Help is at Hand

Support after someone may have died by suicide in Northern Ireland
This guide is dedicated to those grieving the death of someone they love.

This guide has been designed to help you to choose when and what sections are most appropriate for you. It is not intended as something you need to read through from cover to cover.

Your family, friends or colleagues may also find it helpful to look through this guide so that they can begin to try and understand a little of what you are going through and how to find the right help.

Some sections focus on how you may be feeling; others on what may be happening. Throughout are some suggestions for sources of further support. There are also quotes from people who have been bereaved and who have experienced some of what you may be going through.

A note about language
We have used the expressions ‘died by suicide’ and ‘taken their own life’. We chose these terms because they seem most readily accepted, but we recognise people will have their own preferred language. We avoided the phrase ‘commit suicide’ since it implies people who die this way committed a crime, which is not the case.

There is no simple way to describe the differing relationships people may have had with the person who died (‘loved one’, ‘relative or friend’, ‘someone close’, ‘someone important’) so the expression ‘person who died’ has been used throughout. We acknowledge this may sound impersonal but it is not intended to devalue the strength of the relationship.
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**Introduction**

At this time we would like to offer our sincere sympathy to you, your family and friends who have been affected by this sad loss. We acknowledge the pain and distress that is felt after the unexpected death of a loved one.

This guide can only attempt to describe some of what you are going through. It is no substitute for talking things over with people: either those close to you or someone from a local support organisation (see below). It has, however, been put together with the help of people who have been bereaved by suicide and who may have experienced some of what you are now going through.

Death can happen at any time of life. Sometimes it is expected, because of illness or ageing. Sometimes it happens suddenly without any warning. The death of a loved one is often devastating. When someone close dies, the broken emotional ties leave us with a deep sense of sorrow and emptiness.

You may be reading this soon after someone has died, or weeks, months or years afterwards.

‘In the chaos after the death, when I felt so alone, so desperate and so dazed, it helped to read something that described a bit of what I was feeling and what was happening. It felt a little as though there were others out there who were by my side and would know what I was going through.’

Mike, whose partner died

We hope the practical information and guidance outlined in this booklet will help you in the time following the death of your loved one; it addresses the particular needs of those who have experienced an unexpected death. Information on grief and bereavement is included, which we trust will help you in the weeks and months ahead.

Further support can be accessed through your GP or from local support organisations – find them in the services section of www.mindingyourhead.info under the categories ‘bereavement’ or ‘suicide’.

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What you may be feeling

This section focuses on some of the emotions felt by bereaved people and the feelings that are intensified when the death may have been by suicide.
How people grieve

Grief is as unique as you are, and as individual as a fingerprint. Each person will be affected in his or her own way because everyone is different – even in the same family. Each had their own relationship with the person who has died, their own experience of other losses and differing levels of support available.

People have their own ways of expressing feelings. Some find it helpful to share feelings and thoughts. Some find it very hard to cry or to put into words how they are feeling: it doesn’t mean that they are not as distressed as someone who cannot stop crying.

You may find that people suggest how you are or should be feeling: (‘you must be feeling very…’) or tell you to grieve in a particular way (‘you need to…’). It is probably best to accept that this advice is intended kindly, but remember that everyone grieves differently. So listen to yourself first and foremost and find your own way. It is important to remember that there are no set rules or stages and there is no right or wrong way to be feeling.

People may make assumptions that only close family grieve – however many people can be affected. You may be the close friend of the person, a work colleague, or maybe you have been professionally involved in helping before or after the person died. You may not have received the same recognition or understanding of your loss that family members have had yet you may still experience any combination of the feelings described.

Bereaved by suicide

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.
How are you feeling?

People often ask ‘how are you feeling?’ and it can be impossible to answer. When someone dies suddenly you can be left with an overwhelming jumble of feelings and thoughts. Here we explore some of the emotions that are commonly felt when someone you care about dies.

Anger

People who have been bereaved often feel angry. You may be angry with the person for dying in this way and leaving so much pain behind or because you have been left to deal with lots of practical matters and you feel ill-prepared. Or you may be angry with someone who you feel let them down, or with those who you believe should have taken better care of them. If you have a faith, you may be angry with your God. Trying to find someone to blame for the death is also a common response. Anger may occasionally feel overwhelming and can last, or go and then return, for a long time.

