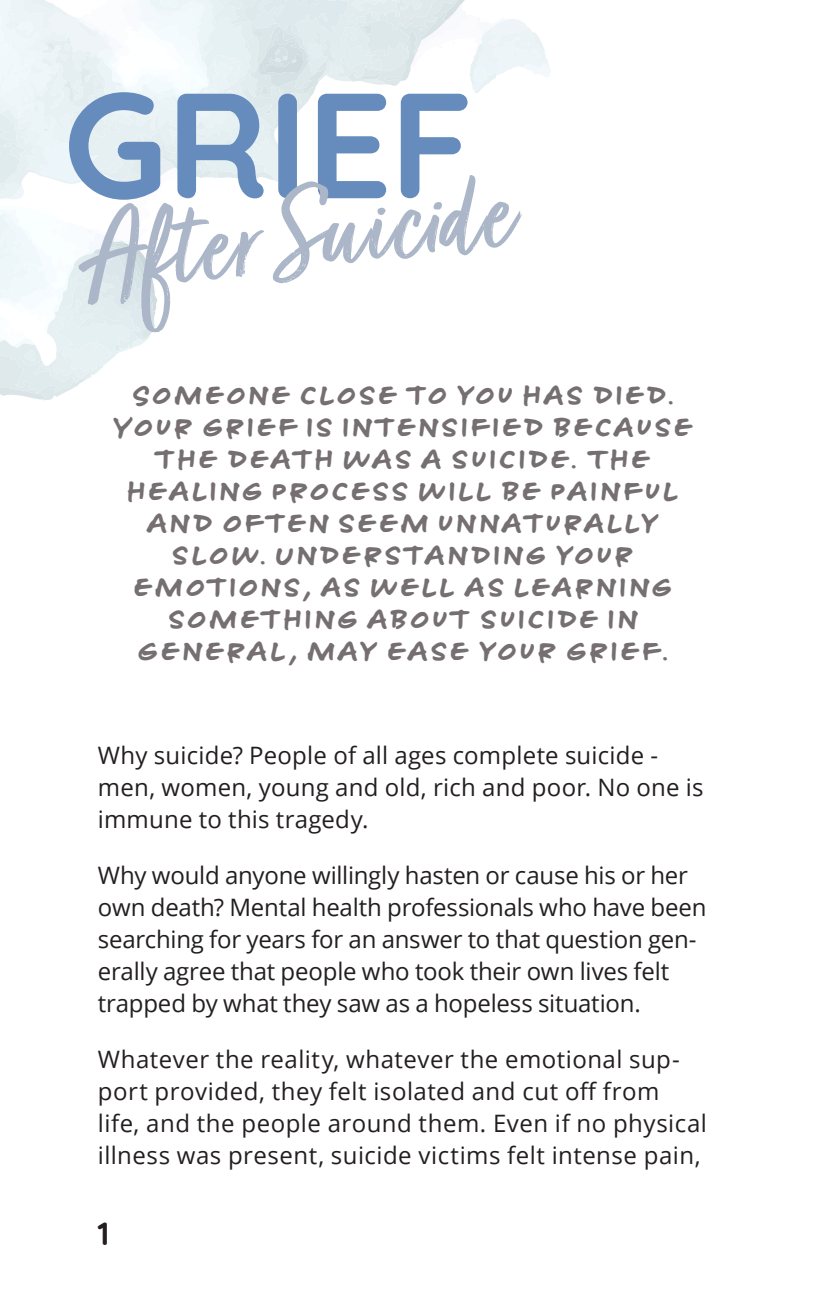


GRIEF

After Suicide

Friends FOR
SURVIVAL

A NATIONAL OUTREACH PROGRAM FOR
SURVIVORS AFTER A SUICIDE DEATH



GRIEF

After Suicide

SOMEONE CLOSE TO YOU HAS DIED. YOUR GRIEF IS INTENSIFIED BECAUSE THE DEATH WAS A SUICIDE. THE HEALING PROCESS WILL BE PAINFUL AND OFTEN SEEM UNNATURALLY SLOW. UNDERSTANDING YOUR EMOTIONS, AS WELL AS LEARNING SOMETHING ABOUT SUICIDE IN GENERAL, MAY EASE YOUR GRIEF.

Why suicide? People of all ages complete suicide - men, women, young and old, rich and poor. No one is immune to this tragedy.

Why would anyone willingly hasten or cause his or her own death? Mental health professionals who have been searching for years for an answer to that question generally agree that people who took their own lives felt trapped by what they saw as a hopeless situation.

