes, Jason; Andriessen, Karl

VERSION 1 – REVIEW

REVIEWER	Mirick , Rebecca G. Salem State University
REVIEW RETURNED	18-Oct-2022

GENERAL COMMENTS	<p>I was excited to see an article on this topic, as it has been understudied and there is therefore little support from the research literature to guide university's decision making. This review includes many very recent articles and is up-to-date.</p> <p>I think the biggest revision need is to think about how to synthesize the findings in a way that is readable and clear, containing enough information to make meaning of the findings and not be a superficial description and not too much that the reader gets bogged down in the details. In places there are simply not enough details and the findings read as not specific enough to higher education---and instead, a thin description of suicide bereavement. I understand this is a challenging undertaking but I would encourage the authors to consider this in order to increase the value of the article to universities.</p> <p>Some specific feedback:</p> <ul style="list-style-type: none">-In terms of individuals exposed to suicide, it is my understanding that the 6 number has been debunked, and the 135 number is generally accepted.-p.9, line 55---you talk about challenges but then only name one in the sentence.-p.9 line 60--rephrase this sentence to clarity.-p.10 Do they say anything else about memorials? This is a controversial topic. More details---if available--could be very helpful here.-p.10 line 19--what does "poorer prognosis" and "recovery"" mean in terms of grief? Who rated them? How?-p. 10 Tenses go back and forth here--do a quick edit for consistency-p.10, line 60--Are you saying here that all participants experienced suicide as a possibility following their loss? This doesn't feel accurate and conflicts with the final sentence of that paragraph.
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	<p>-p.11 I think the challenge I am having here is that this is written as if it applies to all participants. Who says this? Who is more likely to have these experiences?</p> <p>-p.11 line 28--please rephrase the "positive impact of suicide". I know what you mean here, but maybe rephrase to "used work as a coping skill and increased their effectiveness in that arena" instead of implying a positive impact of suicide.</p> <p>-p.11, line 57----this sentence needs a citation. Is it also 35? It's not clear.</p> <p>-p.12 When you say that the gendered component is well supported by the suicide bereavement literature, what do you mean? Do you mean that more women than men are impacted? Or that women are more likely to be participants? If it is the second, please expand on why that is a problem.</p> <p>-p.12 Be careful with language---it's not "bereaved by relatives" but "bereaved by the deaths of relatives" ...it's interesting to me that you do not use the term "suicide loss survivors" in this paper. Is that intentional?</p> <p>-p.12 This discussion about level of distress seems to go beyond the findings presented. Additionally, it is important to consider who is the non-relative---friend? Roommate? Classmate? Teammate?</p> <p>-p.12 Careful about the subjects of sentences....the literature doesn't argue, but researchers and experts do.</p> <p>-p. 13 the first two sentences feel unrelated---one is about suicide grief having a greater impact on students than non-suicide and the second is about grief impacting students...</p> <p>-p.13 Please expand on the suicide risk---this is an essential component of postvention. Is there any information in the literature on who is at elevated risk? Rephrase line 12----while the provision of supports is certainly recommended, I don't think there is research that supports it prevents suicide, although this is the goal.</p>
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REVIEWER	Mueller, Anna Indiana University Bloomington
REVIEW RETURNED	17-Nov-2022

GENERAL COMMENTS	<p>This study lists three objectives, which are to: (1) describe the impact of suicide bereavement on staff and students at universities; (2) identify institutional responses to suicide bereavement at universities; and (3) describe postvention interventions at universities. These are important objectives that could have important contributions for suicide postvention. While this paper attempts to meet these objectives, the authors ultimately find that there is very little (if any) literature that could help them accomplish aims 2 and 3. This critical gap in the literature on a topic that they demonstrate impacts many in a negative fashion is important to note.</p> <p>The methods are strong, particularly since the authors drew literature from a broad array of academic databases that ensure transdisciplinary representation (something that is not always common in this area of research). It would be helpful if a little more information were provided on why articles that were returned via the search results were excluded such that 3,158 articles turned into 26. Related, the 10 disagreements on whether to include or exclude an article are worth a little more attention. What was the case for excluding or including these article (and how many were</p>
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	<p>included?) It seems with such a small sample size it may be better to err on the side of inclusion.</p> <p>With regard to the results and discussion, given that the paper is organized around 3 aims, it would be helpful to organize the findings and the discussion around these 3 aims more explicitly. This is particularly important in the discussion where the real take-home point from this scoping review – that very little is known about postvention at HEIs despite HEIs being highly impacted by suicide – is somewhat lost. The authors, for example, start the discussion section by focusing on something that is not related to their aims (though it is an important point – that knowledge about postvention is generally produced from high income countries in the Global North). Thus, the discussion could be rewritten to better link the results to the aims introduced in the beginning.</p> <p>Why are the results organized by methodology instead of by findings or by the aims? This needs to be justified (or changed to something that fits the structure of the authors argument better). Why not organize around the aims?</p> <p>To meet their study objectives it would be particularly helpful if the authors could in the results have a section on institutional responses to suicide at universities and postvention intervention at universities – using whatever data they can find. There was a brief – and exciting – introduction of this on page 8 where the authors write, “There were varying views on support both received and accessed with staff citing that institutional processes were unsupportive to staff in a culture that values student well-being over staff-wellbeing. Challenges identified by university administrators in responding to student suicide was the lack of postvention training received as part of their role...” Can the authors expand on this? This seems very important. Also on pg 10, the authors talk about how staff and students bereaved by suicide would like “practical support.” Again, this is getting at the authors aims, and could be expanded on further. What does that mean? What does it look like?</p> <p>I have some suggestions with regard to the discussion as well. Given the dearth in the literature, the most important goal the authors should have is to set out a clear future research agenda. It would be also be very helpful if the authors could highlight clearly what kind of knowledge needs to be produced in order to close critical gaps in postvention knowledge at HEIs. For example, some HEIs are quite large while others are smaller than high schools. Are we always certain that a student’s suicide death impacts the entire organization? How might postvention vary based on the size of the HEI or the integration of the student into the student body? What other factors may be unique to postvention at HEIs? Thus, the discussion needs to be written to accomplish this and maximize this article’s contribution to the literature.</p> <p>Minor thing: The exclusion criteria table is not necessary— everything listed is just direct opposites of the inclusion criteria.</p> <p>This review was prepared with the help of Robert Gallagher, MA.</p>
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REVIEWER	Lamont-Mills, Andrea University of Southern Queensland, School of Psychology and Counselling
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GENERAL COMMENTS

The authors are to be commended for focusing on an area of suicide bereavement and postvention that is often overlooked in suicidology studies. Moreover, it is timely given duty of care discussions that are being had in the United Kingdom in relation to university management and university students' death by suicide. Thus, this review has the opportunity to make a significant contribution to this discussion.

However, there are three major and significant concerns I have with the current manuscript. The first is that there is no mention of any a-priori protocol development. Whilst the protocol does not have to be published or registered, it must be developed and then any deviations from the protocol during the conduct of the actual review noted in the write up of the review. This is absent in this manuscript. I assume there was a protocol, and if so this could be included as supplementary information. Given scoping reviews are iterative in nature, not presenting the protocol does not allow the reviewer to see this iteration in action. At the moment there is an absence of detailed information about the conduct of the review that I suspect is based on word count restrictions but could be overcome by inclusion as noted above. Without this information present or being able to be referred to, there are concerns about the systematic conduct of the review that I will outline later that raises questions about the reliability and validity of the review.

The second concern is the use of one reviewer for the identification of suitable studies stage of the scoping review. The JBI guidelines are somewhat unclear about the number of reviewers required for this stage. However, Levac and colleagues (2010) are not. They contend that this stage is to be conducted by a team of reviewers not one as has occurred in the scoping study under review. Further, it is becoming common practice for scoping reviews that follow JBI guidelines to include a team of reviewers in the identification of suitable studies stage. This is because there is the real possibility of researcher bias being introduced at this stage without an independent reference point. Scoping reviews that follow the Arksey & O'Malley (2005) approach as also moving toward the inclusion of a team of reviewers at all points of the review. This aside, the use of only one reviewer at this point has not been considered by the authors as a limitation, or any argument put of why only one reviewer was used. Given the more difficult work in a scoping review begins in stage two study selection, it seems odd to not have at least two reviewers undertaking the identification of suitable studies stage. It is very easy to make errors in searching databases and without an independent check point, any error is unlikely to be picked up but will have significant flow on implications.

