

Supplementary Table 1. Articles included in the review

Authors (year)	Design and methods	Participants	Instrument/Measures	Key Findings
Location	QUALITATIVE STUDIES			
Causer et al (2021) (43) UK	Qualitative Grounded theory	<i>N</i> = 19 Staff at HEI's: <i>n</i> = 8 Male (42%) <i>n</i> = 11 Female (58%)	Survey and Interviews developed and conducted by the authors.	Staff described how in "bearing witness" to student suicide that all subsequent experiences were shaped. This included practical tasks immediately following the death by suicide, physical, emotional and psychological changes and experiences of support.
Rompalo et al (2021) (44) USA	Qualitative Phenomenology	<i>N</i> = 8 student affairs administrators Gender not stated	Online interviews	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 one was “glorifying” the deceased student.

MIXED METHOD STUDIES

Allen et al (1993) (45) USA	Mixed methods	$n = 30$ male (50%) $n = 30$ female (50%) undergraduate university students. Mean age 21 years. 75% Caucasian, 15% African-American, 9% other ethnicity	State-Trait Anxiety Inventory and interview (46)	Those bereaved by suicide are perceived to be different from individuals bereaved by other causes of death. Individuals bereaved by suicide are also viewed as more psychologically disturbed and more able to prevent the deaths compared to accidental or natural deaths.
*Pitman et al (2017b) (47)	Mixed methods	$N = 429$ staff and students at British HEI's bereaved by suicide:	Online questionnaire developed by the authors with 119 closed quantitative questions and 20 open ended qualitative questions.	Following their experiences of suicide bereavement, the respondents saw suicide as a tangible option, identified their shared vulnerability to

UK	(Quantitative cross-sectional; Qualitative descriptive)	Male: not stated Female: 82% (number not stated) Mean age: 25.3 years	one out of 20 questions were the focus of this report.	suicide and made personal determination to avoid dying by suicide.
*Pitman et al (2018a) (48) UK	Mixed methods (Quantitative cross-sectional; Qualitative descriptive)	<i>N</i> = 420 staff and students at British HEI's bereaved by suicide: <i>n</i> = 71 Male (17%) <i>n</i> = 349 Female (83%)	Online questionnaire developed by the authors with 119 closed quantitative questions and 20 open ended qualitative questions. 2 out of 20 questions were the focus of this report.	In the quantitative responses, the majority of the participants (75%) reported receiving informal support from friends. 41% of those who received support also received support from a mental health professional. The participants were also able to describe the experience of the support received, articulate specific support needs such as proactive support, and also outline reasons for not seeking support because they believed they would not find support valuable.
*Pitman et al (2018b) (49) UK	Mixed methods (Quantitative cross-sectional; Qualitative descriptive)	<i>N</i> = 460 staff and students at British HEI's bereaved by suicide: <i>n</i> = 76 Male (17%)	Online questionnaire developed by the authors with 119 closed quantitative questions and 20 open ended qualitative questions.	The respondents bereaved by suicide noted specific aspects of grief which impacted their work performance, particularly sadness, poor

		<i>n</i> = 384 Female (83%)	2 out of 20 questions were the focus of this report.	concentration, confusion and anxiety. Respondents also cited structural challenges in work and educational settings, such as lack of support.
*Pitman et al (2018c) (50)	Mixed methods (Quantitative cross-sectional; Qualitative descriptive)	<i>n</i> = 27 staff and students at British HEI's bereaved by suicide: <i>n</i> = 76 Male (17%) <i>n</i> = 384 Female (83%)	Following cross-sectional survey participants invited for face to face interview	Most of the respondents bereaved by suicide who were non-British perceived that others blamed them or their relatives and friends as being responsible for the decedent's suicide. They further described that they experienced a lack of support from both friends and professionals and this was experienced as stigmatising.
UK				

QUANTITATIVE STUDIES

Bailey et al (1999) (51)	Quantitative Descriptive	<i>N</i> = 350 university students <i>n</i> = 259 bereaved by natural causes <i>n</i> = 57 bereaved by accident	Grief Experience Questionnaire (52) Impact of Event Scale Texas Revised Inventory of Grief (53) Questionnaire developed by the authors	Individuals bereaved by suicide reported feeling responsible for the person's death compared to the other bereaved groups (accident and natural causes).
Canada				

