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Box S1 SPIDER search strategy for PubMed

Sample (S)	"Psychotherapy"[Mesh] OR “Psychotherapies” OR "Psychoanalysis"[Mesh] OR “Psychodynamic Analysis” OR “Analyses, Psychodynamic” OR “Analysis, Psychodynamic” OR “Psychodynamic Analyses” OR "Psychology"[Mesh] OR “Psychologists” OR “Psychologist” OR "Psychology, Clinical"[Mesh] OR “Clinical Psychology” OR “Psychotherapists"[Mesh] OR “Psychotherapist” OR “Clinical Psychotherapists” OR “Clinical Psychotherapist” OR “Psychotherapist, Clinical” OR “Psychotherapists, Clinical” OR "Counselors"[Mesh] OR “Counselor” OR "Counseling"[Mesh] OR "Mental Health Services"[Mesh] OR “Health Services, Mental” OR “Health Service, Mental” OR “Mental Health Service” OR “Service, Mental Health” OR “Services, Mental Hygiene” OR “Hygiene Service, Mental” OR “Hygiene Services, Mental” OR “Mental Hygiene Service” OR “Service, Mental Hygiene” OR “Mental Hygiene Services” OR “Services, Mental Health” OR "Social Work, Psychiatric"[Mesh] OR “Psychiatric Social Work” OR “Psychiatric Social Works” OR “Social Works, Psychiatric” OR “Work, Psychiatric Social” OR “Works, Psychiatric Social” OR “Psychiatric Social Service” OR “Psychiatric Social Services” OR “Service, Psychiatric Social” OR “Services, Psychiatric Social” OR “Social Services, Psychiatric” OR “Social Service, Psychiatric” OR "Psychiatry and Psychology Category"[Mesh] OR "Health Personnel"[Mesh] OR “Personnel, Health” OR “Health Care Providers” OR “Health Care Provider” OR “Provider, Health Care” OR “Healthcare Providers” OR “Healthcare Provider” OR “Provider, Healthcare” OR “Healthcare Workers” OR “Healthcare Worker” OR “Health Care Professionals” OR “Health Care Professional” OR “Professional, Health Care” OR "Allied Health Personnel"[Mesh] OR “Health Personnel, Allied” OR “Personnel, Allied Health” OR “Allied Health Professional” OR “Allied Health Professionals” OR “Health Professional, Allied” OR “Health Professionals, Allied” OR “Professional, Allied Health” OR “Professionals, Allied Health” OR “Healthcare Assistants” OR “Assistant, Healthcare” OR “Assistants, Healthcare” OR “Healthcare Assistant” OR “Healthcare Support Workers” OR “Healthcare Support Worker” OR “Support Worker, Healthcare” OR “Support Workers, Healthcare” OR “Worker, Healthcare Support” OR “Workers, Healthcare Support” OR “Paramedics” OR “Paramedic” OR “Paramedical Personnel” OR “Personnel, Paramedical” OR “Population Program Specialists” OR “Population Program Specialist” OR “Program Specialist, Population” OR “Program Specialists, Population” OR “Specialist, Population Program” OR “Specialists, Population Program” OR "Psychiatry"[Mesh] OR “Psychiatrists” OR “Psychiatrist” OR "Preventive Psychiatry"[Mesh] OR “Psychiatry, Preventive”
Phenomenon of interest (PI)	"Suicidal Ideation"[Mesh] OR "Suicide, Attempted"[Mesh] OR "Suicide, Completed"[Mesh] OR "Suicide"[Mesh] OR “Ideation, Suicidal” OR “Ideations, Suicidal” OR “Suicidal Ideations” OR “Attempted Suicide” OR “Parasuicide” OR “Parasuicides” OR “Completed Suicides” OR “Suicide, Fatal” OR “Completed Suicide” OR “Fatal Attempt” OR “Fatal Attempts” OR “Fatal Suicide” OR “Fatal Suicides” OR "Disruptive, Impulse Control, and Conduct Disorders"[Mesh] OR “Impulse Control Disorders” OR “Disorders, Impulse Control” OR “Impulse-Control Disorders”
Design (D)	"Focus Groups"[Mesh] OR “Focus Group” OR “Group, Focus” OR "Anthropology, Medical"[Mesh] OR “Medical Anthropology” OR "Grounded Theory"[Mesh] OR “Theory, Grounded” OR “Culture” OR “Thematic synthesis” OR “Ethnographic” OR “ethnographic research” OR “Phenomenology” OR “phenomenological research” OR “Narrative” OR "Interviews as Topic"[Mesh] OR “Interviewers” OR “Interviewer” OR “Interviewees” OR “Group Interviews” OR “Group Interview” OR “Interview, Group” OR “Interviews, Group” OR “in-depth interview” OR “qualitative interview” OR “content analysis” OR “semantic analysis” OR "Hermeneutics"[Mesh] OR "Anthropology, Cultural"[Mesh]
Evaluation (E)	"Perception"[Mesh] OR "Self Concept"[Mesh] OR "Value of Life"[Mesh] OR "Social Values"[Mesh] OR "Personal Narratives as Topic"[Mesh] OR "Personal Narrative" [Publication Type] OR "Attitude"[Mesh] OR "Expert Testimony"[Mesh] OR "Psychiatry in Literature"[Mesh] OR "Holistic Health"[Mesh] OR "Comprehension"[Mesh]
Research Type (R)	"Qualitative Research"[Mesh] OR “Research, Qualitative” OR “Qualitative studies” OR “Qualitative” OR "Empirical Research"[Mesh] OR “Research, Empirical”.