Whatever the reality, whatever the emotional support provided, they felt isolated and cut off from life, and the people around them. Even if no physical illness was present, suicide victims felt intense pain,

anguish, and hopelessness. John Hewett, author of *After Suicide*, says, "He or she probably wasn't choosing death as much as choosing to end this unbearable pain."

Were there financial burdens that couldn't be met? Marriage or family problems? Divorce? Scholastic goals that weren't achieved? Loss of a special friendship? The death of a close friend or spouse? A combination of these or other circumstances could have precipitated suicide, or it could have been a response to a physiological depression.

Sometimes there is no apparent causes for suicide. No matter how long and hard you search for a reason, you won't be able to answer the "WHY" that haunts you.

Each suicide is different, regardless of the generalizations about the "whys", and there may be no way you will completely understand the suicide victim's thought process.

As you look for answers and understanding, you also need to deal with your feelings of shock, anger and guilt.

The intensity of your feelings will depend on how close you were to the deceased and the degree of involvement you had with his or her life. As each suicide is different, your reaction, healing and coping process will also be unique. The general observations that follow may help you deal with your grief.

INITIAL SHOCK

(THIS ISN'T HAPPENING!)

Shock is the first reaction to death. You may feel numb for a while, perhaps unable to follow a normal daily routine. This shock can be healthy, protecting you from the initial pain of the loss, and it may help you get through funeral arrangements and services. It may last a few days or go on for several weeks. Take some time to be alone, if that's what you want, but it is important to be with other people and to return to your normal routine.

After the initial shock you may feel angry, guilty or sad. These feelings may overwhelm you immediately, or they may surface in the weeks, months and years ahead. You may handle them well initially only to later have them return for no apparent reason. These feelings, and the helplessness that comes with them, will pass. Try to understand and accept the things you feel. It is okay, it is healthy and it is all part of the healing and coping process.

ANGER

(WHY AM I SO ANGRY?)

Your anger with the deceased is normal when the manner of death is suicide. The deceased has thrown your emotions into turmoil, and caused pain for you and for others you care about.

You may experience anger, often directed at the deceased: "How could he do this to me?" If the deceased was receiving psychiatric or medical care, you may ask: "Why didn't *they* prevent it?" If you believe in God, you may even find yourself angry with him for allowing this to happen. The anger may be self-directed: "What could I have done?" or "Why wasn't I there?"

Don't try to deny or hide this anger. It is a natural consequence of the hurt and rejection you feel. If you deny your anger, it will eventually come out in other, possibly more destructive ways and it will prolong the healing process.

You need to find someone you can talk to about this feeling - perhaps a close friend, a family member, mental health professional, or a faith community leader. You may need to release your anger physically - take long brisk walks, or do any exercise that is reasonable for your physical capabilities.

Anger with the medical or mental health profession can occur if the suicide victim was receiving treatment or therapy. Although you may have had experience with someone unable to help, medical and mental health professionals are dedicated and well-trained, and provide help for many people. These professionals will be the first to recognize that your anger is a valid emotion.

If you believe in God, you can share your feelings with a faith community leader, even if you don't have any close religious ties.

GUILT

(IF ONLY I HAD DONE SOMETHING MORE...)

Perhaps the most intense anger you experience will be the way you feel about yourself. This anger is closely linked with feelings of guilt. "But I just talked with him!" "Why didn't I listen?" "If only I..." etc.

If the deceased was someone with whom you had regular close contact, your guilt will possibly be intense. And if the death came as a complete surprise, you will be desperately searching for reasons. A person who completes suicide has usually given some clues, and as you look back on the last few months (or years) maybe you will recognize some hints you missed earlier. You will wish you'd recognized the problem early enough to do something about it.

Perhaps you were aware of the deceased's suicidal feelings and you did try to help. You may have thought the feelings had passed because in the time preceding the death you noticed he or she seemed to be feeling a lot better and you relaxed your concern. You need to know it is not uncommon for a suicidal person to feel better once the decision to die has been made. The problem has not been resolved, but the victim has found an answer - suicide.

As you are trying to cope with your guilt feelings, try not to criticize yourself too harshly for your behaviour toward the victim while he or she was alive. You might wish that you could have found the right solutions or offered more support. Thoughts like: "I shouldn't have gone to the movie," or "I should have

been there," may constantly be running through your head. If you had stayed home, or if you had been with them, the suicide death could and possibly would have happened at another time. If you feel your presence at a particular time could have prevented the death, you are assuming too much. Of course, we all like to think we can help our troubled friends and families, and we do try. But the person determined to complete suicide is likely to accomplish it.

If you realistically feel there was something you could have done, face it, think about it, and accept it. Your loved one cannot be helped any more, and you need to go on with your life. You can learn from and grow with your experience.