The third concern is with the search strings. The authors contend that they are looking at all higher education institutions (see lines 25-26), however the search strings do not necessarily reflect that position. They only mention university or college. What about polytechnic? Institute? This is potentially a significant issue as some higher education providers in other countries do not have the word college or university or campus or higher education in their descriptors. Thus, there is the potential that some relevant studies have not been identified in this scoping review. This is

	<p>particularly so for there is an assumption by the authors that higher education institutes are where students come on campus to study and live. This is not the case in other countries including high income countries.</p> <p>Introduction It is recommended that the first paragraph be edited so it sets the scene for why look at universities as a site for suicide bereavement and postvention. The global 700 000 could be replaced with a stronger focus on death by suicide in the 15-29 age range and suicidal behaviour of university students (see Pillay 2021 for a systematic review of this). Without this there is a conceptual leap to line 15 that is difficult to bridge as currently presented.</p> <p>As noted above, the unique context of a university seems to be centred around a particular cultural understanding of attending a university. In some countries such as Australia, living on campus is the exception not the norm, similarly with engaging in extra-curricular activities. In addition, there is research that suggests that students no longer spend the majority of their time on campus (see line 38), they are juggling part-time work, family, and social obligations. Thus, the authors may like to consider re-framing this as it speaks to a specific university experience.</p> <p>Line 50 – sentence that ends with withdrawal. A citation is needed for this claim.</p> <p>Overall, a justification for the need for a scoping review is required and why this particular form of systematic reviews is needed. Just because one hasn't been done doesn't mean it should be. The authors are encouraged to think about why is the lack of a synthesis of evidence problematic? What doesn't it allow? Why is not knowing about what has been done an issue? Here a focus on the synthesising of evidence is what is needed rather than the substantive area of suicide bereavement and postvention in a university context. This would be helped by an argument as to why research on high school and primary school research is not able to be generalised to the university context. There would be a similar argument about the amount of time primary and secondary students spend with classmates so I am not seeing at the moment the need for this review.</p> <p>The objectives seem to be missing identifying what research has been conducted and then describing etc.</p> <p>Methods It is somewhat unusual for the research questions to be presented at the end of the method section. I would recommend the research questions on lines 17-21 of the data synthesis section be placed either at the end of the introduction or in the methods section before inclusion and exclusion criteria. At the moment it is difficult to see the link between the scoping review objectives and research questions.</p> <p>Can the authors please address how the research questions were developed. This of course may be answered if the protocol is included with the manuscript. However, some mention and then</p>
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	<p>discussion of the application of PCC to the current review is required.</p> <p>Inclusion/exclusion criteria Line 53 – the inclusion of HEI is not needed given the previous definition presentation on lines 25-26.</p> <p>Line 53 – in terms of inclusion does consists of mean for a study to be included the population must only be university staff/students? That is, if a study also included other populations such as secondary school students would that study have been excluded? Or is it include and that there needed to be a result related to university staff/students?</p> <p>Line 58 – so does this mean there was no research design restriction?</p> <p>Line 60 – some explanation of why language was restricted to English and why papers needed to be peer-reviewed is needed. Given scoping reviews typically focus on searching grey literature as well, although that is somewhat changing, the explanation of peer-review allows for a clear statement as to why grey literature was not included. This then needs to be noted as a limitation.</p> <p>I am unclear in this section if the intent of the scoping review has been fully captured. That is, from the objectives and research questions I understand this review to be about suicide bereavement and postvention in relation to a death by suicide of a university student. If this is not the case, then this needs to be made much clearer. If this is the case, then the inclusion and exclusion criteria do not appear to capture the bereavement and postvention in response to death by suicide of a university student.</p> <p>Patient and public involvement This section is really asking about the inclusion of individuals with lived experience of the phenomena under investigation. Given the clear position of key international suicide prevention associations for the inclusion of those with lived experience of suicide, including suicide bereavement to be included in research studies, the authors are asked to consider re-framing this from this position. Did any of the authors have lived experience as a staff member/student? If not, an argument can be made for non-inclusion.</p> <p>Search strategy Did the authors search the databases in the order presented on lines 47-52? Please make the search order clear.</p> <p>It is not clear what the search parameters where when identifying suitable studies beyond English language. There is no mention of date range or at least one not being imposed.</p> <p>An explanation of why these particular databases were chosen is needed.</p> <p>Study selection I am just checking – it reads as if there was a double duplicate removal process. First in Endnote and then in Rayyan QCRI? Is that correct.</p>
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	<p>Data extraction It is noted that the authors developed their own extraction tool. This was also piloted. Were there any changes to the tool? If so what were they? This is the iterative aspect of the review being demonstrated.</p> <p>The tool notes country of origin – was that for the study authors or for the participants of the study or both? This just needs to be made clearer or include both.</p> <p>Were any study authors contacted for missing or additional information? If so, how many and it not why not?</p> <p>Given only one researcher extracted the data, did the authors engage in any validity check of data extraction? If not, why not as this is one place where there is a heightened risk of researcher bias being inadvertently introduced through extraction errors.</p> <p>Data synthesis It is note clear who engaged in the data synthesis. Can the authors please make that clear?</p> <p>Can the authors please provide information about why they engaged in a descriptive and narrative synthesis? That is, why was this the most appropriate synthesis approach to address the proposed research questions?</p> <p>Did the authors engage in any quality assessment of each study? If not, why not?</p> <p>Results Study characteristics The authors note that 5 of the 10 quantitative studies used surveys, what did the remaining 5 use?</p> <p>Line 35 – I wonder if this sentence could be re-framed. There is not much difference between 7 and 8 thus the most jars a little.</p> <p>In relation to the qualitative and mixed methods studies, the type of qualitative approach needs to be included in this section as it is a study characteristic.</p> <p>Inclusion of information about the outcomes measures used is also needed in this section along with how impact and suicidal behaviours were measured.</p> <p>Given my point about inclusion, from the results it appears that this review was not focused exclusively on suicide bereavement and postvention in response to a university student’s death by suicide. Line 12 introduces the notion of relatives and non-relatives. From this reporting it is unclear what this relates to. If it does relate to relative death by suicide then I am perplexed at the inclusion as what was set up in the introduction is suicide on campus or responses in relation to a death by suicide of a university student.</p> <p>Findings from qualitative studies The inclusion of qualitative approaches in this section is better placed in study characteristics</p>
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	<p>Line 60 – editorial error timeous?</p> <p>Findings from quantitative studies It is difficult to know who the participants are when the phrase some participants (see line 19) is used. Given the previous use of noting the specifics of the participants (i.e., students), this should continue here as well. This point is relevant for the whole results section.</p> <p>Discussion The main issue I see with this section is that more detailed unpacking of the meaning of the results is needed across this section. At the moment it sits at the superficial level and is somewhat repetitive and does not delve deep into the implications of this review for the substantive area. That is, it misses the opportunity to make sense of the review findings at a substantive area level. For example, what is the issue with mainly descriptive, quantitative, or mixed methods studies? What is the issue with the gendered component of the studies? Thus, what is missing is the underlying why of many claims and leads the reviewer to think well so what?</p> <p>Line 15 focused not focuses</p> <p>Can the authors please explain on what basis they are making the claim that a student's/staff member's experience of the sector may vary vastly based on country income.</p> <p>Line 45 – can the authors explain why findings from postvention intervention studies conducted using schools and adolescents cannot be generalised to the university context.</p> <p>I feel that the authors can make a stronger argument about why not focusing on staff experiences is potentially problematic. Why is it important to include staff? I would encourage the authors to think about well-being and employer responsibilities.</p> <p>I feel that there is an overreach on some of the claims in this section. Given the small number of studies reviewed, statements such as “not all impacts of suicide bereavement were negative” may be overstating the evidence. Perhaps it appears that not all ...</p> <p>See line 38 page 12 for similar overreach.</p> <p>The last paragraph on page 12 is somewhat repetitive of the results section and would benefit from going beyond the superficial as noted previously.</p> <p>Limitations – why is not including a quality assessment a limitation?</p> <p>Limitations – how is data being limited to peer-review a limitation?</p> <p>Limitation – how is limiting to English a limitation? As a note could this account for the number of high-income country studies included in this review? Maybe there are studies from low-middle income countries but they were not available in English?</p>
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	<p>Limitations – is not including grey literature a limitation?</p> <p>Limitation – is not including two reviews in searching and then data extraction a limitation?</p> <p>Limitation – can the authors please explain how not capturing studies from low or middle income countries is a limitation?</p> <p>Conclusion Line 26 – “needs to be strengthened...” is a strong position based on 17 studies. Perhaps some tempering of language is needed.</p>
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VERSION 1 – AUTHOR RESPONSE

Reviewer 1: Rebecca G. Mirick, Salem State University		
<p>I was excited to see an article on this topic, as it has been understudied and there is therefore little support from the research literature to guide university's decision making. This review includes many very recent articles and is up-to-date.</p>	<p>Thank you for your comments. We appreciate the positive feedback, and the opportunity to improve the manuscript for publication.</p>	
<p>I think the biggest revision need is to think about how to synthesize the findings in a way that is readable and clear, containing enough information to make meaning of the findings and not be a superficial description and not too much that the reader gets bogged down in the details. In places there are simply not enough details and the findings read as not specific enough to higher education---and instead, a thin description of suicide bereavement. I understand this is a challenging undertaking but I would encourage the authors to consider this in order to increase</p>	<p>Thank you for your comments. We appreciate the opportunity to improve the manuscript for publication.</p> <p>The findings have been refined to make them more applicable to higher education. We hope these amendments increase the value of the article.</p>	<p>All changes are indicated by track changes in the <u>results</u> section on Pages 8-12.</p>

the value of the article to universities.		
In terms of individuals exposed to suicide, it is my understanding that the 6 number has been debunked, and the 135 number is generally accepted.	Thank you for the comment. This reference has been removed.	This reference has been removed.
-p.9, line 55---you talk about challenges but then only name one in the sentence.		<p>The challenges have been named in Supplementary <u>Table 1</u>, under <u>qualitative studies</u> and author Rompalo (3). Changes are indicated by track changes on Page 1:</p> <p>HEI administrators identified three main challenges i) lack of postvention training ii) managing notifications about the student death before it gets announced on social media iii) balancing remembering the student with a memorial while minimising the risk of suicide contagion on campus. HEI administrators also stated that there are those that felt that by having memorials they were endorsing suicide and venerating the deceased student.</p>
-p.9 line 60--rephrase this sentence to clarity.	This sentence has been amended.	<p>This can be found in Supplementary <u>Table 1</u>, under <u>qualitative studies</u> and author Rompalo (3) on Page 1. Changes are indicated with track changes.</p>