Table S1 Characteristics of included studies (n=21)

Study/country	Aim	Design, data collection and analysis	n	Characteristics of participants
Morrissey, 2021 Ireland	To explore the impact and responses of mental health nurses to a client's death by suicide.	Techniques/instruments: semi-structured interview Theoretical approach: ND Data analysis: Braun and Clarke's thematic analysis	10	Profession: nurses (clinical manager, clinical specialist, community mental health) Practice setting: community services Years in practice: 4-21 years Age: ND
Rytterström, 2020 Sweden	To understand how mental health professionals perceive suicide during ongoing psychiatric care and the impacts of suicide on continued care.	Techniques/instruments: semi-structured interview Theoretical approach: phenomenography Data analysis: phenomenography	19	Profession: healthcare professionals with experience in psychiatric care (psychiatric nurse, assistant nurse, psychologist, physician) Practice setting: forensic psychiatry, psychiatric care (outpatient and inpatient) Years in practice: 2-32 years Age: ND
Malgarezi, 2020 Brazil	To identify the specificities and perceptions of psychology professionals regarding the phenomenon of suicide.	Techniques/instruments: semi-structured interview/sociodemographic questionnaire Theoretical approach: ND Data analysis: content analysis (Bardin)	5	Profession: psychologists Practice setting: ND Years in practice: 13 years (median) Age: ND
Podlogar, 2020 Slovenia	To obtain an in-depth understanding of therapists developing therapeutic work having suicidality as a relevant component over a shorter or long period of time, and to develop a theoretical model.	Techniques/instruments: semi-structured individual interviews Theoretical approach: ND Data analysis: grounded theory	11	Profession: therapists (cognitive-behavioral, integrative, psychodynamic, systemic therapy and transactional analysis) Practice setting: private practice and public institutions Years in practice: 2.5-35 years Age: 31-60 years old
Vandewalle, 2020 Belgium	To enhance the conceptual understanding of the working alliance in the context of nursing care for people experiencing suicidal ideation from the perspective of nurses in psychiatric wards.	Techniques/instruments: individual semi-structured interviews/field notes Theoretical approach: ND Data analysis: grounded theory	28	Profession: nurses Practice setting: psychiatric wards in psychiatric hospitals Years in practice: more than half of participants had worked for more than 9 years as nurses Age: 22-61
Ferreira, 2019 Brazil	To learn how the professionals in a Family Health Strategy unit deal with the demands related to the theme of suicide.	Techniques/instruments: focus group with participatory design Theoretical approach: ND Data analysis: interpretative approach/narrative construction	8	Profession: physicians, nurse, licensed practical nurse, community health workers Practice setting: Family Health Strategy unit Years in practice: although not questioned, 3 participants mentioned 4 months, 5 months, 14 years Age: 24-65 years old