Some people believe an individual has a right to end their life. The term "rational suicide" is used to describe a suicide that has been thought about and planned, perhaps as a way of dealing with a painful terminal illness. This is an area of controversy, and whether you accept it or not, what you need to think about is that the suicide was an individual decision - rational or not. It was his or her choice, not yours. You may intellectually accept this long before you emotionally accept it.

What value does your guilt or anger have in the healing process and beyond? Rather than letting the hurt isolate you, share your time and understanding with someone else who is hurting. You can provide friendship and support. Get involved with others, actively support suicide prevention services in your area, or any worth-while cause that means something to you.

STIGMA

(WHAT DO I TELL PEOPLE?)

The stigma or shame you may think others associate with suicide stems in part from its historical and religious interpretations.

Early Roman and English laws established suicide as a crime. Additionally, the Bible contains no prohibition against suicide, however, the early Christian church equated suicide with murder. Today very few laws exist that equate suicide with crime, and those few are rarely invoked.

If your friends seem uncomfortable talking about the death, or even being with you, it's most likely the type of discomfort felt when facing death of any kind, or a reaction to your discomfort. And if you are not comfortable relating the circumstances to others, don't. Your close friends will already know how you feel. Let others simply respond to the death of your loved one. You don't need to share the complete story with those not close to you any more than you would share all the details of your personal life with them.

However, it is important that you confront the word "suicide". Practice thinking, hearing and saying it. Don't try to do this alone. You need someone, or several people, with whom you can share your feelings. For a few days, possibly a week or two, you may want to isolate yourself and take time to recover by yourself. But don't cut yourself off for too long.

Let friends and relatives help you.

No one will have any magic answers for you. No one will be able to make you hurt less. But the healing and coping process requires that you talk about your feelings - about the sadness, anger, hurt and guilt you are carrying around inside of you.

Friends may provide all the emotional support you need, or you may want to join a mutual support group and meet with others who have experienced the suicide of a loved one.

RELIEF (I'M ALMOST GLAD IT'S OVER.)

If you were closely involved with the deceased, perhaps their pain and suffering had become an emotional drain for you. You may have felt unfairly burdened, or just exhausted from being involved with an intense situation. Now you may be feeling a sense of relief that you don't have that burden any more, or perhaps relief that the deceased's pain has finally ended. A sense of relief when a difficult situation ends is normal. When the "end" is an unhappy one, the relief can still be there, but now it is colored with guilt. Remember, don't expect perfection of yourself. Accept your relief and don't let it grow to inappropriate guilt.

The late psychiatrist, Dr. Theodore Reik, said: "One can feel sorry for something without feeling guilty." Remember, too, that the suicide victim saw death as the only relief possible at that particular time.

TALKING TO CHILDREN

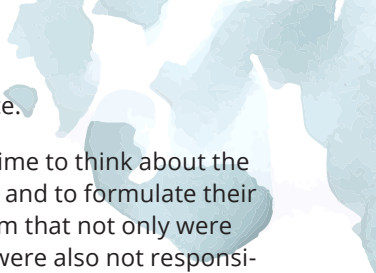
If the deceased was a parent, or if there are children who were close to the deceased, talking to the children about death may be one of the most difficult tasks you face. You can't ignore their needs, especially if you are the primary adult in their lives.

The National Institute of Mental Health says: "By talking to our children about death, we may discover what they know and do not know - if they have misconceptions, fears or worries. We can help them by providing needed information, comfort and understanding. Talk does not solve all problems, but without talk we are even more limited in our ability to help."

Even very young children will be aware of the death of someone in their lives, and they need an opportunity to ask questions and get truthful answers. If you're reluctant to talk about suicide - what it means and why it happened - remember that the children are likely to hear about it from other sources, and their confusion will be intensified if they have not had some communication with you.

They need assurance that YOU will be with them for a long time and that your sadness over the death will not be reason for your death.

Older children may be more aware of the circumstances surrounding the death, but may be less open about sharing their feelings. They may also feel more responsible than young children, and search harder for answers. They may be more willing to blame



someone like you, for instance.

All children may need some time to think about the death, to probe their feelings and to formulate their own questions. Reassure them that not only were they not the cause, but they were also not responsible for knowing about or stopping the suicide death. The young child's natural openness may make it easier for him or her to talk about the death. An older child's growing sense of maturity may prevent him or her from sharing feelings. Some children, regardless of age, won't ask questions at all and you need to encourage communication.

