

Supplementary Material

The relationship between working alliance and treatment outcome in an Internet-based grief therapy for people bereaved by suicide

Cognitive Therapy and Research

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Intervention details

Each writing task lasted 45 minutes. Therapists provided individual feedback twice during each phase and sent standardized instructions for subsequent writing tasks. The therapists were trained psychologists or psychotherapists. The intervention includes ten writing tasks in three phases.

1) Self-confrontation focuses on coping with loss. Participants write about their most painful loss in detail. The loss experience must be written in the present tense and first person, with no emphasis on grammar or correctness. This phase aims to verbalize painful feelings and thoughts in order to reduce avoidance behaviors.

2) Cognitive restructuring focuses on integrating the individual's loss. Participants write a letter to a (possibly imaginary) friend who has also lost a loved one to suicide. In the letter, they must identify difficult feelings and challenge dysfunctional behaviors and thoughts. In addition, patients address how their friend can mobilize resources and find helpful grief rituals to reflect on helpful experiences and positive memories of the deceased. This second phase of the treatment approach aims to create a new perspective on the loss and a stronger sense of control over one's life.

3) Social sharing is also focused on integrating the individual's loss. Patients are asked to write a letter to a friend, to themselves, or to someone affected by the loss. The letter summarizes past experiences and concludes with plans for the future.