Sun, 2019 Taiwan	To explore the psychological processes experienced by nursing students caring for suicidal patients during their first psychiatric clinical practicum.	Techniques/instruments: semi-structured interview Theoretical approach: ND Data analysis: grounded theory	22	Profession: fourth year undergraduate nursing students Practice setting: psychiatric clinical practicum Years in practice: first experience meeting people with suicidal tendencies (5-20 days providing care for these patients) Age: 20-23
Morrissey, 2019 Ireland	To develop a grounded theory to explain the responses of mental health nurses to clients with suicidal behavior.	Techniques/instruments: in-depth interviews guided by an interview protocol Theoretical approach: ND Data analysis: grounded theory	33	Profession: nurses (staff, clinical manager, clinical specialist, community mental health). Two nurses also had psychoanalytical psychotherapy academic training Practice setting: inpatient and community services Years in practice: 0-21 years Age: ND
Callirgos, 2018 Peru	To explore the meanings of suicide in a group of psychoanalytic psychotherapists from a training center in Lima, Peru.	Techniques/instruments: data sheet/natural semantic networks (group)/in-depth interview (individual) Theoretical approach: phenomenology Data analysis: content analysis	8	Profession: psychoanalytic psychotherapists Practice setting: ND Years in practice: ND Age: ND
Jansson, 2018 Sweden	To describe the experiences of nurses assessing suicide risk in specialized mental health outpatient care in rural areas.	Techniques/Instruments: semi-structured individual interviews Theoretical approach: ND Data analysis: inductive approach (Elo & Kyngäs)/qualitative content analysis (Graneheim & Lundman)	12	Profession: registered and enrolled nurses working in specialized mental health care Practice setting: psychiatric clinic (outpatient unit) Years in practice: 1.5-14 years Age: 39-62 years old
Goldstone, 2018 South Africa	To explore the experiences of mental health care providers in preventing suicide in people with substance use disorders (PWSUDs), their perception of the factors that contribute to these experiences, and the implications for clinical practice.	Techniques/instruments: in-depth, semi-structured interviews, detailed field notes. Theoretical approach: ND Data analysis: thematic analysis	18	Profession: psychiatrists, psychologists, social workers, counsellors Practice setting: mental health care - experience working with suicidal PWSUDs (in teams or private practice) Years in practice: 6 years (median) Age: ND
Hultsjö, 2018 Sweden	To explore the experiences of mental health professionals in circumstances that cause patients to take their own life during ongoing care.	Techniques/instruments: interview Theoretical approach: phenomenological lifeworld perspective Data analysis: reflective lifeworld research (Dahlberg)	12	Profession: psychiatric nurse, assistant nurse Practice setting: forensic psychiatry, psychiatric care (outpatient and inpatient) Years in practice: 2-32 years (14 median) Age: ND

Aherne, 2017 Ireland	To develop a theoretical framework for the role played by connectedness in relation to suicide based on the perspectives of psychotherapists working in the field of suicide intervention.	Techniques/instruments: semi-structured individual interviews Theoretical approach: social constructionist Data analysis: constructivist Grounded Theory	12	Profession: psychotherapists (psychotherapy, counselling and psychology professionals) Practice setting: suicide intervention service Years in practice: 2-28 years Age: 38-56 years old
Vedana, 2017 Brazil	To understand the experiences of emergency nurses in caring for people with suicidal behavior.	Techniques/instruments: individual, open, nondirected or unstructured interviews/structured demographic questionnaire Theoretical approach: symbolic interactionism Data analysis: grounded theory	19	Profession: nurses and nursing assistants/technician Practice setting: emergency public services (hospital and pre-hospital) Years in practice: ≤ 10 to ≥ 31 Age: 19 to ≥50 years old
Hagen, 2017 Norway	To extend the existing literature and develop further the knowledge of how mental health nurses deal with the variety of demands in the care of potentially suicidal patients in psychiatric wards.	Techniques/instruments: semi-structured interview Theoretical approach: Giorgi's phenomenological analysis Data analysis: systematic text condensation	8	Profession: mental health nurses Practice setting: hospitals (psychiatric wards) Years in practice: 5-25 years Age: 43-60 years old
Zana, 2013 Brazil	To understand how psychologists deal with patients with suicide ideation and/or attempt in clinical practice, as well as possible ethical dilemmas, emphasizing the dialogue between clinical practice and the propositions of the Code of Professional Ethics.	Techniques/instruments: open interviews with triggering questions Theoretical approach: phenomenology Data analysis: phenomenology	3	Profession: psychologists Practice setting: clinical psychology Years in practice: ND Age: ND
Tzeng, 2009 Taiwan	To describe suicide-related care dilemmas experienced by psychiatric nurses and how they respond to suicidal patients.	Techniques/instruments: participant observation and individual interviews Theoretical approach: focused ethnography Data analysis: Hammersley and Atkinson's analytic induction techniques	18	Profession: psychiatric nurses Practice setting: medical center (hospital) Years in practice: 1-8 years Age: 25-38 years old