‘My attitude changed to include feelings of anger about what she had done when I saw how her parents were suffering. I was also angry with myself for not telling her mother that I was concerned about her. At the time I felt I needed to be loyal to my friend.’

Vicky, whose friend died

The emotions are listed alphabetically as there is no order or priority to how anyone may be feeling.

Anger
Defensiveness
Depression and anxiety
Despair
Disbelief
Fear
Guilt
Numbness
Physical reactions
Pining
Questioning – ‘what if?’ and ‘why?’
Rejection
Relief
Sadness
Searching
Sense of acceptance
Shame
Shock
Stigma
Suicidal thoughts
‘I wonder about when and how the dominoes had started to fall down and what actions might have stopped setting them into motion. I turn over in my mind what would have happened if we hadn’t moved house, if I hadn’t left my job, if we hadn’t gone on holiday two months before she died, if I had given her more attention, or more space, said more, said less...’
Roger, whose wife died
Defensiveness
The uncertainty over how people will react can lead you to put up defences against them in case they say something upsetting or ask intrusive questions. Sometimes, it can be hard to let this guard down and talk openly about how you are feeling. Some people say it can be easier to talk with people who have also been bereaved by suicide. You’ll find contact details for bereavement support organisations on the website www.mindingyourhead.info.

Depression and anxiety
Sometimes, people feel they are losing control of their mental health because the grief is so intense. This may be a feeling that comes and goes. Sometimes, but not always, you may feel these feelings have become deep-rooted. It is important to speak to your GP for their help or to one of the mental health support organisations listed on www.mindingyourhead.info if you think this may be happening to you.

Disbelief
Some people find it hard to accept someone has died, and that the person will no longer be part of their lives. It is natural to struggle to believe what has happened, especially if the person may have died by suicide. This feeling can fade as the reality of their death sinks in, but you may still find yourself doubting what has happened for some time.

‘I spent a large amount of time trying to ‘solve’ why my son had decided to take his life. I internalised all these feelings which made things worse and worse for me. I just wanted to curl up in a ball and let life pass me by. I ended up reaching crisis point and was desperately trying to escape from the permanent anguish I felt. It was at this point that I decided I needed to share how I felt. That has been the game changer. Since I started talking about what I feel I have found the strength to move forward.’
Dean, whose son died

Despair
People bereaved by suicide may question whether they can face living without the person who has died. For some, this may be a fleeting thought; for others, it can become a deep despair that leads to thoughts of suicide. If this is how it feels for you, please seek support from those around you or one of the organisations listed on www.mindingyourhead.info.
Fear
Grief can feel frightening; a shaky uncertainty because everything has changed. Sometimes people are afraid about what life will be like without the person who has died or about the impact the death will have on others. It can be difficult to imagine a different future.

Guilt
Some people may feel guilty. You could be feeling guilty for something you did or did not do, said or did not say. It may help to remember that only the person who died knows why they could no longer bear to live. Feeling overwhelming guilt may be one of the main reasons that bereavement through suicide is so painful — and it isn’t a feeling that can be diminished by someone reminding you of all the good things you did for the person who died. The guilt felt by the bereaved can sometimes feel like failure.

Numbness
Some find it hard to feel anything. People who experience this numbness can feel guilty for not expressing grief through crying or talking, especially when others around them may find it easier. For some, it can take a while for pain to break through. This can make it hard to answer well-meaning questions such as ‘how are you feeling?’ because the answer is sometimes nothing.

Physical reactions
After someone has died, it is quite common for those left behind to feel physically unwell with headaches, upset stomachs and sickness. Because you are feeling low, you may find yourself being less resilient against colds, for example, than usual. You may feel that you don’t want to eat, or that you eat and drink more as a means of distraction. You may have trouble falling asleep or staying asleep or you may want to sleep all day.

Pining
There is a particular sadness after someone has died that can take the form of a desperate pining for that person. It can be a physical sensation: wanting to see, touch, hold or smell them and it can feel like a heart-breaking longing for them to return, even for just a moment.

‘His death consumed every minute of every hour of every day and on the rare occasions I became distracted from these thoughts, I felt guilty for not feeling “the pain”.’
Shirley, whose son died
Questioning – What if?
When people are bereaved by suicide, they may feel that they should or could have prevented it. Everyone who has lost someone to suicide will have asked themselves what they missed or could have done differently. Last conversations can replay in your head. You may continue to question yourself and those around you for days, weeks – even years. It is very likely that you were offering all your support, love and care. Equally, people who take their lives may not have shown despair to those around them.

