



Comparing Grief-Informed Texts to Other Types of Bereavement Support in the United Kingdom

Welcome

This study is being conducted as a part of a PhD dissertation in International Psychology at The Chicago School in Chicago, Illinois, USA, and in partnership with Sue Ryder. The study compares grief-informed texting to other types of bereavement support.

You've been asked to take part in this survey because you've enrolled in *Grief Coach*, a grief-informed texting support service offered by Sue Ryder.

The first few questions of this survey will see if you qualify for this study. If you qualify, you will be asked to provide informed consent, answer questions about yourself and your loss, and rate your experience with grief-informed texting and other types of grief support.

You will also be asked to answer questions related to your loss and well-being.

This survey takes approximately 15 minutes.

Thank you for your participation.

IRB-FY23-592

Contact information:

Principal Investigator: Melissa Lunardini
mlunardini@ego.thechicagoschool.edu

Research Chair: Dr Amy Sisson, PhD
asisson1@thechicagoschool.edu



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Eligibility Screener

Please answer the questions below to see if you qualify for this study.

* 1. Are you 18 or older?

Yes

No

* 2. Have you experienced the death of a friend or family member in the past 5 years?

Yes

No

* 3. Have you been enrolled in the Sue Ryder Grief Coach Texting Service for at least 3 months?

Yes

No

* 4. Are you able to read and write in English?

Yes

No



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Thank You For Your Interest

Thank you for your interest in participating in this research study. However, based on your answers to a previous question, you do not qualify for one or more of the following reasons:

- you are under the age of 18
- you have not experienced the death of a friend or family member in the past 5 years
- you are not currently enrolled in the Sue Ryder Grief Coach Texting Service
- you are unable to read or write in English
- you did not consent to participate.

If you believe you've made an error and should qualify for this survey, please click the "PREV" button below to update your answers.

If you choose not to participate, please click "NEXT" to end the survey.

If you have questions about this study, please email the principal investigator, Melissa Lunardini, at mlunardini@ego.thechicagoschool.edu.

You may be interested to know that Sue Ryder offers free, professional online video counselling to anyone 18+ and living in the UK. Please visit the Sue Ryder website at <https://www.sueryder.org/GCsupport> to learn more about their video counselling and other types of bereavement support.



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Eligibility Confirmation

You are eligible to participate in this study.

Please carefully review the informed consent form below. It provides details about this study and asks for your electronic signature to show your consent to continue with the survey.

If you have any questions or would like a copy of this consent form for your records, please email the principal investigator, Melissa Lunardini, at mlunardini@ego.thechicagoschool.edu.

Informed Consent

Principal Investigator: Melissa Lunardini
IRB-FY23-592

Study Title: Comparing Grief-Informed Texts to Other Types of Bereavement Support in the United Kingdom

I am a student at The Chicago School. This study is being conducted as a part of my dissertation requirement for a Ph.D. in International Psychology.

I am asking you to participate in a research study that compares grief-informed texting to other types of bereavement support. **You will be asked to** complete a short survey rating your experience with grief-informed texting and other types of grief support. You will also be asked to answer questions related to your loss and well-being. **This will take approximately 15 minutes.**

This may cause emotional distress or upset or the feeling that your confidentiality may be at risk. Although you may not directly benefit, it will be valuable for the field of international psychology to understand how grief-informed texting compares to other types of support. If comparable, this could be a scalable way for people to get bereavement support.

Purpose: The purpose of this study is to understand people's experiences with grief-informed texts and other types of bereavement support in terms of availability and helpfulness. The study will also seek to understand how you are coping with loss and your well-being.

Procedures: For this study, you will be asked to complete a 15-minute survey rating your level of satisfaction with grief-informed texting and other forms of support. You will also be asked some questions about your well-being and your loss. Upon completion, you will be invited to enter a random drawing for one of 25 £20 international Visa gift cards. All survey data will be de-identified and stored in compliance with GDPR requirements.

Risks to Participants: Completing a survey poses very little risk for participants. The risks of this study may include mild emotional distress or upset, concerns around data privacy, and protection and breaches of confidentiality. To minimize emotional distress or upset, participants will be provided with additional resources, and the principal investigator, Melissa Lunardini, will remain available via email at mlunardini@ego.thechicagoschool.edu for additional support. A Zoom call will be made an option if preferred over email.