		<p>HEI administrators also stated that there are those that felt that by having memorials they were endorsing suicide and venerating the deceased student.</p>
<p>p.10 Do they say anything else about memorials? This is a controversial topic. More details---if available--could be very helpful here.</p>	<p>We have added slightly more detail. University administrators did not speak that much more about memorials.</p>	<p>This can be found <u>under institutional responses to suicide bereavement at universities</u>, paragraph 2.</p> <p>Changes are indicated by track changes on Page 11.</p> <p>University administrators felt that they did not want to be perceived as supporting suicide by making as if the deceased student was a hero and therefore encourage suicide among students. At the same time, they felt it was important to remember the deceased student through a memorial (3).</p>
<p>p.10 line 19--what does "poorer prognosis" and "recovery"" mean in terms of grief? Who rated them? How?</p>	<p>Thank you for this comment. This has been amended for clarity. The Scale for Prediction of Outcome After Bereavement (SPOB) (4) was used to predict the outcome of bereavement on students. The terms "recovery" and "poorer prognosis" have been changed</p>	<p>This can be found <u>results, key findings from included studies, The impact of suicide bereavement on staff and students at universities</u>, paragraph 1 on Page 9.</p> <p>Changes are indicated by track changes.</p> <p>Students bereaved by suicide experienced higher levels of general grief reactions compared to those bereaved by</p>

	to speak how the SPOB predicted return to baseline functioning.	other means such as natural causes or accidents (5, 6). In one study, the Scale for Prediction of Outcome After Bereavement (SPOB) (4) was used to predict the outcome of bereavement on students. The SPOB predicted that those students who were suicide bereaved would have difficulty returning to baseline functioning (7).
-p. 10 Tenses go back and forth here--do a quick edit for consistency	Apologies for this. Editorial care has been applied.	The corrections are indicated by track changes throughout the manuscript.
p.10, line 60--Are you saying here that all participants experienced suicide as a possibility following their loss? This doesn't feel accurate and conflicts with the final sentence of that paragraph.	Thank you for this comment. This particular study stated both. There were those participants who reported that being bereaved by suicide made suicide a more realistic possibility out of distress. There were also those who said because of their suicide bereavement experience, they were determined not to die by suicide. Please	This can be found <u>results, key findings from included articles, The impact of suicide bereavement on staff and students at universities,</u> paragraph 1 on Page 9. Changes indicated by track changes. Staff and students had increased suicidal ideation or attempted suicide following their bereavement and most of them had not sought help for any episode of self-harm or suicidal ideation (8). As a result of their bereavement

	<p>see the amendments made to this section.</p>	<p>experience, for some staff and students (25%) who had never considered suicide as an option, suicide became more normalised. This fostered awareness that suicide could provide a way out of extreme distress, either for themselves or others (9). They suddenly had a new awareness that in a state of extreme distress they, or anyone they knew, could be vulnerable to suicide (9). In contrast, half of the staff and students expressed a conviction that they would prevent dying by suicide themselves due to the impact they had both witnessed and experienced following a suicide death (9).</p>
<p>p.11 I think the challenge I am having here is that this is written as if it applies to all participants. Who says this? Who is more likely to have these experiences?</p>	<p>This has been amended to indicate that staff and students shared these experience. The percentage rates of these have been described.</p>	<p>This can be found <u>results, key findings from included studies, The impact of suicide bereavement on staff and students at universities</u>, paragraph 1 on Page 9.</p> <p>Changes are indicated by track changes.</p> <p>As a result of their bereavement experience, for some staff and students (25%) who had never considered suicide as an option, suicide became more normalised. This fostered awareness that suicide could provide a way out of extreme distress, either for themselves or others (9). They suddenly had a new awareness that in a state of extreme distress they, or anyone they knew, could be vulnerable to suicide (9). In contrast, half of the staff and students expressed a conviction that they would prevent dying by suicide themselves due to</p>

		<p>the impact they had both witnessed and experienced following a suicide death (9).</p>
<p>-p.11 line 28--please rephrase the "positive impact of suicide". I know what you mean here, but maybe rephrase to "used work as a coping skill and increased their effectiveness in that arena" instead of implying a positive impact of suicide.</p>	<p>"Positive impact of suicide" has been removed. The sentence has been amended.</p>	<p>This can be found <u>results, key findings from included studies, The impact of suicide bereavement on staff and students at universities</u>, paragraph 3 Page 10.</p> <p>Changes are indicated by track changes.</p> <p>A small group of staff and students cited an unexpected impact of suicide bereavement in their work. They stated that they used work as a distraction to cope with their emotions and work was also used as a way to make the deceased proud of them (10). Furthermore, the experience of suicide bereavement motivated some of the staff and students to change to careers related to mental health or caring for vulnerable persons (10).</p>

<p>-p.11, line 57---this sentence needs a citation. Is it also 35? It's not clear.</p>	<p>This citation has been added.</p>	<p>This can be found <u>results, key findings from included articles, The impact of suicide bereavement on staff and students at universities</u>, paragraph 3, on Page 10 last line.</p> <p>Changes indicated by track changes.</p> <p>Furthermore, the experience of suicide bereavement motivated some of the staff and students to change to careers related to mental health or caring for vulnerable persons (10).</p>
<p>-p.12 When you say that the gendered component is well supported by the suicide bereavement literature, what do you mean? Do you mean that more women than men are impacted? Or that women are more likely to be participants? If it is the second, please expand on why that is a problem.</p>	<p>Thank you for this comment. We meant that women are more likely to be participants. This introduces bias into the studies. This point has been expanded on in the manuscript.</p>	<p>This can be found under <u>discussion</u>, paragraph 5 on Pages 12-14.</p> <p>Changes indicated by track changes.</p> <p>The articles that reported the gender profile of participants had more female than male respondents, a trend that has also been observed in suicide bereavement literature more broadly (11, 12). In published suicide research there is a gender imbalance with 60 percent to 90 percent of participants identifying as women (13). This introduces bias because only women are reporting on the suicide bereavement experience. Future research should explore</p>

		the perspectives of males and gender nonconforming individuals to gain a diverse perspective on the suicide bereavement experiences.
-p.12 Be careful with language---it's not "bereaved by relatives" but "bereaved by the deaths of relatives"...it's interesting to me that you do not use the term "suicide loss survivors" in this paper. Is that intentional?	Thank you. This has been removed. The term bereaved by suicide was intentionally chosen for improved clarity. This is explained in the manuscript.	This can be found under <u>introduction</u> paragraph 3 on Page 3. Changes are indicated by track changes. Literature often refers to those bereaved by suicide as "suicide survivors" or "survivors of suicide" to describe those who have been bereaved by suicide (14, 15, 16, 17). We intentionally chose to use the descriptor "students bereaved by suicide" and its variations to improve clarity.
-p.12 This discussion about level of distress seems to go beyond the findings presented. Additionally, it is important to consider who is the non-relative---friend? Roommate? Classmate?	This discussion was amended and linked to contagion.	This can be found under <u>discussion</u> paragraph 2, Page 12. Changes are indicated with track changes. Following their bereavement experience, for some staff and students, suicide became more normalised and increased

<p>Teammate?</p>		<p>their awareness that suicide could be a way out of distress (9). This has some implications for suicide contagion among university students and staff. Mueller (18) describes the suicide contagion process where the suicide attempt of a friend can transform the distant idea of suicide into a way an individual can express themselves.</p>
<p>-p.12 Careful about the subjects of sentences....the literature doesn't argue, but researchers and experts do.</p>	<p>Thank you. This has been removed.</p>	
<p>-p. 13 the first two sentences feel unrelated---one is about suicide grief having a greater impact on students than non-suicide and the second is about grief impacting students...</p>	<p>Thank you. This section has been amended.</p>	<p>This can be found under <u>discussion</u> paragraph 1, Page 12. First sentence.</p> <p>Changes indicated by track changes.</p> <p>The staff and students bereaved by suicide in this review experienced higher levels of grief reactions when compared to bereavement by non-suicide deaths impacting on their personal and occupational functioning.</p>
<p>-p.13 Please expand on the suicide risk---this is an essential component of postvention. Is there any information in the literature on who is at</p>	<p>Risk factors for suicide have been included.</p>	<p>This can be found under <u>introduction</u>, paragraph 1.</p> <p>Changes indicated by track changes on Page 3.</p>