‘So I have made a pact with myself, which some days I can stick to, and other days not, that I will focus on remembering with joy all the good times I enjoyed and not the guilt-laden “what ifs” that can’t bring me anything but pain.’
Amy, whose mother died

Questioning – Why?
People bereaved by suicide may be left with a huge unanswered question: Why? This is a question that people may go over and over, and without an answer, it may never go away entirely. The causes of suicide are usually complicated. Different experiences and incidences affect people in different ways. In truth, the person who died is the only one who knew why it felt impossible to live.

‘After a while I realised I had to give him ownership of his decision, in whatever state of mind he’d been in at the time because, even if I had all the answers to the whys, the reality, the loss, the grief, were still the same.’
Angela, whose partner died

Rejection
However much you are trying to understand what happened, you may feel rejected and also that your love and care was ignored by the person who died. This can be especially true if you have been supporting the person for a long time through a period of mental ill health.

You may feel rejected by people close to you or in your community. Sometimes people seem unable to cope with what has happened and withdraw when you need them, leaving you feeling isolated. Some don’t know how to react and are frightened of doing or saying the wrong thing and, as a result, they don’t make contact and seemingly ignore you.
Relief
For some, a person’s death feels like a relief – if they have been in deep distress or pain for a long time or if you have spent a long time worrying that they might die. This is a natural response to a long period of tension and stress and does not mean that you didn’t care.

Sadness
A feeling of profound sadness may be the most frequent response to the death of someone close. This can last for years and sit alongside other reactions. You may feel you want the person back and life to return to how it once was. Sometimes it might feel like people are trying to tell you that you are angry, shocked or bewildered when what you feel is deep sadness.

Searching
People who have been bereaved sometimes search for the person who has died. For example, you may want to go to where the person used to spend time (work, school, or a favourite place) in case they will be there. Equally, some may want to avoid such places, now and in the future. It is also quite common to think you have caught a glimpse of the person who has died, for them to appear to you in a dream or to find yourself calling their name.

Sense of acceptance
There is the possibility that you accept the person’s death as the choice they made given the situation that they were in. People who have been bereaved after a friend or relative has been suffering may feel some sense of acceptance that they decided to end the pain, alongside their own sadness at what has happened.

‘When I got the phone call, I was not surprised. I knew my friend was in trouble and I had tried to support her as much as I could, advising her to get help and so on. Although I was devastated, I accepted the decision she had made.’
Vicky, whose friend died

Shame
It may be that you have a painful feeling of shame or distress; perhaps thinking that you have done something wrong or did not do enough to prevent the death. You may also feel ashamed because of the way that other people talk about suicide and the stigma that persists in our society.
‘We had gone through so much together and I’d given him so much support. Yet it’s as if I didn’t give enough. Or perhaps I didn’t support him in the right way? Did he think I didn’t care? Did he not care about me like I thought he did?’

Faye, whose husband died
Shock
The feeling of shock can last a long time and you may experience it in many ways. It may feel as if you have lost your ability to breathe normally - as if someone has punched a hole through you or you have taken a deep breath in and then can’t breathe out. Or you may feel you have lost your ability to complete daily tasks and that you are detached from what is going on around you.

Stigma
Many find bereavement by suicide marks them out and complicates the way in which people respond. Some feel it would be easier to explain the death in a different way. Others may not know what to say. People bereaved by suicide often say they feel judged in a way that would not happen if their loved one had died in a different way. There is a stigma in society over talking about suicide and this may make people avoid the subject.

‘I feel sometimes that people define my mum’s life by her death. She’s stigmatised by the label “suicide”. If someone dies from cancer or a car crash they are not blamed, nor have their death held against them like a character flaw. But with suicide I felt I had to explain how kind, lovely and giving she was. How she wasn’t selfish, how she hadn’t done this for attention but because depression had robbed her of her will to live.’
Lucy, whose mother died

Suicidal thoughts
Some people bereaved by suicide may start to have suicidal thoughts. If you find this happening to you, please reach out for help. Please share how you are feeling with someone and give them permission to keep a close eye on you while you are feeling vulnerable and desperate.