To minimize a breach of data privacy and protection and a confidentiality breach, all data will be de-identified and stored on a password-protected computer that requires two-factor authentication to access data stored in SurveyMonkey and in the data analysis software SPSS database. The SurveyMonkey survey data will be collected over a secure HTTPS connection. SurveyMonkey maintains the industry's best security standards across the globe. All identifying information will be removed during data cleaning. Aggregate data will be used when publishing and distributing the results of the study.

Benefits to Participants: Your participation contributes to the scientific knowledge that benefits society. By volunteering to take part in this research study, you will contribute to the knowledge of how we can improve bereavement care across the United Kingdom. Volunteering can be a helpful way to cope with grief. Studies have shown that volunteering can improve mental well-being after loss.

Alternatives to Participation: Participation in this research is voluntary. You can opt out of this study at any time and request that your information be deleted from the database per your rights under GDPR. Your participation or nonparticipation will not affect your relationship with Sue Ryder or your ability to access other types of bereavement support.

Confidentiality: During this study, information will be collected about you for this research. This includes some information about you and your loss. To minimize a breach of confidentiality, the PI will maintain exception data collection and storage practices. Your data will not contain any personal identifiers and will be stored securely on the PI's personal computer, which is password-protected and requires two-factor authentication. Aggregate data will be used when publishing and distributing the results of the study. The American Psychological Association requires that data be stored for five years; this is also a standard practice across the United Kingdom.

Your data may be used for future research or distributed to another researcher without your consent. However, information that would identify you will be removed.

Your research records may be reviewed by federal agencies responsible for protecting human subjects participating in research, including the Office of Human Research Protections (OHRP) and by representatives from The Chicago School Institutional Review Board, a committee that oversees the research, and by Sue Ryder's ethics committee.

Questions/Concerns: If you have questions related to the procedures described in this document, please contact:

Principle Investigator: Melissa Lunardini
Email: mlunardini@ego.thechicagoschool.edu

Research Chair: Dr Amy Sisson, PhD
Email: asisson1@thechicagoschool.edu

If you have questions concerning your rights in this research study, you may contact the Institutional Review Board (IRB), which protects subjects in research projects. You may reach the IRB office Monday to Friday by calling 312.467.2335 or writing:

Institutional Review Board
The Chicago School of Professional Psychology
325 N. Wells
Chicago, Illinois, 60654
USA

To confirm your willingness to participate in this study, please select "Yes" and provide your electronic signature.

If you would like a copy of this consent form, please email the principal investigator, Melissa Lunardini, at mlunardini@ego.thechicagoschool.edu.

* 5. I consent voluntarily to be a participant in this study

Yes
 No

* 6. Electronic Signature (Full Name)



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Questions About You

* 7. How old are you?

* 8. Please select the option which best describes your ethnic group:

<input type="radio"/> British - English	<input type="radio"/> Bangladeshi
<input type="radio"/> British - Northern Irish	<input type="radio"/> Other South Asian background
<input type="radio"/> British - Scottish	<input type="radio"/> Chinese
<input type="radio"/> British - Welsh	<input type="radio"/> Korean
<input type="radio"/> British - Black/African/Caribbean	<input type="radio"/> Japanese
<input type="radio"/> British - Asian	<input type="radio"/> Other Asian background
<input type="radio"/> Irish	<input type="radio"/> African
<input type="radio"/> Gypsy or Irish Traveller	<input type="radio"/> Caribbean
<input type="radio"/> White European or North American	<input type="radio"/> Other Black/African/Caribbean background
<input type="radio"/> White and Black Caribbean	<input type="radio"/> Middle Eastern or North African Arab
<input type="radio"/> White and Black African	<input type="radio"/> Other Middle Eastern background
<input type="radio"/> White and Asian	<input type="radio"/> Indigenous North American, Australian or Maori
<input type="radio"/> Other mixed/multiple ethnic backgrounds	<input type="radio"/> Other Indigenous background
<input type="radio"/> Indian	<input type="radio"/> Hispanic or Latino
<input type="radio"/> Pakistani	<input type="radio"/> Other South American background
<input type="radio"/> Other (please specify):	

* 9. I identify as:



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Questions About Your Loss

* 10. Who was it that died?