Høifødt, 2007 Norway	To shed light on the meaning of newly educated physicians' lived experiences of learning processes related to treating suicidal patients.	Techniques/instruments: narrative in-depth interviews/semi-structured interview Theoretical approach: phenomenological-hermeneutical Data analysis: phenomenological-hermeneutical (Ricoeur)	13	Profession: physicians Practice setting: general practice and hospitals Years in practice: newly educated (medical school: about 2 years; internship: about 6 months) Age: about 30 years of age
Ting, 2006 USA	To assess the reactions experienced by a group of mental health social workers following a patient's death by suicide.	Techniques/instruments: semi-structured telephone interviews/interviewer's journal Theoretical approach: phenomenology Data analysis: grounded theory	25	Profession: clinical social workers Practice setting: private practice, nonprofit organizations, community mental health clinics, hospital-based agencies, state and government agencies, insurance companies, employee assistance programs. Years in practice: 9-34 years Age: 37- 69 years old
Sanders, 2005 USA	To expand the understanding of the reactions of social workers to patient's death by suicide.	Techniques/instruments: five-page self-report questionnaire, containing both closed-ended and open-ended questions Theoretical approach: ND Data analysis: premises for qualitative data analysis outlined by Padgett (1998)/constant comparative analysis (Strauss & Corbin)	132	Profession: social workers Practice setting: mental health (majority: private practice) Years in practice: 19 years (average) Age: 25-66 years old (mean age: 52)
Gilje, 2005 Norway	To describe nurses' responses to suicidal psychiatric inpatients.	Techniques/instruments: secondary analysis of textual data from interviews Theoretical approach: ND Data analysis: detailed thematic analysis selective thematic analysis (van Manen)	19	Profession: psychiatric nurses Practice setting: psychiatric hospital Years in practice: ND Age: ND

ND = not described.

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Box S2 Quality appraisal of included studies according to the Critical Appraisal Skills Programme (CASP)

First author and year	1	2	3	4	5	6	7	8	9	10
Morrissey, 2021	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Rytterström, 2020	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Malgarezi, 2020	✓	✓	✓	✓	✓	?	✓	✓	✓	✓
Podlogar, 2020	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Vandewalle, 2020	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Ferreira, 2019	✓	✓	✓	✓	✓	?	✓	✓	✓	✓
Sun, 2019	✓	✓	✓	✓	✓	?	✓	✓	✓	✓
Morrissey, 2019	✓	✓	✓	✓	✓	?	✓	✓	✓	✓
Callirgos, 2018	✓	✓	✓	✓	✓	?	?	✓	✓	✓
Jansson, 2018	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Goldstone, 2018	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Hultsjö, 2018	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Aherne, 2017	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Vedana, 2017	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Hagen, 2017	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Zana, 2013	✓	✓	✓	?	✓	x	✓	✓	✓	✓
Tzeng, 2009	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Høifødt, 2007	✓	✓	✓	✓	✓	?	✓	✓	✓	✓
Ting, 2006	✓	✓	✓	✓	✓	✓	?	✓	✓	✓
Sanders, 2005	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Gilje, 2005	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

✓ = yes; ? = can't tell; X = no.

1. Was there a clear statement of the aims of the research?
2. Is a qualitative methodology appropriate?
3. Was the research design appropriate to address the aims of the research?
4. Was the recruitment strategy appropriate to the aims of the research?
5. Were the data collected in a way that addressed the research issue?
6. Has the relationship between researcher and participants been adequately considered?
7. Have ethical issues been taken into consideration?
8. Was the data analysis sufficiently rigorous?
9. Is there a clear statement of findings?
10. How valuable is the research?

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Box S3 Codes and themes generated by the process of thematic synthesis.

Initial codes (Line-by-line coding)	**Descriptive themes**	**Analytical theme**
Stress/emotional intensity of working with suicide	Coping with adverse experiences	Bittersweet experiences of personal and professional transformations
Confused, disorganized, numb, awkward		
Limited/powerless/frustrated/helpless/hopeless		
Guilt/self-blame		
Fear and apprehension		
Difficult, challenging, and complex		
Worries/concerns		
Tiring and devitalizing		
Feeling depressed/sad/upset/grief		
Anxiety		
Rage/anger/irritation/betrayal		
Discomfort		
Trauma and shock		
Intrusion/Feeling invaded and exposed		
Loneliness/isolation		
Feeling disappointed		
Emptiness and nothingness		
Anguish		
Pain		
Denial and disbelief		
Surprise and unawareness		
Shame		
Condemnatory and discriminatory attitudes towards patients		
Empathy/compassion/respect/altruism/patience	Coming across fortunate experiences	
Feeling capable/self-confident		
Relief (after patient´s suicide/when therapeutic connection happens)		
Sense of reconciliation/justification		
Feelings of hope		
Feeling grateful		
Mental health care professional self-care/supervision/debrief	Professional-personal implications	
Mediating boundaries		
Responsibility (for correct decisions)		
Avoidant behaviors		
Urge for therapeutic connection		
Learning from client suicide		