‘I too felt suicidal. Then the pangs of guilt would smash through my head about how could I feel that way, when my other two boys and husband needed me now more than ever.’
Shirley, whose son died

Talk to someone now
If you are in distress or despair, or know someone who is, you can contact Lifeline free on 0808 808 8000 or Samaritans free on 116 123 (both numbers are free from landlines and mobiles in Northern Ireland). You can also ask your GP for support.

If you need immediate help dial 999.
What might (and might not) help

People who have been bereaved say that the following things can help:

- **Expressing your feelings and thoughts:** finding ways to let out your feelings and having people around who can listen to you and accept you.
- **Making opportunities to remember:** this may mean talking about the person, looking at pictures, and videos of them, going to places that remind you of them, creating a box with physical memories (tickets, cards, pictures etc.), writing a journal or blog about them, or continuing to do activities you did together.
- **Developing ‘rituals’:** having a way of marking their life, for example by visiting a special place, by creating a lasting memorial or by a simple act such as lighting a candle at the same time each week.
- **Participating in activities:** continuing to do things you have previously enjoyed, such as sports, social events or music.
- **Putting your feelings on paper:** you may not feel ready to talk to anyone, but writing down your thoughts and feelings may help you.
- **Looking after yourself:** eating well and getting sufficient sleep.
- **Spending time outside:** getting out of the house for a change of scene, connecting with nature or doing exercise.
- **Meeting, speaking with or reading the words of other people who have been bereaved:** you can find a range of support organisations on www.mindingyourhead.info.
- **Developing an ‘emotional first aid kit’:** collecting together some things that can help when you are feeling sad or mad or bad (a music play list, your favourite chocolate, a ball to kick or pillow to punch).

People who have been bereaved say that the following things might not help:

- **Avoiding talking about what has happened:** although it may be really difficult to start with, talking to someone you can trust can make all the difference.
- **Drinking more, taking drugs:** it can be tempting to try and blot out the pain of what has happened, but the short term oblivion doesn’t take away the sadness and is likely to make you feel worse.
- **Hurrying to make big decisions:** it may be better to let some time pass before making major changes to your life.
- **Taking risks:** after someone close has died you may feel ‘what’s the point?’ and take risks with your own health, for example by driving too fast. Try and talk to someone you trust if you think you are risking your safety or that of someone else.
- **Not seeking help:** you may feel you can’t ask for help as you are worried it will make you seem weak, or that you shouldn’t bother other people when they are grieving (such as members of your family), or when they are busy (such as your doctor). But how you are feeling is very important, and there are people who want to help. Visit www.mindingyourhead.info for details of organisations that can support you.
What may be happening

When you are faced with the sudden death of someone, and especially in the early days, there will be several practical issues that need to be handled.

This section has information to help guide you through these matters.
Letting people know

One of the first and hardest challenges you could face is letting others know what has happened: these may be family, friends, work colleagues, or neighbours.

You are entitled to tell people when you are ready and to say whatever you want about how the person died. Some say that they found it helpful to be honest from the start as it meant they didn’t have to keep any secrets, or worry about how and when the truth might one day be revealed.

You are also entitled not to answer any questions from other people if you don’t yet feel able, or you feel their questions are inappropriate.

You are likely to find that the people you are telling could be at a loss about what to say to you – and they may say or do thoughtless things in their shock. It may be difficult, but try not to feel offended or let down by their first reactions.

Section 3 provides some guidance on talking to and supporting children and young people after a death by suicide.

Here are some things you could say:

[person’s name] has died…

…I’ll tell you more when I feel able to.

…It is too soon for us to talk about how they died.

…I don’t want to say any more at the moment.

…It looks like they might have taken their own life.

…We cannot imagine what happened. The police think they may have taken their own life, but we don’t know yet.

…We think it was intentional. We knew they had thought about it before and we hoped that they’d find a way through their problems.
Most cases of suicide in Northern Ireland do not result in an inquest, which is a formal examination of the circumstances of a death conducted in court, in public. Bereaved people may wish to contact the coroner involved to enquire of the nature and extent of any investigation without an inquest. The coroner issues a document formally to the local registrar who will then invite a family member to attend the Registrar’s Office to register the death and obtain the death certificate. A PSNI family liaison officer, coroner’s liaison officer or advocacy organisation can help support you through this time.