<input type="radio"/> My husband or male partner	<input type="radio"/> My grandfather
<input type="radio"/> My wife or female partner	<input type="radio"/> My grandmother
<input type="radio"/> My mother	<input type="radio"/> My aunt
<input type="radio"/> My father	<input type="radio"/> My uncle
<input type="radio"/> My brother	<input type="radio"/> My grandson
<input type="radio"/> My sister	<input type="radio"/> My granddaughter
<input type="radio"/> My son	<input type="radio"/> My friend
<input type="radio"/> My daughter	<input type="radio"/> My colleague
<input type="radio"/> Other (please specify)	 <div style="border: 1px solid black; height: 20px; width: 100%;"></div>

* 11. What was the primary cause of death?

<input type="radio"/> Accident	<input type="radio"/> Stillbirth
<input type="radio"/> Alzheimer's/Dementia	<input type="radio"/> Stroke
<input type="radio"/> Cancer	<input type="radio"/> Sudden Unexplained Infant/Child Death
<input type="radio"/> Cardiovascular Disease	<input type="radio"/> Suicide
<input type="radio"/> COVID-19	<input type="radio"/> Termination of Pregnancy for Medical Reasons
<input type="radio"/> Drug or Alcohol Related	<input type="radio"/> Other
<input type="radio"/> Homicide/Murder	<input type="radio"/> I prefer not to say
<input type="radio"/> Natural Causes	

* 12. As best as you can recall, please enter the date your loved one died.

Please provide the month and year if you cannot remember the exact date.

Date Format: (DD/MM/YYYY)

e.g., March 1, 2019, is 01/03/2019, or March 2019 is 03/2019

* 13. Were you a carer for the person who died?

Yes

No



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Support Services

The next section asks you to select the support services you have sought and received since your loved one died. After you have selected the services, you will be asked to rate each one individually.

* 14. Please select the support services that you have sought and received since your loved one died.

You may select more than one answer.

- Sue Ryder Grief Coach Texting Service
- Individual Counselling (Peer Counsellor)
- Individual Therapy (Support From a Licensed Professional)
- Group Counselling
- Social Support (Friends, Family, Spiritual Care)
- Self-Help (Books, Leaflets, Social Media)
- Funeral Director
- GP/Community Healthcare Professional
- Other (please specify)



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Support Services: Sue Ryder Grief Coach Texting Service

Please rate your satisfaction with the Sue Ryder Grief Coach Texting Service by saying how much you agree or disagree with each of the following statements.

*** 15. The support service was available when I needed it**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

*** 16. The support service was easy for me to access**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

*** 17. The length of service met my needs**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

*** 18. The support service was helpful**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree



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Support Services: Individual Counselling (Peer Counsellor)

Please rate your satisfaction with Individual Counselling (Peer Counsellor) by saying how much you agree or disagree with each of the following statements.

*** 19. The support service was available when I needed it**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

*** 20. The support service was easy for me to access**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

*** 21. The length of service met my needs**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

*** 22. The support service was helpful**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree



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Support Services: Individual Therapy (Support From a Licensed Professional)

Please rate your satisfaction with Individual Therapy (Support From a Licensed Professional) by saying how much you agree or disagree with each of the following statements.

*** 23. The support service was available when I needed it**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

*** 24. The support service was easy for me to access**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

*** 25. The length of service met my needs**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

*** 26. The support service was helpful**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree



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Support Services: Group Counselling

Please rate your satisfaction with Group Counselling by saying how much you agree or disagree with each of the following statements.

*** 27. The support service was available when I needed it**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

*** 28. The support service was easy for me to access**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

*** 29. The length of service met my needs**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

*** 30. The support service was helpful**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree



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Support Services: Social Support (Friends, Family, Spiritual Care)

**Please rate your satisfaction with Social Support (Friends, Family, Spiritual Care) by
saying how much you agree or disagree with each of the following statements.**

*** 31. The support service was available when I needed it**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

*** 32. The support service was easy for me to access**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

*** 33. The length of service met my needs**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

*** 34. The support service was helpful**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree



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Support Services: Self-Help (Books, Leaflets, Social Media)

**Please rate your satisfaction with Self-Help (Books, Leaflets, Social Media) by saying
how much you agree or disagree with each of the following statements.**

*** 35. The support service was available when I needed it**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

*** 36. The support service was easy for me to access**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

*** 37. The length of service met my needs**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

*** 38. The support service was helpful**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree



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Support Services: Funeral Director

Please rate your satisfaction with the Funeral Director by saying how much you agree or disagree with each of the following statements.

