



ECONOMIC AND SOCIAL RESEARCH COUNCIL KEY FINDINGS REPORT

Reference: ES/K00428X/1

Investigator/s: Dr Mark McCann

Title: The Grief Study: sociodemographic determinants of poor outcomes following death of a family member

1. Summary of Project Findings (circa 500 words)

This study successfully linked two administrative datasets to Census returns data to provide a profile of bereavement and mental health in Northern Ireland between 2001 and 2010. Prescription data from the Business Services Organisation and death data from the General Registrars Office were linked to 2001 Census returns for NILS members and their household co-residents. The success of this method opens the door for other projects exploring health outcomes amongst households.

Study cohort

Analysis was conducted on 317,264 Northern Ireland Longitudinal Study (NILS) members who were: enumerated in the 2001 census; at least 7 years old; had at least one co-resident; and were alive and resident in NI in January 2010.

Profile of Bereaved

- 23,821 (7.5%) suffered bereavement between 2001 and 2009
- Mostly older people suffered bereavement :16.9% of those aged 65 years and over were bereaved compared to just 4% of those aged less than 25 years
- There was a higher incidence of bereavement in those who were single, with low qualifications, unemployed, in poor health themselves and living in deprived areas; these factors are also known to be associated with poor mental health.

Individual and household factors

- Working age people were less affected by bereavement than the older and younger age groups
- People with higher levels of education seemed to be better protected against poor mental health outcomes; however, there was no apparent 'protective effect' of education after bereavement due to suicide
- Older people who provided informal care to a person while they were alive experienced worse mental health than those bereaved but who were not providing care, though suffering was more enduring for bereaved carers of working age.

Circumstances of bereavement

- Being bereaved at all increases a person's likelihood of poor mental health. Bereaved persons were 38% more likely to be prescribed antidepressants than the non-bereaved
- Risk of poor mental health is increased for those bereaved in sudden death circumstances and highest for those bereaved by suicide, a 75% excess risk compared to the non-bereaved population
- The higher rate of antidepressant use persists, even after accounting for differences in rate of antidepressant use due to factors such as gender, general health, and deprivation
- Losing a spouse or child had the greatest negative impact on mental health
- After accounting for all other factors, individuals losing a child through suicide were at the greatest risk for poor mental health outcomes after bereavement

We have made applications to Phase 2 of the Secondary Data Analysis Initiative, based on discussions with the Knowledge Exchange Group for this project. We are also in discussion with bereavement services and suicide support services about future work via the Administrative Data Research Centres to look at linking information held by service providers to study pathways to support services for people through their grief journey.

2. Exploitation Routes(circa 250 words)

After the last research seminar and knowledge exchange group meeting, the research team was invited to attend the Northern Ireland Traumatic Stress, Alcohol and Drugs Best practice forum, organised by the Belfast Health and Social Care Trust.

Three academic articles relating to: the overall mental health burden, variations with education, and variations when providing informal care are being finalised for submission to e.g. the American Journal of Epidemiology, Psychological Medicine, and the British Medical Journal.

The Grief Study Blog has illustrated the discoveries of the research team throughout the project and is available at the below link:

<http://blogs.qub.ac.uk/griefstudy/>

A podcast featuring a discussion between the research team and bereavement coordinators is publicly available on the Grief study blog.

The research team are jointly organising a Bereavement focused conference in Belfast in 2015 in association with the Northern Ireland Health and Social Care Trust Bereavement Co-ordinators. Findings from the Grief Study will form part of the main conference presentations.

Findings from the study have already been presented at a number of conferences and are scheduled to be presented in the future:

Institute of Public Health Conference on 8th October 2013, Dublin

NILS 2011 Census Launch Event on 5th June 2014, Belfast

UKCRC Summer Conference on the 19th – 20th June, Leeds

Society for Social Medicine Conference in September 2014, Oxford

European Public Health Association Conference, November 2014, Glasgow

Northern Ireland Assembly Research and Information Service: Knowledge Exchange Seminar Series in Spring 2015, Stormont Parliament Buildings, Belfast

The grief study has been asked to prepare a briefing on findings related to suicide, to aid the commissioning of further research into suicide in Northern Ireland, by the Research and Development Directorate for the NI Health and Social Care Public Health Agency.

3. Potential use in a non-academic context (circa 250 words)

We have agreed to produce a two page summary focussing on mental health outcomes for people bereaved due to suicide in conjunction with local suicide prevention groups. Our discussion with these groups has focussed on raising awareness of the importance of social support for those bereaved through suicide and on challenging stigma surrounding suicide in communities.

In addition, the relationship that has been built between the Health and Social Care Trust Bereavement Co-ordinators and the Grief Study team will result in not only the Bereavement focused conference in Belfast in 2015 but may result in the development of new guidelines surrounding how bereavement is handled in Health and Social Care in Northern Ireland.

The aim of such guidelines would be to shape the training, supervision and assessment offered to frontline healthcare professionals who interface with individuals both pre- and post-bereavement. The Grief Study offers insight both into the particular groups of individuals in need of intense support (such as working age carers and persons with lower education levels) and into some of the mechanisms which underlie complicated and prolonged grief.

The findings are likely to have an influence on future research commissioning by the Health and Social Care research and development division.

4. URL

<http://blogs.qub.ac.uk/griefstudy/>

5. Sector Coding

Communities
Healthcare
Social Services