		<p><i>n</i> = 34 bereaved by suicide</p> <p><i>n</i> = 90 Male (26.2%)</p> <p><i>n</i> = 253 Female (73.8)</p> <p><i>n</i> = 7 Other</p> <p>Mean age: 20.75 years</p> <p>87.9% Caucasian</p>		
Balk et al (2010) (54)	Quantitative Cross-sectional	<p><i>N</i> = 118 undergraduate university students:</p> <p><i>n</i> = 31 bereaved by natural causes</p> <p><i>n</i> = 8 bereaved by accident</p> <p><i>n</i> = 6 bereaved by murder</p> <p><i>n</i> = 4 bereaved by suicide</p> <p>Male: 41% (number not stated)</p> <p>Female: 59% (number not stated)</p> <p>94% Protestants (number not stated)</p>	<p>Prigerson et al. (2008) revised and shortened the Inventory for Traumatic Grief into a 13-item questionnaire that can be used to measure complicated grief and diagnose prolonged grief disorder (55).</p> <p>Demographic and background questionnaire developed by the authors</p>	<p>In this sample of undergraduate students, four of the decedents died by suicide.</p>
USA				

Bhaskaran et al (2021) (56) Canada	Quantitative Cross-sectional	69% Caucasian (number not stated) N = 964 bereaved university students:	Patient Health Questionnaire (PHQ-9) (57)	75 out of 964 deaths were due to suicide. Suicide is categorised under sudden death bereavement. Sudden death bereavement was associated with increased likelihood of complicated grief symptomatology and increased likelihood of generalised anxiety disorder.
		n = 322 Male (33.4%)	Generalized Anxiety Disorder Assessment-7 (GAD-7) (58)	
		n = 632 Female (65.6%)	Inventory of Complicated Grief (ICG) (59)	
		n = 134 bereaved through accidents: n = 20 bereaved through homicide n = 75 bereaved through suicide	National Stressful Events PTSD Short Scale (NSESS) (60)	
		n = 648 bereaved through illness n = 87 bereaved through unknown causes	The alcohol use disorders identification test (AUDIT) (61)	
McIntosh & Kelly (1992) (62) USA	Quantitative Cross-sectional	N = 174 university students:	Demographic questionnaire developed by authors	Those bereaved by suicide and accidents felt a greater need to understand the death. 87 percent of those bereaved by suicide also indicated that they felt stigmatised by others. There was no difference to the guilt felt by those bereaved by suicide when compared to those bereaved by natural causes and accidents.
		n = 63 bereaved by natural causes	Suicidal Behaviors Questionnaire (63)	
		n = 71 bereaved by accidents	Impact of Event Scale (64)	
		n = 40 bereaved by suicide Mean age: 27.9 years	Revised UCLA Loneliness Scale (65)	

			<i>n</i> = 55 Male (32%)	Texas Revised Inventory of Grief (TRIG) (53)	
			<i>n</i> = 119 Female (68%)		
*Pitman et al (2016) (66)	Quantitative	<i>N</i> = 3432 HEI staff and students who had experienced a sudden bereavement of a close contact.		Online questionnaire developed by the authors.	The group of those bereaved by suicide had higher shame, stigma, guilt and responsibility scores when compared to those bereaved by other means.
UK	Cross-sectional		<i>n</i> = 2106 bereaved by natural causes	10-item stigmatization subscale of the Grief Experience Questionnaire (GEQ) (67).	
			<i>n</i> = 712 bereaved by sudden unnatural causes	Secondary measures three related GEQ subscales: shame, responsibility and guilt (52)	
			<i>n</i> = 614 bereaved by suicide		
			<i>n</i> = 648 Males (19%)		
			<i>n</i> = 2784 Females (81%)		
*Pitman et al (2017a) (68)	Quantitative	<i>N</i> = 3432 HEI staff and students who had experienced a sudden bereavement of a close contact.		Online questionnaire developed by the authors to elicit quantitative data on sociodemographic and clinical characteristics.	Individuals bereaved by suicide were significantly less likely to receive informal support compared to those bereaved by natural causes and likely to report delayed receipt of support. In this sample 25 percent (one in four) people bereaved by suicide had received no formal or informal support. 6 percent of the sample bereaved by
UK	Cross-sectional		<i>n</i> = 2106 bereaved by natural causes	Composite International Diagnostic Interview screen for lifetime depression (69)	
			<i>n</i> = 712 bereaved by sudden unnatural causes	Stigma subscale of the Grief Experience Questionnaire (70)	
			<i>n</i> = 614 bereaved by suicide		
			<i>n</i> = 648 Males (19%)		