*** 39. The support service was available when I needed it**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

*** 40. The support service was easy for me to access**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

*** 41. The length of service met my needs**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

*** 42. The support service was helpful**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree



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Support Services: GP/Community Healthcare Professional

**Please rate your satisfaction with the GP/Community Healthcare Professional by
saying how much you agree or disagree with each of the following statements.**

*** 43. The support service was available when I needed it**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

*** 44. The support service was easy for me to access**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

*** 45. The length of service met my needs**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

*** 46. The support service was helpful**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree



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Support Services: Other

When asked which support services you sought and received after your loved one died, you selected "Other." Please keep those services in mind when answering the questions below.

Please rate your satisfaction with Other Support Services by saying how much you agree or disagree with each of the following statements.

*** 47. The support service was available when I needed it**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

*** 48. The support service was easy for me to access**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

*** 49. The length of service met my needs**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

*** 50. The support service was helpful**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree



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Coping With Loss

Below are some statements that help give a clearer picture of your grief and support

needs.

Please rate your level of agreement/disagreement with each statement based on what you are feeling and thinking today.

* 51. I feel able to face the pain that comes with loss.

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

* 52. For me, it is difficult to switch off thoughts about the person I have lost.

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

* 53. I feel very aware of my inner strength when faced with grief.

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

* 54. I believe that I must be brave in the face of loss.

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

* 55. I feel that I will always carry the pain of grief with me.

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

* 56. For me, it is important to keep my grief under control.

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

* 57. Life has less meaning for me after this loss.

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

* 58. For me, it's best to avoid thinking about my loss.

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

* 59. It may not always feel like it, but I do believe that I will come through this experience of grief.

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree



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Your Well-Being

Below are some statements about thoughts and feelings.

Please select the answer that best describes your experience with each over the last 2 weeks.

* 60. I've been feeling optimistic about the future

- None of the time
- Rarely
- Some of the time
- Often
- All of the time

* 61. I've been feeling useful

- None of the time
- Rarely
- Some of the time
- Often
- All of the time

* 62. I've been feeling relaxed

- None of the time
- Rarely
- Some of the time
- Often
- All of the time

* 63. I've been feeling interested in other people

- None of the time
- Rarely
- Some of the time
- Often
- All of the time

* 64. I've had energy to spare

- None of the time
- Rarely
- Some of the time
- Often
- All of the time

* 65. I've been dealing with problems well

- None of the time
- Rarely
- Some of the time
- Often
- All of the time

* 66. I've been thinking clearly

- None of the time
- Rarely
- Some of the time
- Often
- All of the time

* 67. I've been feeling good about myself

- None of the time
- Rarely
- Some of the time
- Often
- All of the time

* 68. I've been feeling close to other people

- None of the time
- Rarely
- Some of the time
- Often
- All of the time

* 69. I've been feeling confident

- None of the time
- Rarely
- Some of the time
- Often
- All of the time

* 70. I've been able to make up my own mind about things

- None of the time
- Rarely
- Some of the time
- Often
- All of the time

* 71. I've been feeling loved

- None of the time
- Rarely
- Some of the time
- Often
- All of the time

* 72. I've been interested in new things

- None of the time
- Rarely
- Some of the time
- Often
- All of the time

* 73. I've been feeling cheerful

- None of the time
- Rarely
- Some of the time
- Often
- All of the time



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Thank You For Your Responses

Thank you for participating in this research study to help improve bereavement care in the UK.

You may be interested to know that Sue Ryder has an Online Bereavement Counselling Service offering free and professional video counselling to anyone 18+ and living in the UK.

Other Online Bereavement Support options can be found here <https://www.sueryder.org/GCsupport>.

You are invited to enter a random drawing for one of 25 £20 international Visa gift cards.

The drawing will take place in two weeks, and the winners will be notified via email and/or text message.

* 74. Do you want to enter the drawing for a £20 international Visa gift card?

If you select **Yes** below, click "next" to provide your contact information for the drawing.

If you select **No**, click "next" to end the survey.

Yes

No



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Visa Gift Card Entry Form

Thank you again for your participation in my research study.

Please provide your contact information below, then select DONE to submit your responses.

Winners of the £20 international Visa gift cards will be notified via email and/or text message within two weeks.

* 75. Name

First name

Last name

* 76. Phone Number

Country code

Phone number

* 77. Email

Email

email@extension.com