If the person died in prison or in detention

The Prisoner Ombudsman’s Office has been responsible for investigating deaths in prison custody in Northern Ireland since September 2005. There will also be a police investigation and a coroner’s inquest. The objectives for Ombudsman investigations include establishing the circumstances of the death, examining relevant healthcare issues and ensuring the deceased's family have an opportunity to raise any concerns. As such, when someone dies in prison, the Ombudsman’s Office will be in contact with the family at an early stage.
‘The day she died the police took away some of her things from beside her bed and I remember thinking, “No, I want everything of hers, I don’t want you to take anything”. But they were really careful and we got it all back.’

Amy, whose mother died
All deaths which occur in police detention are automatically referred by the PSNI to the Police Ombudsman for Northern Ireland. Independent investigators from the Ombudsman’s Office will attend the incident at any time of the day or night. Their job is to obtain evidence such as clothing, and to speak to police officers, custody civilian staff, or any other witnesses so they can try to find out what happened and to establish whether any police misconduct or criminality contributed to the death.

**If the person had been in contact with mental health services**

If it is suspected that your loved one has taken their own life, and they have been in contact with mental health services within the 12 months prior to their death, a review of their care will take place, known as a Serious Adverse Incident (SAI) review. An SAI is an incident or event that must be reported to the Health and Social Care Board (HSCB) by the organisation in which the SAI occurred. Someone from the Health and Social Care Trust (HSCT) will discuss with you how the SAI will be reviewed and who will be involved. This process can take 8–12 weeks. You can decide not to participate in the review process but the HSCT will welcome your involvement should you wish to contribute to the SAI review.

You will be supported throughout the review process by a member of HSCT staff who will ensure that you:

- share your experiences
- are offered the opportunity to meet and discuss the review findings.

The HSCT will identify a person whom you can contact should you wish to discuss any aspect of the SAI review.

**Arranging the funeral**

It may be helpful to employ the services of a funeral director. Most funeral directors are available seven days a week and provide a 24 hour on-call service throughout the year. You may have already chosen a funeral director, if not you will find details in Yellow Pages under ‘Funeral Directors’. Funeral directors will help you with many of the tasks required when someone dies.

If a death occurs at the weekend, over a bank holiday or if the coroner is involved, there may be a delay. Do not arrange the date and time of the funeral until you have permission from the coroner.

Children or young people who were close to the person may like to be involved in planning and taking part in the funeral service.

If you wish the services of a minister, priest or faith/belief group representative they will help you plan and prepare for the funeral and provide you with emotional and spiritual support.

Funerals are costly and some people contribute to a payment plan to cover the cost of their funeral. If you are on certain benefits you might qualify for financial help. The registrar, your social worker or funeral director can provide you with more information.
Dealing with the media

Following a loved one’s death by suicide you could be contacted by the media who may wish to report on the death.

You may be approached by a journalist for details about your loved one and the circumstances of their death, particularly if a young person has died or the death has occurred in a public place.

It is important to take the time to consider whether you or your family want to speak to the media. If you decide that you do not wish to be interviewed or to make a statement, you should make this clear.

If you decide that you would like to speak to the media, one way to do this is to prepare a written statement. This can include factual information such as the name, age, occupation/school of your loved one.

Where there has been a death by suicide, the journalist may also ask for specific details on whether your loved one was experiencing problems or had sought help. It is important to give consideration to what information you wish to put into the public domain.

If you have reached a decision to speak directly with the media through an interview, you may want to do this yourself or you could nominate a spokesperson who can speak on behalf of the family. The spokesperson should take time to prepare for the interview – they could ask the journalist for a list of questions they wish to cover in advance and prepare notes as a guide on what they want to say.

Bear in mind that the journalist may not use every piece of information that you have given them. They could also use interviews with others and information that is publicly available, such as photographs and comments from social media pages.

A journalist can also use anything that you have said during interview in their article, so think carefully about what you wish to say publicly. If you feel uncomfortable at any time during the interview, you can bring it to a close.

It is worth noting that if the media have a photograph of your loved one, it can be used at any time – for example at a later date in connection with another death by suicide. There may be no preparation for suddenly seeing a photograph of your loved one in a newspaper or in an online article months after they have died.