<p>elevated risk? Rephrase line 12----while the provision of supports is certainly recommended, I don't think there is research that supports it prevents suicide, although this is the goal.</p>	<p>Provision of supports has been amended.</p>	<p>Pillay (19) identified that suicide risk is greatest among students when they face challenges in multiple areas. Some risk factors for student suicide include being black/belonging to a minority group; non-heteronormative sexual orientation; poor socio-economic background; mental disorders; academic pressure, and financial concerns (19, 20, 21, 22).</p> <p>This can be found under <u>discussion</u> paragraph 3 on Page 11.</p> <p>Changes indicated by track changes.</p> <p>Staff and students experienced support as both helpful and unhelpful. This creates an opportunity for support measures to be enhanced and access to support improved especially through strategies that reduce the social stigma attached to accessing mental health services (19).</p>
<p>Reviewer 2:Dr Anna Mueller, Indiana University Bloomington</p>		

<p>This study lists three objectives, which are to: (1) describe the impact of suicide bereavement on staff and students at universities; (2) identify institutional responses to suicide bereavement at universities; and (3) describe postvention interventions at universities. These are important objectives that could have important contributions for suicide postvention. While this paper attempts to meet these objectives, the authors ultimately find that there is very little (if any) literature that could help them accomplish aims 2 and 3. This critical gap in the literature on a topic that they demonstrate impacts many in a negative fashion is important to note.</p>	<p>Thank you for this positive feedback. We appreciate the opportunity to address points of clarity. There are critical gaps we have identified.</p>	
<p>The methods are strong, particularly since the authors drew literature from a broad array of academic databases that ensure transdisciplinary representation (something that is not always common in this area of research).</p>	<p>Thank you for this positive feedback.</p>	
<p>It would be helpful if a little more information were provided on why articles that were returned via the search results were excluded such that 3,158 articles turned into 26. Related, the 10</p>	<p>Initially we searched all literature and no peer-review filters were applied during database searches generating a large sample size. During discussion as a</p>	<p>This can be found under <u>methods, study selection</u>, paragraph 1, on Pages 6-7.</p>

<p>disagreements on whether to include or exclude an article are worth a little more attention. What was the case for excluding or including these article (and how many were included?) It seems with such a small sample size it may be better to err on the side of inclusion.</p>	<p>team, we decided to include only peer-reviewed credible studies in the review. Due to the limited studies we identified, we made the inclusion criteria broad to err on the side of inclusion. The disagreements were based in not meeting the inclusion criteria.</p>	<p>Changes indicated by track changes.</p> <p>We elected to include only peer-reviewed articles to ensure credible studies were included.</p> <p>Ten disagreements on study selection were resolved through a consensus discussion. Reasons for disagreement included lack of clarity regarding the study population or whether a study was a peer-reviewed publication.</p>
<p>With regard to the results and discussion, given that the paper is organized around 3 aims, it would be helpful to organize the findings and the discussion around these 3 aims more explicitly. This is particularly important in the discussion where the real take-home point from this scoping review – that very little is known about postvention at HEIs despite HEIs being highly impacted by suicide – is somewhat lost. The authors, for example, start the discussion section by focusing on something that is not related to their aims (though it is an important point – that knowledge about postvention is generally produced from high</p>	<p>Thank you for these comments. The results and discussion have been organised around the three review objectives. The discussion and results are better linked to the review question and objectives.</p>	<p>This can be found under <u>results and discussion</u> on Pages 8-14.</p> <p>Changes indicated by track changes.</p>

<p>income countries in the Global North). Thus, the discussion could be rewritten to better link the results to the aims introduced in the beginning.</p>		
<p>Why are the results organized by methodology instead of by findings or by the aims? This needs to be justified (or changed to something that fits the structure of the authors argument better). Why not organize around the aims?</p>	<p>Thank you for these comments. The results have been amended and organised around the three review objectives.</p>	<p>This can be found under <u>results</u> on Pages 24-27</p> <p>Changes are indicated by track changes.</p>
<p>To meet their study objectives it would be particularly helpful if the authors could in the results have a section on institutional responses to suicide at universities and postvention intervention at universities – using whatever data they can find. There was a brief – and exciting – introduction of this on page 8 where the authors write, “There were varying views on support both received and accessed with staff citing that institutional processes were unsupportive to staff in a culture that values student well-being over staff-wellbeing. Challenges identified by university administrators in responding to student suicide was the lack of postvention training received as part of their role...” Can the authors expand on</p>	<p>Thank you for these comments. The results were organised around the three objectives and have the following headings: The impact of suicide bereavement on staff and students at universities, Institutional responses to suicide bereavement at universities, Postvention interventions at universities.</p> <p>We have expanded on the points on student well-being prioritised over staff well-being and the need to include staff in postvention efforts.</p>	<p>This can be found under <u>results</u> on Pages 8-12</p> <p>Changes are indicated by track changes.</p> <p>This can be found under <u>discussion</u>, paragraph, 4 on Page 14.</p> <p>Changes indicated by track changes.</p> <p>This bias towards studying the experiences of students is understandable, given that universities are set up for students; however, it is important to include staff as they have important support needs also. The staff in this review</p>

<p>this? This seems very important. Also on pg 10, the authors talk about how staff and students bereaved by suicide would like “practical support.” Again, this is getting at the authors aims, and could be expanded on further. What does that mean? What does it look like?</p> <p>I have some suggestions with regard to the discussion as well. Given the dearth in the literature, the most important goal the authors should have is to set out a clear future research agenda. It would be also be very helpful if the authors could highlight clearly what kind of knowledge needs to be produced in order to close critical gaps in postvention knowledge at HEIs. For example, some HEIs are quite large while others are smaller than high schools. Are we always certain that a student’s suicide death impacts the entire organization? How might postvention vary based on the size of the HEI or the integration of the student into the student body? What other factors may be unique to postvention at HEIs? Thus, the discussion needs to be written to accomplish this and maximize this</p>	<p>We have expanded on what practical support staff and students would like such as extensions on assignments and exams.</p>	<p>were responsible for supporting students, attending to practical tasks and informing students following a suicide death (3, 23). This raises questions about the responsibilities and expectations placed on staff and whether these are realistic. There is increasing awareness of employer responsibilities for the health and well-being of staff and safety of students (24).</p> <p><u>This can be found under institutional responses to suicide bereavement at universities,</u> paragraph, 2, Page 11.</p> <p>Changes indicated by track changes.</p> <p>Practical support that was seen as valuable included childcare, help with housework and general administration. Employers and teaching staff could offer practical support by granting time off, extending deadlines and rescheduling exams (25).</p> <p>This can be found under <u>conclusion,</u> Page 14.</p> <p>Changes indicated by track changes.</p>
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<p>article's contribution to the literature.</p>	<p>Some discussion around postvention at HEI's has been added</p>	<p>Nonetheless, universities have the potential to be effective sites for interventions but there is not a universal solution that will meet the needs of all institutions. HEI's are not heterogeneous in nature, and this would need to be considered when designing interventions. Some HEI's have distance students, students off campus, some are small and others large.</p>
<p>Minor thing: The exclusion criteria table is not necessary—everything listed is just direct opposites of the inclusion criteria.</p>	<p>Thank you. The exclusion table has been removed.</p>	<p>The exclusion table has been removed.</p>
<p>Reviewer 3: Dr Andrea Lamont-Mills, University of Southern Queensland</p>		
<p>The authors are to be commended for focusing on an area of suicide bereavement and postvention that is often overlooked in suicidology studies. Moreover, it is timely given duty of care discussions that are being had in the United Kingdom in relation to university management and university students' death by suicide. Thus, this review has the opportunity to make a significant contribution to this discussion.</p>	<p>Thank you for this positive feedback. We appreciate the opportunity to address points of clarity.</p>	