		<i>n</i> = 2784 Females (81%)		suicide reported attempting suicide since the bereavement.
Silverman et al (1994) (71)	Quantitative	<i>N</i> = 55 college students bereaved in the last 5 years	Grief Experience Questionnaires (52)	Those bereaved by suicide reported higher levels of general grief, loss of social support, stigma and feeling responsible for the death. They also experienced a greater need for an explanation about the cause of death.
USA	Cross-sectional	<i>n</i> = 12 bereaved by natural anticipated causes	Interpersonal Support Evaluation List (72)	
		<i>n</i> = 9 bereaved by natural unanticipated causes	Impact of Event Scale (64)	
		<i>n</i> = 16 bereaved by accident	Grief Recovery Questions (73)	
		<i>n</i> = 9 bereaved suicide		
		<i>n</i> = 9 bereaved by homicide		
		Gender not stated		
Thompson & Range (1990) (74)	Quantitative	<i>N</i> = 92 undergraduate college students	Impact of Event Scale (64)	Non-bereaved participants imagined those bereaved by suicide as receiving more support than actually occurred.
USA	Yoked design	<i>n</i> = 10 death by suicide	Scale for Prediction of Outcome after Bereavement (75)	
		<i>n</i> = 11 death by accident	Perceived Social Support Scale (76)	
		<i>n</i> = 12 Death by anticipated natural causes		

		<i>n</i> = 13 death by unanticipated natural causes		
		Mean age: 20.25 years.		
		<i>n</i> = 36 Male (39%)		
		<i>n</i> = 56 Female (61%)		
Thompson & Range (1993) (77)	Quantitative	<i>N</i> = 112 undergraduate college students	Impact of Event Scale (64)	Individuals bereaved by suicide remembered receiving support that was unhelpful and filled with blame while the non-bereaved individuals imagined giving more support.
USA	Yoked design	<i>n</i> = 18 bereaved by suicide	Multiple Affect Adjective Check List-Revised Perceived Recovery (78)	
		<i>n</i> = 13 bereaved by accident	Interpersonal Support Evaluation List (72)	
		<i>n</i> = 10 bereaved by anticipated natural causes	Perceived Recovery (75)	
		<i>n</i> = 10 bereaved by unanticipated natural causes	Perceived Social Support Scale (76)	
		<i>n</i> = 5 bereaved by homicide	Helpful/Unhelpful Support (79)	
		Mean age: 20.5 years old		
		<i>n</i> = 32 Male (29%)	Theoretically based guidelines for scoring facilitativeness of support developed from interviews with bereaved persons (80)	
		<i>n</i> = 80 Female (71%)		
		An Imagined Group (<i>n</i> =56 potential comforters) reported no bereavement within the past two years and no experience of comforting a bereaved person in	Scale for Prediction of Outcome after	

			the past year. Each person was individually matched on gender and age to a bereaved person.	Bereavement adapted from Parkes (81)	
Thornton et al (1989) (82)	Quantitative	N = 89 undergraduate university students		Personal and social role functioning questions adapted from Hammen and Peters (1979) (83)	When death was caused by suicide males were perceived better as a close friend or club member than females. When a child or adolescent died by suicide, more blame was attributed to the griever.
USA	Descriptive	n = 28 Male (31%) n = 61 Female (69%)			The participants perceived the deceased was as having been more psychologically unstable when death was by suicide rather than by illness.

*Note: these six articles are part of a single study by Pitman and colleagues