Sometimes, appropriate media coverage can feel like a way of sharing the life of a person with a wider audience. Some people choose to talk publicly about what has happened as a way of remembering the person, or to help raise awareness of the issue of suicide to try and prevent other deaths. Remember, it is your decision to do whatever you feel comfortable with.
Media guidelines

Tools and guidance are available for the media to help them when reporting on suicide. Following extensive consultation with journalists and editors throughout the industry, Samaritans and the Irish Association of Suicidology have produced media guidelines for reporting suicide. They provide practical recommendations for reporting suicide across all media. The guidelines are advisory, they are not exhaustive and are not intended to limit press freedom — the aim is to prevent suicides where possible and to help journalists avoid common pitfalls when reporting suicide. The guidelines are available at http://pha.site/med-guidelines

Press standards

The Independent Press Standards Organisation (IPSO) is the independent regulator for the newspaper and magazine industry in the UK. They hold newspapers and magazines to account for their actions, protect individual rights, uphold high standards of journalism and help to maintain freedom of expression for the press. IPSO makes sure that member newspapers and magazines follow the Editors’ Code of Practice.

The Editors’ Code of Practice makes clear that whilst journalists have the right to report legal proceedings, they should act with sympathy and discretion when approaching individuals affected by personal grief or shock and, when reporting cases of suicide, journalists should not report excessive detail of the method of suicide used. The Editors’ Code is available at: https://www.ipso.co.uk/editors-code-of-practice/

You can contact IPSO if you feel you have been subject to intrusive inquiries or if you have concerns about a story you think will be published. IPSO cannot prevent a newspaper publishing a story but can give you specific advice about how the Editors’ Code applies to you. If you feel that an article has breached the Editors’ Code, you can contact IPSO on 0300 123 22 20. IPSO also operates an emergency hotline (07799 903 929) if you are being harassed by a journalist.

Social media

Common social media sites such as Facebook, Twitter, Tumblr, Instagram have different procedures for how to close or ‘memorialise’ (that is, leave untouched) the account of someone who has died. Details on how to do all this should be listed within the help sections of each website.
‘Our grief was so immense that we just switched into auto-pilot to get through all the formalities. We had it explained to us what needed to happen, and we just got on with getting through the funeral. They were almost trivial compared to dealing with the way we felt. I have good family and a few fantastic friends who did any of the immediate things, and we only got involved in decisions when we needed to.’

Doug, whose son died
People/organisations to tell
After someone dies, it can feel as if there is so much to think about and do. A large number of people and organisations need to be informed. The following list may help you determine the relevant people to notify – not all will apply in every case. A family member or close friend could help.

Early contact will help avoid the distress of letters, phone calls and supplies/equipment continuing in the weeks and months ahead.

- GP/district nurse/home help/day care centre
- Other health care professionals, such as optician/dentist/podiatrist
- Provider of medical aids/equipment/supplies
- Any hospital the person was attending
- Solicitor – contact before the funeral to check if there is a will stating person’s wishes about burial or cremation
- Social Security Agency Bereavement Service – regarding reporting a death, benefit eligibility check and making a claim for bereavement benefits and/or funeral payment
- The Northern Ireland Pension Centre – regarding state retirement pension
- School/higher education institutions
- Employer/trade union/pension company

Legal and financial matters
You may be entitled to bereavement benefits after someone has died. These differ depending on your relationship to the person who died (eg spouse/civil partner), your altered responsibilities since they have died (for example, looking after children or grandchildren) and what other benefits you may be receiving already. You may also be entitled to financial help with the cost of the funeral.

The Social Security Agency now has a Bereavement Service which requires only one phone call to:

- report a death to the Social Security Agency
• check if you might be entitled to benefits/financial help
• make a claim for bereavement benefits or funeral payment.

The telephone number is **0800 085 2463**

When you call the Bereavement Service they will process your application over the phone. They will ask you details about the following so have this information available:

• Your contact details, date of birth, and national insurance number
• The date of birth, national insurance number, employment and pension details of the person who died (if the person who died was not your spouse or civil partner and you intend to make a claim for benefits or financial help, you will also need these details for your spouse/civil partner if you have one)
• Any children’s names, dates of birth, residence and benefits
• Any other benefits you are getting
• How you are paid (frequency of payment and account details).

You can call into your local Social Security Office for any information in relation to benefits, or visit www.communities-ni.gov.uk/topics/benefits-and-pensions

Some life insurance policies do not cover deaths by suicide. It is advised however that you contact your insurance company for further advice.
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To whom it may concern

Name of organisation:

I wish to notify you of the death of:

Title
First name(s)
Surname
Date of birth
Address

Telephone
Email
Date of death

I understand that the person named above had dealings with your organisation. Please amend your records. Thank you.