**AS COMFORTABLE AS IT MAY BE FOR YOU
TO "LET IT RIDE", DON'T DO IT.**

**CHILDREN, LIKE ADULTS, NEED TO TALK
ABOUT AND SHARE THEIR FEELINGS
ABOUT THE SUICIDE. THEIR REACTION
MAY BE SIMILAR TO YOURS. THEY MAY
SEEM INSENSITIVE OR THEY MAY SHOW
MORE ANGER, HURT AND GUILT.**

**YOU NEED TO ACCEPT THEIR REACTIONS,
WHATEVER THEY ARE, EVEN IF YOU DON'T
FULLY UNDERSTAND THEM.**

If the communication with a child is difficult, make it a point to talk with people that the child has contact with, especially teachers. Teachers need to know

Talking to Children (continued)...

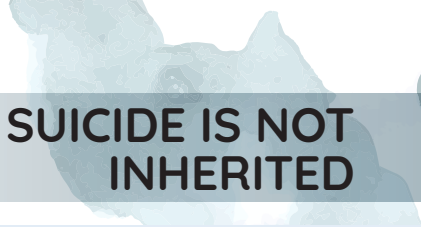
what the child is reacting to and they could help you pinpoint emotional responses that may be emerging, such as a change in behavior at school.

Whether the children are preschool or teen, be honest and listen to what they say as well as to what they do. Make time to be with them. Accept their feelings and share your own. When they ask questions you don't have answers for, don't ignore those questions or make up answers. Especially when the death is a suicide, a lot of answers will be "I don't know" or "I don't understand."

Your library or bookstore may be able to recommend some reading materials that will help you discuss death with your children, or books to read to them.

Seek out caring people. Find relatives and friends who can understand your children's feelings of loss. Join support groups with others who are experiencing similar losses. Seek outside help when necessary. If the child's grief seems like it is too much to bear, seek professional assistance from a mental health professional.

Take care of your own emotional well-being too. As the adult, get help if you need it. Especially if your own grief is keeping you from supporting your child. Talk to a friend, a faith community leader, a doctor or mental health professional.



SUICIDE IS NOT INHERITED

Suicide may occur more than once within a family, but it is not something that is inherited.

In a family, or even among friends, suicide may establish a destructive model or a behavior to imitate. Thoughts of your own suicide are not an uncommon reaction to the suicide of someone you love and may surface immediately, or years later. A fleeting thought now and then shouldn't cause alarm. But extended depression and continuing suicidal thoughts need immediate attention.

Do not hesitate to seek out professional help if your problems seem more than you can handle alone. There are many resources that you can utilize. The suicide helpline in your area may be able to offer you some understanding and support over the telephone. Often these helplines are answered 24 hours a day by people trained to help you through the rough spots. They will understand your feelings and help you find ways to work things out.

If you need professional counseling, your doctor, faith community leader or mental health association can help you find appropriate services. Remember, you may be blaming yourself in some way, but there are people who share your sorrow and can help you see things more clearly.

LOOKING AHEAD

(IT WILL GET BETTER...)

Your grief and sadness will eventually subside, and you will be able to pick up the pieces of your life and rebuild.

There will be times, however, when these feelings will surface very strongly. Holidays or other special times may renew your sadness.

Especially for the first year, you will need to decide if you want to maintain traditions you shared with the deceased or if you want new settings and activities to ease painful memories. On the anniversary of the death, you may want to be alone, attend religious services, or observe the day in a manner what means something special to you. You may prefer to spend that time with someone close to you or make plans for a family gathering.

You cannot avoid these periods of sadness, but whenever possible, try to plan ahead so that they won't be overwhelming.

And sometimes, your loneliness and sadness may come back for no special reason. Be prepared to face this also.

**YOU CANNOT EXPECT TO FORGET,
BUT YOU WILL BE ABLE TO COPE.**

RESOURCES

(YOU ARE NOT IN THIS ALONE...)

ALLIANCE OF HOPE

Offering an online discussion forum where you can connect with others who've lost a loved one to suicide. www.allianceofhope.org

AMERICAN ASSOCIATION OF SUICIDOLOGY (AAS)

www.suicidology.org
202-237-2280

AMERICAN FOUNDATION FOR SUICIDE PREVENTION (AFSP)

www.afsp.org
888-333-2377

NATIONAL SUICIDE PREVENTION LIFELINE

(Crisis Line) will connect to the crisis line nearest you 24 hours a day, 7 days a week.
www.suicidepreventionlifeline.org
" 988 "

VETERANS CRISIS LINE

www.veteranscrisisline.net
800-273-8255, Press 1

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Friends FOR SURVIVAL

Friends For Survival, Inc. is a 501(c) (3) tax- exempt charitable, non-profit organization available to those who are grieving a suicide death of family or friends. We also assist professionals who work with those who are grieving a suicide tragedy.

Organized by and for survivors, Friends for Survival has been offering services since 1983.

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