<p>However, there are three major and significant concerns I have with the current manuscript. The first is that there is no mention of any a-priori protocol development. Whilst the protocol does not have to be published or registered, it must be developed and then any deviations from the protocol during the conduct of the actual review noted in the write up of the review. This is absent in this manuscript. I assume there was a protocol, and if so this could be included as supplementary information. Given scoping reviews are iterative in nature, not presenting the protocol does not allow the reviewer to see this iteration in action. At the moment there is an absence of detailed information about the conduct of the review that I suspect is based on word count restrictions but could be overcome by inclusion as noted above. Without this information present or being able to be referred to, there are concerns about the systematic conduct of the review that I will outline later that raises questions about the reliability and validity of the review.</p>	<p>Thank you for the comments. We appreciate the opportunity to clarify. A protocol was developed but was not registered or published. This protocol was for reference purposes only and was not suitable to be published. This has been included as a supplementary file.</p>	
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<p>The second concern is the use of one reviewer for the identification of suitable studies stage of the scoping review. The JBI guidelines are somewhat unclear about the number of reviewers required for this stage. However, Levac and colleagues (2010) are not. They contend that this stage is to be conducted by a team of reviewers not one as has occurred in the scoping study under review. Further, it is becoming common practice for scoping reviews that follow JBI guidelines to include a team of reviewers in the identification of suitable studies stage. This is because there is the real possibility of researcher bias being introduced at this stage without an independent reference point. Scoping reviews that follow the Arksey & O'Malley (2005) approach as also moving toward the inclusion of a team of reviewers at all points of the review. This aside, the use of only one reviewer at this point has not been considered by the authors as a limitation, or any argument put of why only one reviewer was used. Given the more difficult work in a scoping review begins in stage two study selection, it seems odd to not have at least two reviewers undertaking the identification of suitable studies</p>	<p>Thank you for these comments. There were two reviewers who identified studies to be included in the review (SA and EB).</p>	<p>This can be found under <u>study selection</u>, paragraph 1, Page 6.</p> <p>Two reviewers (SA and EB) screened and selected titles and abstracts independently according to the inclusion criteria.</p>
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<p>stage. It is very easy to make errors in searching databases and without an independent check point, any error is unlikely to be picked up but will have significant flow on implications.</p>		
<p>The third concern is with the search strings. The authors contend that they are looking at all higher education institutions (see lines 25-26), however the search strings do not necessarily reflect that position. They only mention university or college. What about polytechnic? Institute? This is potentially a significant issue as some higher education providers in other countries do not have the word college or university or campus or higher education in their descriptors. Thus, there is the potential that some relevant studies have not been identified in this scoping review. This is particularly so for there is an assumption by the authors that higher education institutes are where students come on campus to study and live. This is not the case in other countries including high income countries.</p>	<p>Thank you for raising this query about the search string. We consulted two expert librarians (one from Arts and Social Sciences and the other from Health Sciences) to develop a search string. We also consulted as a team. During these consultations, the term “polytechnic” was not considered. The term “institute” and “institutions of higher learning” did not yield additional results. We note this as a limitation.</p>	<p>We note this as a limitation in last paragraph of the <u>discussion on Page 14</u>. Changes are indicated by track changes. Some higher education providers in other countries do not have the word “college” or “university” or “campus” or “higher education” in their descriptors. Therefore, there is the potential that some relevant studies have not been identified in this scoping review.</p>

<p>Introduction</p> <p>It is recommended that the first paragraph be edited so it sets the scene for why look at universities as a site for suicide bereavement and postvention. The global 700 000 could be replaced with a stronger focus on death by suicide in the 15-29 age range and suicidal behaviour of university students (see Pillay 2021 for a systematic review of this). Without this there is a conceptual leap to line 15 that is difficult to bridge as currently presented.</p>	<p>The introduction has been amended and global suicide rate has been removed. Pillay (19) has been cited.</p>	<p>Please see <u>introduction</u>, paragraph 1, Pages 2-3. Changes are indicated by track changes. global suicide rate has been removed.</p> <p>Despite the decrease in suicide rates globally (26), there has been an increase in suicide among university students in recent years (19, 27). There is a growing concern over the mental health of university students, with various studies identifying that mental disorders and suicide are higher in university studies than in the general population (20, 28, 29, 30, 31, 32). Suicide has been identified as the fourth leading cause of death among 15 to 29-year-olds globally (26). Pillay (19) identified that suicide risk is greatest among students when they face challenges in multiple areas.</p>
<p>As noted above, the unique context of a university seems to be centred around a particular cultural understanding of attending a university. In some countries such as Australia, living on campus is the exception not the norm, similarly with engaging in extra-curricular activities. In addition, there is research that suggests that students no longer spend the majority of their time on campus (see line 38), they are juggling part-time work,</p>	<p>Thank you for this comment. There are amendments to this section to reflect this nuance.</p>	<p>Please see <u>introduction</u>, paragraph 2 on Page 3. Changes are indicated with track changes.</p> <p>The transition to university life coincides with the transition into adulthood, which comes with different challenges and stressors for students, such as leaving home for the first time, financial concerns, including balancing employment with academic demands (27, 33, 34). Although changes to the</p>

<p>family, and social obligations. Thus, the authors may like to consider re-framing this as it speaks to a specific university experience.</p>		<p>higher education sector mean that not all students attend residential universities and live on campus (14, 15), some students spend most of their time on campus, especially if they are in residential accommodation (35, 36).</p>
<p>Line 50 – sentence that ends with withdrawal. A citation is needed for this claim.</p>	<p>This sentence has been removed.</p>	<p>This sentence has been removed.</p>
<p>Overall, a justification for the need for a scoping review is required and why this particular form of systematic reviews is needed. Just because one hasn't been done doesn't mean it should be. The authors are encouraged to think about why is the lack of a synthesis of evidence problematic? What doesn't it allow? Why is not knowing about what has been done an issue? Here a focus on the synthesising of evidence is what is needed rather than the substantive area of suicide bereavement and postvention in a university context. This would be helped by an argument as to why research on high school and primary school research is not able to be generalised to the university context. There would be a similar argument about the amount of time primary and secondary students spend with classmates so I</p>	<p>Thank you for this comment. Further information has been included to demonstrate why this review should be considered.</p>	<p>Please see <u>introduction</u>, paragraph 5 on Page 4. Changes are indicated by track changes.</p> <p>Five systematic reviews have been conducted on postvention interventions to date (37, 38, 39, 40, 41). These systematic reviews identify some elements of postvention that have been found useful such as proactive support immediately following a suicide, counselling, cognitive behavioural approaches, gate-keeper training and bereavement groups (37, 40, 41, 42, 43). Szumilas (37) has asserted that schools should be a site for targeted postvention interventions, an argument which can be extended to university campuses. Although schools and universities share similar characteristics, in that they are both educational institutions, they also have unique needs. Due to the developmental stage (33, 34) and the prevalence of mental disorders and suicide among university students (29,</p>

<p>am not seeing at the moment the need for this review.</p>		<p>32, 44), it is important to identify postvention interventions specific to university students and with it, the impact of suicide bereavement on university students.</p>
<p>The objectives seem to be missing identifying what research has been conducted and then describing etc.</p>	<p>We this as being covered by the review question:</p> <p>“What is known about suicide bereavement and postvention interventions for staff and students at universities?”.</p> <p>From the review question, we are able to identify and describe what research has been conducted.</p>	
<p>Methods It is somewhat unusual for the research questions to be presented at the end of the method section. I would recommend the research questions on lines 17-21 of the data synthesis section be placed either at the end of the introduction or in the methods section before inclusion and exclusion criteria. At the moment it is difficult to see the link between the scoping review</p>	<p>Thank you for your comment. The review question and objectives were originally placed at the end of the introduction section.</p>	<p>We have kept the review questions at the end of the introduction section.</p>

objectives and research questions.		
<p>Can the authors please address how the research questions were developed. This of course may be answered if the protocol is included with the manuscript. However, some mention and then discussion of the application of PCC to the current review is required.</p>	<p>During our initial discussion as a research team (SA, JB, KA) the research question was purely descriptive and exploratory. Over time we added the research objectives which we saw as having the potential to contribute to the decision-making process following a suicide at a HEI.</p> <p>The scoping review parameters were determined using the “PCC” framework as outlined by the JBI guideline on scoping reviews (45).</p> <p>Participants</p> <p>The scoping review focussed on staff (both academic and non-academic) who were employed at universities or institutions of higher learning in any capacity. Students (undergraduate and postgraduate) at universities or</p>	<p>Please see <u>methods</u>, paragraph 1, last line, Page 5.</p> <p>Changes are indicated by track changes.</p> <p>The research question and objectives were developed through an iterative process involving discussion and collaboration of the three authors (SA, JB, KA).</p>

	<p>institutions of higher learning were also be included.</p> <p>Concept</p> <p>The concept of interest for this scoping review was suicide bereavement and postvention interventions and activities that are related to support for staff and students following suicide on campus.</p> <p>Context</p> <p>Studies where research was done on university campuses, or the focus of the research includes staff and students on university campuses or institutions of higher learning globally were included in this scoping review.</p>	
<p>Inclusion/exclusion criteria Line 53 – the inclusion of HEI is not needed given the previous definition presentation on lines 25-</p>	<p>We have retained the HEI to avoid any confusion.</p>	

26.		
Line 53 – in terms of inclusion does consists of mean for a study to be included the population must only be university staff/students? That is, if a study also included other populations such as secondary school students would that study have been excluded? Or is it include and that there needed to be a result related to university staff/students?	Thank you for this query. The population was university staff and students. If a study included other populations such as secondary students and we could not differentiate the results, it was excluded. If the differentiation of the results was clear that they belonged to university students, it would have been included. We did not identify studies that fell into the second category.	
Line 58 – so does this mean there was no research design restriction?	There was no research design restriction. Opinion papers and reviews were excluded.	
Line 60 – some explanation of why language was restricted to English and why papers needed to be peer-reviewed is needed. Given scoping reviews typically focus on searching grey literature as well, although that is somewhat changing, the explanation of peer-review allows for a clear statement as to why grey literature was not	This has been added (see next block).	This has been noted as a limitation. Please see end of the <u>discussion</u> , last paragraph on Page 14. Changes indicated by track changes. The strength of this review was using a robust methodology to identify some critical gaps in the postvention literature. The findings of this review should be considered within the