Their reference number/membership number for your organisation:

If you need more information, my details are:

Name
Address

Telephone (home)
(mobile)
Email
Relationship to the person who died
Signature
Date
People with a particular connection to the person who died

Some people will have particular responses and reactions to a death by suicide depending on their relationship to the person who died.

This section helps guide people with a particular connection.
Partners

When your partner dies by suicide, it may feel as if you and your life together have been rejected. You may ask unanswerable questions such as: ‘wasn’t I enough reason to stay alive?’ It may be so hard to remember the good parts of your lives together because a death by suicide seems to wipe out the positive memories, at least for a time.

‘I’ll never understand – how could all that love we had not have been enough? How could death seem preferable to that…to me?’
Faye, whose husband died

If the death was unexpected, you are likely to be feeling as if the ground has disappeared from under your feet. If you have been supporting your partner through mental ill health or previous attempts for a long time, there may be confused feelings of frustration, exhaustion and relief.

People whose partner has died by suicide sometimes say the manner of their death can make others treat them in a very different way, as if they were ‘tainted’ or to blame for what has happened. This can sometimes be the case with a partner’s relatives who are, of course, also grieving.

If you and the person who died have children, you may feel extremely hurt and angry on their behalf.

The death of an ex-partner can hurt unexpectedly. You may feel you are not entitled to grieve – but that won’t stop it happening. You shared parts of your lives together and you are allowed to grieve for the person you knew.

Your reasons for grief might not be easily recognised by others. Some find themselves excluded from funeral arrangements and support, either deliberately (for example, because they were in same sex relationships that their families have felt unable to accept) or unintentionally (because your connection was unknown and had perhaps been kept secret from your partner’s family).

‘An entire life together – friends, the flat, the cat, putting out the bins – yet I wasn’t even seen as his next of kin.’
Stephen, whose partner died
Parents

For any parent to have a child die – whatever their age, whatever the cause – is devastating. It seems to break the ‘normal’ rules when a child dies before their parent. People talk about the fierce pain of not being able to hold their child, of not seeing them grow up and share their lives, of the loss of their dreams for their child’s future.

Parents can tear themselves apart with questions such as ‘why?’, ‘what could I have done to stop this?’, ‘why didn’t I notice?’, ‘if only...’. You may feel that others are judging you – and your child – in a way they would not if your child had died in other ways. Even if your child had grown up and left home many years before their death, you may endlessly wonder if there was anything you could have done that would have changed what happened.

As his mum, I felt responsible for his death; that I should have seen his inward struggle and that I had missed the signs. The battle to deal with the intensity and complexity of his death hit our family and whole community with the ferocity and fallout of an atom bomb.’
Shirley, whose son died

Parents may grieve in different ways. Whilst one may find it impossible to talk about what has happened, seem unmoved and keep themselves busy, another may need to talk, to cry and to express feelings and pain. This may lead to a sense of being estranged from each other at a time when you most need each other’s support, and may lead one parent to think that the other does not care. Single or separated parents may feel very alone and unsupported.

Parents whose adult child has died by suicide sometimes feel they have to support their child’s partner and any children first, and put their own grief ‘on hold’. Parents can feel responsible for their child causing pain to others.

It can be especially difficult to support any other children while you are grieving; you know they need you but you may feel you have nothing left to give. You may end up hiding your feelings and not talking about the enormity of what has happened. Parents bereaved by suicide worry that their other children will also consider suicide, which can result in becoming super vigilant and over-protective.

If you are a parent whose only child has died, you may wonder how you now define or describe yourself. One parent described it as being ‘a mother without a child’. It may make answering the question ‘do you have any children?’ very challenging. The Compassionate Friends have an online message board for childless parents (visit www.tcf.org.uk).
‘When he was five, my youngest son’s questions changed from “why did Daddy die?” to “how did Daddy die?” As he played with his cars on the floor, I cried into the sink of dishes I was washing and I started to tell him the truth. When he turned 18, he thanked me for telling him the truth about his father’s suicide. He said he now realised how difficult it must have been, but if I hadn’t told him the truth he would have lost his relationship with both parents that night.’

