Coping with Bereavement through Suicide

The suicide of someone we care for, can be one of the most distressing events in the professional lives of workers across health and social care sectors. It can affect people not only on a professional, rational level, but also deeply on a personal and emotional level. Emotional reactions differ widely. Some workers may begin to doubt their competency in treating and supporting young people and their families, as well as generally questioning their abilities and knowledge. Other professionals may deny any involvement or emotional reaction to the suicide. Unresolved emotional experiences within professionals can have a long-term effect and be harmful for him/her as well as future clients.

An unexpected death can often leave us with unanswerable questions, and complicated emotions. People's reactions to someone taking their own life often include:

- Anger
- Defensiveness
- Depression and Anxiety
- Despair
- Disbelief
- Fear
- Guilt
- Numbness
- Physical Reactions

- Questioning- 'why?' and 'what if?'
- Rejection
- Relief
- Sadness
- Searching
- Sense of acceptance
- Shame
- Shock
- Stigma
- Suicidal thoughts

There is no 'right' way to feel after someone close to you has ended their life. We all process death, and grieve, differently. The information contained within this document is intended to help you understand some of the normal reactions people go through following a suicide. It also offers some guidance to help through the process of grieving.

- Being bereaved by suicide has been described as 'grief with the volume turned up'. Much of what you may be feeling now would be the same if the person close to you had died suddenly or after a long illness. Yet people who have been bereaved say a suicide seems to intensify the normal responses to loss. For example, you may feel a sharper guilt over your own actions, a more bitter blame towards someone else who you feel could have prevented the suicide, stronger anger at the person who died, or a deeper despair that someone close to you has died this way.
- Each person will have their own response to a death by suicide of someone they know. It is important to understand and respect those differences. Some people may react and need to talk and others may not. It is important to respect each other's ways of coping; but also to make sure that you reach out to people in need, and let it be known that you are available and open to talk.
- It's common to experience shock and disbelief upon finding out about a suicide. A person's suicide often leaves many questions unanswered. It is very frustrating to not have answers that explain why someone would take their own life. Even when survivors learn and understand the factors related to the suicide, such as depressive illness, no one ever can fully answer the "why" the suicide happened. It is normal to struggle with questions about 'why' this happened.
- Often people develop feelings of guilt surrounding the suicide, believing that somehow they should have recognized the threat and that they could have done something to prevent the suicide. These feelings are normal and common, but are most often not truly justified.

- Anger is a common feeling that people may have after someone has ended their life. A person
 may feel emotionally rejected, made the object of blame or speculations, or left to handle the
 emotional and practical challenges of a death by suicide. Anger is often mixed with grief and
 can feel confusing and unclear. Suicide usually produces more anger than any other type of
 death.
- Intense sadness is a normal part of the grieving process. This sadness, especially when mixed with guilt and anger, can seem overwhelming. It is a natural part of the process, and it should fade over time.
- A common reaction is to blame those close to the victim, because they 'should've seen the warning signs' or 'could've prevented the act'. Although an understandable reaction to grief, it is incorrect and unwarranted and could compound the grief of those who are left behind.

Some ideas about Supporting a Grieving Co-Worker:

- Showing compassion through our words and actions.
- Allow the person to express his or her feelings openly. Those who are grieving need to work through their feelings and often do so by sharing their thoughts and feelings with others.
- Be non-judgmental about the other person's feelings. Each person has his or her own feelings about death and suicide.
- Be mindful of difficult dates. The day or date of the suicide can be especially difficult for the next six months for survivors.
- If a grieving person is expressing suicidal feelings, strongly encourage them to get immediate help.

Some ideas for Helping Yourself:

- Practising self-compassion. Allowing yourself the time you need to grieve, and continuing to practice good self-care through this process.
- Ask for support from your friends and family. Someone you know has died, and it is natural to feel that loss.
- Talk about your feelings with people who can be non-judgmental and supportive.
- Seek out your co-workers who are having similar feelings, as they might best understand how you feel.
- Take advantage of support services that are made available to you.
- Seek additional support if you feel you are having a difficult time coping with the suicide. If you
 are currently in treatment for depression or other psychological conditions, it may be a good
 idea to contact your doctor or therapist if you are having trouble handling what has happened.
- Other supportive services include your Employee Assistance Programme (0808 168 2143), your family doctor, clergy, Samaritans (116 123), and the Cruse Bereavement Support Line (0808 808 1677).

If you continue to remain worried about the impact upon you professionally and personally, please contact the Clinical Psychologist supporting your team, who will be happy to arrange a 1:1 session to discuss this further, and explore potential sources of support.