

# Life, death and the experience of suicide and accidental death bereavement for Australia's rural farming families

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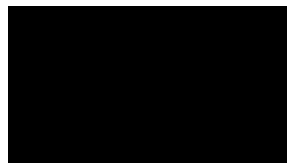
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I certify that the substance of this thesis has not already been submitted for any degree and is not currently being submitted for any other degree or qualification.

I certify that any help received in preparing this thesis and all sources used have been acknowledged in this thesis.



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Alison Jane Kennedy

# Acknowledgements

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This thesis is the result of 24 courageous individuals who shared their stories of loss through suicide and accidental death with me. I, more often than not, came before them as a stranger, yet their openness and honesty astounded me. Throughout the project I felt an immense feeling of privilege in being the recipient of such deeply personal and life-altering narratives. At times I was the only person to whom these accounts of events and emotions had been told. With this sense of privilege comes an equal sense of responsibility to do justice in my representation, interpretation and learning from these narratives. I hope I have achieved this. To each of you – thank you.

Thank you to my supervisors Myf Maple, Kathy McKay and Sue Brumby. While time with Myf could be likened to hen's teeth, when it came it was GOLD. In a few short minutes, she managed to sort my twisted and confused thoughts into something meaningful that could keep me focused for months. When we first met, Kathy introduced herself as my 'pragmatic' supervisor, passing on all that she had learnt through her own recently completed PhD journey. She proved to be much more than that: from her detailed editing and insightful comments through to her gentle encouragement and reassurance and her gift for providing 'tea and sympathy'. Sue was the person who gave me the initial encouragement and confidence to endeavour the PhD journey. She has also provided me with amazing opportunities to grow and be challenged while based at the National Centre for Farmer Health (NCFH); opportunities I would never have had being one of thousands at a large university. Sue also contributed her wealth of farmer health experience in helping shape this thesis.

The PhD journey is a formidable one and, as an external student, a potentially lonely one. I was saved from any sense of isolation and sheltered from insecurity by an amazingly supportive network of fellow PhD students and NCFH colleagues. Cath, Gina and Sarah were always there to answer a desperate email, offer a consoling Skype call or just indulge a chance to vent over the phone. Through our shared experiences we nudged each other along the perilous PhD path, gradually mastering the inferiority complexes and encouraging each other to focus on at least one positive achievement at all times. My colleagues at the NCFH listened to my woes, helped wherever possible and, when all else failed, brought me flowers (thanks B!).

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While the thesis may be written, the need for work in the fields of farmer health and suicide and accidental death bereavement continues. I recall a particularly memorable conversation with one participant when he asked me what I would do once I had finished this thesis. His resolve that it would be up to me to drive the outcomes has stuck with me and, although this weighs me with responsibility, it also inspires me to continue working towards improving the wellbeing of those affected by what are, ultimately, preventable deaths.

# Abstract

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Rural farming families constitute a heterogeneous slice of Australia's population, frequently existing in unique psychological, social and geographical contexts, and subject to numerous heightened mortality risks including suicide and accidental death. Despite efforts to measure and understand such deaths, there is a dearth of knowledge on how such incidents affect those remaining.

This thesis aimed to understand how Australian farming families live and die and how they experience suicide and/or accidental death, the following questions were posed: (1) Who are Australia's farming families? How do they live? How do they die? (2) How do farming family members experience loss following suicide and accidental death? (3) How does the farming family context influence this bereavement?

In-depth interviews with 24 adult farming family members elicited narratives of farming life and the experience of bereavement. Interview data was thematically analysed, highlighting three themes. The first theme exposed how the farming context influenced participants' worldview in relation to life and death, through an acceptance of risk and death and a strong connection to place. The second theme highlighted that when suicide and accidental death occurred, the context in which this is experienced meant that these deaths were often not the worldview shattering events frequently suggested. The third theme demonstrated that participants' experience of bereavement was influenced by their context in multiple ways. Bereavement did not appear to be influenced by (Western) gender norms. Connection to the farm had both positive and negative impacts on the bereavement experience and was a source of continuing bonds.

Understanding context helps understand the experience of bereavement in farming families, yet there remains a complex mix of contextually influenced, but individually experienced differences. We cannot assume that bereavement will be experienced similarly across Australia. Life and death will be experienced differently depending on context and the resulting worldview. Similarly, we cannot assume that everyone will experience suicide and/or accidental death as a sudden, unexpected event. The knowledge gained from this research helps break down some of the stereotyped conceptualisations of grief that have been normalised in Western cultures, and provides a fresh perspective on loss, grief and resilience in a previously unstudied segment of the broader 'Western' population.

## Publications of this research to date

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Kennedy, A., Maple, M., McKay, K., & Brumby, S. (2014). Suicide and accidental death in Australia's rural farming communities: a review of the literature. *Rural and Remote Health, 14*: 2517. Retrieved from <http://www.rrh.org.au>

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