<p>included. This then needs to be noted as a limitation.</p>		<p>following limitations. The studies included in this review were limited to peer-reviewed in English, so potentially relevant articles may have been missed if they were available in another language. The inclusion of peer-review articles was to introduce a level of rigour in this scoping review. Grey literature was excluded and potentially relevant articles that could change the review's outcome could have been missed.</p>
<p>I am unclear in this section if the intent of the scoping review has been fully captured. That is, from the objectives and research questions I understand this review to be about suicide bereavement and postvention in relation to a death by suicide of a university student. If this is not the case, then this needs to be made much clearer. If this is the case, then the inclusion and exclusion criteria do not appear to capture the bereavement and postvention in response to death by suicide of a university student.</p>	<p>Due to the limited literature available, the inclusion criteria captures both in the broad sense. Studies included had students and staff on campus who were bereaved by suicide but not necessarily by a staff or student on campus. They may have been bereaved by a loved one such as a spouse or bereaved by the death of staff and students on campus.</p>	
<p>Patient and public involvement This section is really asking about the inclusion of individuals with lived experience of the phenomena under investigation. Given the clear position of key international suicide prevention</p>	<p>We were interested in exploring the review question based on our experiences of working with university students.</p>	<p>This has been amended can be found under the heading <u>patient and public involvement</u> on Page 5. Changes are indicated by track changes.</p>

<p>associations for the inclusion of those with lived experience of suicide, including suicide bereavement to be included in research studies, the authors are asked to consider re-framing this from this position. Did any of the authors have lived experience as a staff member/student? If not, an argument can be made for non-inclusion.</p>		<p>Patients or the public were not involved in the design or conduct of this scoping review. The experiences of the authors working with university students informed the need to explore the review question.</p>
<p>Search strategy Did the authors search the databases in the order presented on lines 47-52? Please make the search order clear.</p>	<p>The databases have been amended to indicate the order they were searched in.</p>	<p>Please see end of the <u>search strategy</u>, paragraph 1 on Page 6.</p> <p>Changes indicated with track changes.</p> <p>PubMed, PsycINFO, MEDLINE, CINAHL, Africa-Wide Information, PsycARTICLES, Health Source: Nursing/Academic Edition, Academic Search Premier, SocINDEX (EBSCOHOST); Cochrane Library, Web of Science, SCOPUS.</p>
<p>It is not clear what the search parameters were when identifying suitable studies beyond English language. There is no mention of date range or at least one not being imposed.</p>	<p>In PubMed the following words were filtered using title/abstract: suicide[tiab], (postvention[tiab] , “psychosocial intervention”[tiab], "post suicide"[tiab]. For the rest of the databases the only filter that was applied was “English” in the language field.</p>	<p>Please see end of the <u>search strategy</u>, paragraph 1 on Page 6.</p> <p>Changes indicated with track changes.</p> <p>In PubMed the following words were filtered using title/abstract: suicide[tiab], (postvention[tiab] , “psychosocial intervention”[tiab], "post suicide"[tiab]. The searches were</p>

		not limited by date of publication or location, but were limited to publications in English.
An explanation of why these particular databases were chosen is needed.	These databases were selected because they provide a wide range of interdisciplinary literature.	Please see end of the <u>search strategy</u> , paragraph 1 on Pages 6. Changes indicated by track changes. These databases were selected because they provide a wide range of interdisciplinary literature.
Study selection I am just checking – it reads as if there was a double duplicate removal process. First in Endnote and then in Rayyan QCRI? Is that correct.	Yes this is correct. We have amended this for further clarity.	Please see end of the <u>study selection</u> , paragraph 1 on Page 7. Changes indicated by track changes. Researcher SA uploaded all identified citations from the database searches into EndNote (46) and removed duplicates. Thereafter, SA imported all citations into Rayyan QCRI (47) and removed further duplicates identified by Rayyan QCRI (47).
Data extraction It is noted that the authors developed their own extraction tool. This was also piloted. Were there any changes to the tool? If so what were they?	Yes there were changes to the tool. After piloting the tool, the researchers knew to include the three aspects which formed the basis of the three objectives	

<p>This is the iterative aspect of the review being demonstrated.</p>	<p>(impact of suicide bereavement, postvention interventions at the university and institutional response).</p>	
<p>The tool notes country of origin – was that for the study authors or for the participants of the study or both? This just needs to be made clearer or include both.</p>	<p>This has been amended to provide clarity.</p>	<p>Please see data extraction, paragraph 1 on Page 7.</p> <p>Changes indicated in red and track changes.</p> <p>country of origin, country income group according to the World Bank classification (48)</p>
<p>Were any study authors contacted for missing or additional information? If so, how many and if not why not?</p>	<p>No study authors were contacted for additional information as we found the information we had was sufficient.</p>	
<p>Given only one researcher extracted the data, did the authors engage in any validity check of data extraction? If not, why not as this is one place where there is a heightened risk of researcher bias being inadvertently introduced through extraction errors.</p>	<p>An audit was done by EB on all the articles to ensure accuracy of extracted data in comparison to the original articles. No errors were identified.</p>	<p>Please see data extraction, paragraph 1 on Page 7.</p> <p>Changes indicated by track changes.</p> <p>An audit was done by EB on all the articles to ensure the accuracy of extracted data.</p>
<p>Data synthesis It is not clear who engaged in the data synthesis.</p>	<p>Data synthesis was led by SA with JB and KA providing input.</p>	

<p>Can the authors please make that clear?</p>		
<p>Can the authors please provide information about why they engaged in a descriptive and narrative synthesis? That is, why was this the most appropriate synthesis approach to address the proposed research questions?</p>	<p>Data were summarised into a descriptive and narrative synthesis due to the variation in study designs to answer the following questions from university settings: what postvention interventions were available, what was the impact of suicide bereavement and how universities responded suicide deaths and subsequent bereavement.</p>	
<p>Did the authors engage in any quality assessment of each study? If not, why not?</p>	<p>A quality assessment was undertaken for each article.</p>	<p>Please see data extraction, quality assessment paragraph 1 on Page 7.</p> <p>Changes indicated by track changes.</p> <p>SA conducted a quality assessment by using an adaptation of the JBI critical appraisal checklists (49). This quality assessment was audited by ZS. Each item on the checklist was given 1 if scored 'yes' or 0 if scored 'no'(49). A total score was calculated for each study which resulted in an overall rating against set criteria of poor quality (less than 50%), moderate quality (50%-80%) and high quality (80%-100%). Most studies received a rating of moderate quality (n=15)</p>

		and two were low quality. No studies were excluded due to study quality.
<p>Results</p> <p>Study characteristics</p> <p>The authors note that 5 of the 10 quantitative studies used surveys, what did the remaining 5 use?</p>	<p>They also used surveys. This has been amended.</p>	<p>Please see <u>results, study characteristics</u>, paragraph 1 on Page 8.</p> <p>Changes indicated by track changes.</p> <p>The study designs included ten quantitative studies (5, 6, 7, 8, 50, 51, 52, 53, 54, 55) involving the use of surveys.</p>
<p>Line 35 – I wonder if this sentence could be re-framed. There is not much difference between 7 and 8 thus the most jars a little.</p>	<p>This has been removed.</p>	
<p>In relation to the qualitative and mixed methods studies, the type of qualitative approach needs to be included in this section as it is a study characteristic.</p>	<p>This has been added to this section</p>	<p>Please see <u>results, study characteristics</u>, paragraph 1 on Pages 8-9.</p> <p>Changes indicated in red and track changes.</p> <p>two qualitative studies using grounded theory and phenomenology (3, 23) which collected data using semi-structured interviews.</p>

<p>Inclusion of information about the outcomes measures used is also needed in this section along with how impact and suicidal behaviours were measured.</p>	<p>Supplementary Table 1 outlines the outcome measures in detail and what was measured.</p>	
<p>Given my point about inclusion, from the results it appears that this review was not focused exclusively on suicide bereavement and postvention in response to a university student's death by suicide. Line 12 introduces the notion of relatives and non-relatives. From this reporting it is unclear what this relates to. If it does relate to relative death by suicide then I am perplexed at the inclusion as what was set up in the introduction is suicide on campus or responses in relation to a death by suicide of a university student.</p>	<p>Due to the limited literature available, the inclusion criteria captures both in the broad sense. Studies included had students and staff on campus who were bereaved by suicide but not necessarily by a staff or student on campus. They may have been bereaved by a loved one such as a spouse or bereaved by the death of staff and students on campus.</p>	
<p>Line 60 – editorial error timeous?</p>	<p>Apologies. This has been amended.</p>	<p>Please see <u>results, institutional responses to suicide bereavement at universities</u>, paragraph 1 on Page 11.</p> <p>Changes indicated by track changes.</p>

		<p>These included a lack of postvention training received as part of their role and challenges around notification procedures communicating to the university community about the student death by suicide in a timely manner before social media platforms shared the news, often before the family had been officially informed.</p>
<p>Findings from quantitative studies It is difficult to know who the participants are when the phrase some participants (see line 19) is used. Given the previous use of noting the specifics of the participants (i.e., students), this should continue here as well. This point is relevant for the whole results section.</p>	<p>This has been changed to staff and students throughout the manuscript.</p>	
<p>Discussion The main issue I see with this section is that more detailed unpacking of the meaning of the results is needed across this section. At the moment it sits at the superficial level and is somewhat repetitive and does not delve deep into the implications of this review for the substantive area. That is, it misses the opportunity to make sense of the</p>	<p>The discussion has been amended to provide a deeper meaning of the results.</p>	<p>Please see discussion on Pages 12-14. Changes indicated by track changes.</p>

<p>review findings at a substantive area level. For example, what is the issue with mainly descriptive, quantitative, or mixed methods studies? What is the issue with the gendered component of the studies? Thus, what is missing is the underlying why of many claims and leads the reviewer to think well so what?</p>		
<p>Line 15 focused not focuses</p>	<p>Apologies. Editorial care has been applied.</p>	
<p>Can the authors please explain on what basis they are making the claim that a student's/staff member's experience of the sector may vary vastly based on country income.</p>	<p>This has been removed.</p>	
<p>Line 45 – can the authors explain why findings from postvention intervention studies conducted using schools and adolescents cannot be generalised to the university context.</p>	<p>The reference to this has been removed. In the introduction we speak about certain aspects from secondary schools which are transferable.</p>	<p>Please see <u>introduction</u> , paragraph 5 on Page 4.</p> <p>Changes indicated by track changes.</p> <p>Although schools and universities share similar characteristics, in that they are both educational institutions, they also have unique needs. Due to the developmental stage (33, 34) and the prevalence of mental disorders and suicide among university students (29, 32, 44), it is important</p>

		<p>to identify postvention interventions specific to university students and with it, the impact of suicide bereavement on university students.</p>
<p>I feel that the authors can make a stronger argument about why not focusing on staff experiences is potentially problematic. Why is it important to include staff? I would encourage the authors to think about well-being and employer responsibilities.</p>	<p>In any postvention efforts there needs to be an inclusion of staff.</p>	<p>Please see <u>discussion</u> , paragraph 1 on Pages 12-14.</p> <p>Changes indicated by track changes</p> <p>Despite this, the findings demonstrate how staff have been largely marginalised from this research with a focus on university students. Only two studies (3, 23) focused exclusively on staff experiences. This bias towards studying the experiences of students is understandable, given that universities are set up for students; however, it is important to include staff as they have important support needs also. The staff in this review were responsible for supporting students, attending to practical tasks and informing students following a suicide death (3, 23). This raises questions about the responsibilities and expectations placed on staff and whether these are realistic. There is increasing awareness of employer responsibilities for the health and well-being of staff and safety of students (24).</p>

<p>I feel that there is an overreach on some of the claims in this section. Given the small number of studies reviewed, statements such as “not all impacts of suicide bereavement were negative” may be overstating the evidence. Perhaps it appears that not all ...</p>	<p>This has been removed.</p>	
<p>See line 38 page 12 for similar overreach.</p>	<p>This has been removed.</p>	
<p>The last paragraph on page 12 is somewhat repetitive of the results section and would benefit from going beyond the superficial as noted previously.</p>	<p>This has been removed.</p>	
<p>Limitations – why is not including a quality assessment a limitation?</p>	<p>A quality assessment was included.</p>	
<p>Limitations – how is data being limited to peer-review a limitation?</p>	<p>This has been added as a limitation.</p>	<p>Please see <u>discussion</u>, last paragraph on Page 12-14. Changes indicated by track changes.</p>

		The inclusion of peer-review articles was to introduce a level of rigour in this scoping review.
Limitation – how is limiting to English a limitation? As a note could this account for the number of high-income country studies included in this review? Maybe there are studies from low-middle income countries but they were not available in English?	This has been added as a limitation.	Please see <u>discussion</u> , last paragraph on Page 14. Changes indicated by track changes. This means that potentially relevant articles may have been missed if they were available in another language.
Limitations – is not including grey literature a limitation?	This has been added as a limitation.	Please see <u>discussion</u> , last paragraph on Page 14. Changes indicated by track changes. Grey literature was excluded and potentially relevant articles that could change the review's outcome could have been missed.
Limitation – is not including two reviews in searching and then data extraction a limitation?	Two reviewers were involved in the study selection and data extraction phases.	

<p>Limitation – can the authors please explain how not capturing studies from low or middle income countries is a limitation?</p>	<p>Potentially relevant studies may have been missed which could alter the outcome of the review.</p>	
<p>Conclusion Line 26 – “needs to be strengthened...” is a strong position based on 17 studies. Perhaps some tempering of language is needed</p>	<p>This has been removed.</p>	
<p>Editorial care was applied throughout the manuscript, and all grammatical and layout errors were attended to. The figures have also been updated. Please see corrections in track changes throughout the manuscript.</p>		

Thank you once again for the valuable feedback and the opportunity to resubmit this manuscript.

VERSION 2 – REVIEW

REVIEWER	Lamont-Mills, Andrea University of Southern Queensland, School of Psychology and Counselling
REVIEW RETURNED	22-Apr-2023

GENERAL COMMENTS	<p>Thank you for engaging with my comments in the spirit that the comments were intended. I have some very minor issues that need correcting.</p> <p>Thank you for addressing the concern about the protocol. It may be a reviewing issue but the protocol did not come through with the revised documentation for me. Secondly, I would recommend that you reference the supplementary file at the end of the sentence where you mention that the protocol was not published.</p> <p>My apologies I have not been clear in my concern, relating to suitable studies stage. I am referring to who conducted the initial searches. I will try and be clearer this time. As I understand from what has been written in the study selection section in the first sentence, only one reviewer (SA) did the database searching. I understand two reviewers did the screening. My concern is in relation to the initial database searching. If this is the case and as per my first review, the JBI guidelines are somewhat unclear about the number of reviewers required for this stage. However, Levac and colleagues (2010) are not. They contend that this stage is to be conducted by a team of reviewers not one as has occurred in the scoping study under review. Further, it is becoming common practice for scoping reviews that follow JBI guidelines to include a team of reviewers in the database searching stage. This is because there is the real possibility of researcher bias being introduced at this stage without an independent reference point. Scoping reviews that follow the Arskey & O'Malley (2005) approach are also moving toward the inclusion of a team of reviewers at all points of the review. This aside, the use of only one reviewer at this point has not been considered by the authors as a limitation, or any argument put of why only one reviewer was used. Given the more difficult work in a scoping review begins in stage two study selection, it seems odd to not have at least two reviewers undertaking database searching. It is very easy to make errors in searching databases and without an independent check point, any error is unlikely to be picked up but will have significant flow on implications.</p> <p>Introduction</p> <p>Thank you for addressing the point about the particular cultural understanding point. Again, to capture a more nuanced approach I would suggest including normally before coincides with the transition into adulthood. In some countries mature aged students dominate university enrolments at all levels (e.g., 25 years of age and older) which brings with it its own challenges including balancing financial concerns with family and employment commitments.</p> <p>Methods</p>
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	<p>Thank you for the comments around the PCC – I would strongly encourage you to include this after the newly included information. It really frames well what you were looking for. It seems a pity to waste it in the protocol. I would include the scoping review parameters ...</p> <p>Inclusion/exclusion criteria Thank you for addressing the concern around if a study also included other populations such as secondary school students would that study have been excluded. I suggest that you include what you have written in response to me in the inclusion/exclusion table, excluding the last sentence. This strengthens your inclusion.</p> <p>Thank you for clarifying if there was any research design restrictions. I would suggest that you include your response in the actual article or state that there was no study design limitation imposed. With the removal of the exclusion information the issue of study design is lost and it must be clear what you included and therefore did not include.</p> <p>I am unclear in this section if the intent of the scoping review has been fully captured. That is, from the objectives and research questions I understand this review to be about suicide bereavement and postvention in relation to a death by suicide of a university student. If this is not the case, then this needs to be made much clearer. If this is the case, then the inclusion and exclusion criteria do not appear to capture the bereavement and postvention in response to death by suicide of a university student.</p> <p>Data extraction Thank you for addressing the concern around your own extraction tool. I would suggest that you make this clear in the actual paper itself including your response to my concerns as this clearly demonstrates your engagement with the iterative nature of the scoping review.</p> <p>Data synthesis Again my apologies I do not think I was clear with my concern. Can you please make clear what providing input means in regard to JB and KA</p> <p>Thank you addressing the concern around type of synthesis. Your response to my concern needs to be included in the actual article itself.</p> <p>Thank you for addressing my concerns around quality assessment – high quality would be 81%-100%. Can you please amend this as at the moment bot medium and high quality include 80%.</p> <p>Discussion Limitation – is not including two reviews in searching and then data extraction a limitation? This was my fault in not making it clear what I was meaning. This is in relation to the searching of the databases. From what you have written it appears only one researcher did this? If so this is a limitation</p>
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	Thank you for explaining how not capturing studies from low or middle income countries is a limitation. Is this included in the article, if not it needs to be.
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VERSION 2 – AUTHOR RESPONSE

Manuscript reference number: 2022-068730.R1		
Reviewer 3 Comments	Response to comments	Amendments made (paragraph/ page number)
Thank you for engaging with my comments in the spirit that the comments were intended. I have some very minor issues that need correcting.	Thank you for the positive feedback. We appreciate the opportunity to address points of clarity.	
Thank you for addressing the concern about the protocol. It may be a reviewing issue but the protocol did not come through with the revised documentation for me. Secondly, I would recommend that you reference the supplementary file at the end of the sentence where you mention that the protocol was not published.	Thank you for the comments. The protocol was attached to the revised documents. The editor will be able to assist in this regard. We have added “see supplementary file” at the end of the sentence as per your recommendation.	Please see Page 5 under <u>METHODS</u> . Changes are indicated by track changes: (see supplementary file).
My apologies I have not been clear in my concern, relating to suitable studies stage. I am referring to who conducted the initial searches. I will try and be clearer this time. As I understand from what has been written in the study selection section in the first sentence, only one reviewer (SA) did the database searching. I understand two reviewers did the screening. My concern is in relation to the initial database searching. If this is the case and	Thank you for clarifying your initial concerns relating to the selection of suitable studies. We acknowledge that many researchers are moving towards having scoping review teams at every stage of the scoping review process. This scoping review was conducted as	Please see Page 5 under <u>Search Strategy</u> . Changes are indicated by track changes: The two librarians and KA also conducted the searches independently to ensure that the search string was accurate and no errors were identified.

<p>as per my first review, the JBI guidelines are somewhat unclear about the number of reviewers required for this stage. However, Levac and colleagues (2010) are not. They contend that this stage is to be conducted by a team of reviewers not one as has occurred in the scoping study under review. Further, it is becoming common practice for scoping reviews that follow JBI guidelines to include a team of reviewers in the database searching stage. This is because there is the real possibility of researcher bias being introduced at this stage without an independent reference point. Scoping reviews that follow the Arskey & O'Malley (2005) approach are also moving toward the inclusion of a team of reviewers at all points of the review. This aside, the use of only one reviewer at this point has not been considered by the authors as a limitation, or any argument put of why only one reviewer was used. Given the more difficult work in a scoping review begins in stage two study selection, it seems odd to not have at least two reviewers undertaking database searching. It is very easy to make errors in searching databases and without an independent check point, any error is unlikely to be picked up but will have significant flow on implications.</p>	<p>part of a PhD study and a much smaller team compared to large scale studies. The two subject expert librarians formed part of the search team in locating relevant studies. They worked with SA to refine the search strategy and run the database searches and any potential errors could be identified. KA also served as an independent check point by running the searches and ensuring that the search strategy was accurate, and no errors were identified. This is not to say that no errors could have crept in to have flow on implications. A sentence has been added to indicate the librarians and KA's involvement in the search stage.</p>	
<p>Introduction Thank you for addressing the point about the particular cultural understanding point. Again, to capture a more nuanced</p>	<p>Thank you for these valuable comments. To capture this nuance, the word "normally" has been added as</p>	<p>Please see Page 3 under <u>INTRODUCTION</u>, paragraph 2. Changes are indicated by track changes:</p>

<p>approach I would suggest including normally before coincides with the transition into adulthood. In some countries mature aged students dominate university enrolments at all levels (e.g., 25 years of age and older) which brings with it its own challenges including balancing financial concerns with family and employment commitments.</p>	<p>per your recommendation. We hope this captures a little of the varied cultural understandings of what it means to be a university student.</p>	<p>The transition to university life normally coincides with the transition into adulthood</p>
<p>Methods Thank you for the comments around the PCC – I would strongly encourage you to include this after the newly included information. It really frames well what you were looking for. It seems a pity to waste it in the protocol. I would include the scoping review parameters ...</p>	<p>Thank you for this recommendation. The PCC has been included in the article.</p>	<p>Please see Pages 5-6 under <u>METHODS</u>, paragraph 2. Changes are indicated by track changes:</p> <p>The scoping review parameters were determined using the “PCC” framework as outlined by the JBI guideline on scoping reviews (1):</p>

		<p>Participants</p> <p>The scoping review focussed on staff (both academic and non-academic) who were employed at universities or institutions of higher learning in any capacity. Students (undergraduate and postgraduate) at universities or institutions of higher learning were also be included.</p> <p>Concept</p> <p>The concept of interest for this scoping review was suicide bereavement and postvention interventions and activities that are related to support for staff and students following suicide on campus.</p>
<p>Inclusion/exclusion criteria</p> <p>Thank you for addressing the concern around if a study also included other populations such as secondary school students would that study have been excluded. I suggest that you include what you have written in response to me in the inclusion/exclusion table, excluding the last sentence. This</p>	<p>Thank you for this comment. We have included your recommendation in the inclusion criteria table.</p>	<p>Please see Page 7 <u>under Table 2. Inclusion criteria point i).</u> Changes are indicated by track changes:</p> <p>If a study included other populations such as secondary students, and we could not differentiate the results, it was excluded. If the differentiation of the results was clear that they</p>

<p>strengthens your inclusion.</p>		<p>belonged to university students, it would have been included</p>
<p>Thank you for clarifying if there was any research design restrictions. I would suggest that you include your response in the actual article or state that there was no study design limitation imposed. With the removal of the exclusion information the issue of study design is lost and it must be clear what you included and therefore did not include.</p>	<p>Thank you for this comment. We have included your recommendation in the inclusion criteria table.</p>	<p>Please see Page 7 <u>under Table 2. Inclusion criteria point iii</u>). Changes are indicated by track changes:</p> <p>The study used qualitative, quantitative or mixed methods as primary research (no study design limitation imposed)</p>
<p>I am unclear in this section if the intent of the scoping review has been fully captured. That is, from the objectives and research questions I understand this review to be about suicide bereavement and postvention in relation to a death by suicide of a university student. If this is not the case, then this needs to be made much clearer. If this is the case, then the inclusion and exclusion criteria do not appear to capture the bereavement and postvention in response to death by suicide of a university student.</p>	<p>Due to the limited literature available, the inclusion criteria captures both in the broad sense. Studies included had students and staff on campus who were bereaved by suicide but not necessarily by a staff or student on campus. They may have been bereaved by a loved one such as a spouse or bereaved by the death of staff and students on campus.</p>	

<p>Data extraction</p> <p>Thank you for addressing the concern around your own extraction took. I would suggest that you make this clear in the actual paper itself including your response to my concerns as this clearly demonstrates your engagement with the iterative nature of the scoping review.</p>	<p>Thank you for this comment. We have included the response to your initial concerns in the article.</p>	<p>Please see Page 8 under <u>Data extraction</u>. Changes are indicated by track changes:</p> <p>After piloting the tool, the researchers knew to include the three aspects which formed the basis of the three objectives (impact of suicide bereavement, postvention interventions at the university and institutional response).</p>
<p>Data synthesis</p> <p>Again my apologies I do not think I was clear with my concern. Can you please make clear what providing input means in regard to JB and KA</p>	<p>Thank you for the opportunity to provide further clarity. SA was responsible for leading the data synthesis process. Before, during and after the data extraction process, SA, JB and KA met regularly to discuss the extracted data. KA and JB were able to provide alternative perspectives with regards to the data extracted and the direction the synthesis should go. This was a continual iterative process to ensure that ultimately both the review question and objectives were answered.</p>	

<p>Thank you addressing the concern around type of synthesis. Your response to my concern needs to be included in the actual article itself.</p>	<p>The response to your query was previously integrated into the article. This can be found on Pages 8-9 under <u>Data synthesis</u>.</p>	
<p>Thank you for addressing my concerns around quality assessment – high quality would be 81%-100%. Can you please amend this as at the moment bot medium and high quality include 80%.</p>	<p>Thank you for bring attention to this error. This has been amended.</p>	<p>Please see Page 8 under <u>Quality assessment</u>. Changes are indicated by track changes: (81%-100%).</p>
<p>Discussion Limitation – is not including two reviews in searching and then data extraction a limitation? This was my fault in not making it clear what I was meaning. This is in relation to the searching of the databases. From what you have written it appears only one researcher did this? If so this is a limitation</p>	<p>This has been amended to reflect KA and the two librarians been part of the search process as independent check points. Please see Page 5 under <u>Search Strategy</u>. Changes are indicated by track changes: The two librarians and KA also conducted the searches independently</p>	

	to ensure that the search string was accurate and no errors were identified.	
Thank you for explaining how not capturing studies from low or middle income countries is a limitation. Is this included in the article, if not it needs to be	This has been noted as a limitation.	Please see Page 14 last paragraph under <u>Discussion</u> . Changes are indicated by track changes: The review also captured articles from high-income countries with an inadvertent exclusion of low-middle-income countries.

VERSION 3 – REVIEW

REVIEWER	Lamont-Mills, Andrea University of Southern Queensland, School of Psychology and Counselling
REVIEW RETURNED	12-May-2023
GENERAL COMMENTS	Thank you for addressing my concerns, I look forward to seeing this published online.