Angela, whose partner died
Children and young people

For children of any age, the death of a parent by suicide brings particular challenges. They are likely to feel abandoned and it can be very hard for children to avoid feeling that somehow they weren’t enough of a reason for their parent to keep living.

Some who have survived an attempted suicide explain reaching a point when desperate despair removed their ability to see anything beyond an end to their mental anguish; and a feeling that those they love and care about will be better off without them.

Talking to children about how the person died will depend on the child’s age or level of understanding.

If there are young children who have lost a parent or sibling to suicide, a natural response is to want to protect them from knowing what has happened, and to think up an alternative explanation for the death. However, because of the likelihood of overheard conversations, media coverage, gossip and visits from the police, it is hard to keep the cause of death a secret. It is better for children to hear the truth from people who love them than from someone in the playground or on social media: this is a time when they need to feel there are people they can trust.

Talking about what has happened is a chance to answer any questions (within the limits of their age and level of understanding) and to check that they have understood what has been said. It is also a chance to reassure them they were not to blame. Ideally, a parent would be the best person to tell the child what has happened – if this is not possible, ask someone they trust to explain what has happened.

If the child has already been given a different explanation for the death, it is possible to go back and change it. For example you could say something like: ‘You know I told you that your dad had an accident and that is why he died. Well, I’ve been thinking about this and I would like to tell you a little more about how he died. I didn’t know what to say when it happened, it was such a shock. Now I’d like you to know what actually happened that day.’

You may be wondering whether children should view the person’s body or whether they should attend the funeral. These decisions will depend on your knowledge of the child’s level of understanding. Children and young people appreciate being given the information to make a choice.
‘It was so hard to tell them that their dad had killed himself. I tried to avoid it, said he’d had an accident, but how long could I keep that up for? I thought they’d understand better when they were older, but how old? I can’t understand it and I’m an adult – why do I think there is a magic age at which it’ll be OK for them to know? Then I realised I was just trying to protect myself but, actually, more than ever they needed to be able to trust me. Turns out they’d guessed something wasn’t right all along and they just wanted me to be honest so we could talk about it together.’

Faye, whose husband died

If children wish to see the person’s body, and you feel this is appropriate, prepare them in advance for what they will see and suggest they bring something (like a flower or a card) to leave with the person. If they decide to attend the funeral, consider offering them a role (such as choosing some music). Speak to your local Trust Bereavement Coordinator (contact details on page 52) about further child bereavement support available.

Children and young people will have the same range and intensity of feelings as adults but may need help identifying and expressing their emotions. It may be the first time that someone they know has died and even the concept of death is new to them. Understanding suicide can be overwhelmingly difficult and confusing.

They may find it very hard to cry: it doesn’t mean they aren’t as distressed as someone who can’t stop crying. The way children grieve is often described as ‘puddle-jumping’: moving rapidly from great distress to physical activity, for example. This is normal.

Some emotions can be strongly felt by children and young people depending on their age and level of understanding. It is common for a child who has been bereaved by suicide to feel that they were in some way to blame – for something they did or did not do; or something they said or did not say. Giving regular reassurance is important.

Young people may become extremely angry – with the person who died, with other members of the family, with themselves. Grief can put a great strain on relationships and young people may fall out with members of the family or with friends. It is also very natural for a child to be scared that someone else in the family may also die by suicide. If you can, reassure them. You could say something like: ‘I know I have been very upset, angry and shaky since your Dad died but I am not going anywhere. I will get upset, because I am still so sad that he died, but it does not mean I will die the way he did.’
It is natural to be afraid that affected children will grow up believing that suicide is an option. Making it clear that talking about what has happened is allowed, and that it is helpful to share how you are feeling is important. It also helps to explore with them alternative ways of coping with difficulties.

Children may also appreciate being helped with how to answer questions from others: their friends may be very direct and inquisitive. Help them find something they are comfortable saying, for example: ‘My sister died at the weekend. It is very sad. It was suicide. Please don’t ask me for any more information. If I feel I can talk about it, sometime, I’ll let you know.’

Some young people may find it easier to talk and may want to say something like: ‘Please don’t avoid talking about your father just because of what happened to mine. It’s tough but I’d rather we talked about it.’ It may be that other young people, in person or through social media, ask intrusive questions; it can help to have a sentence ready such as: ‘Thanks for being interested, but I’m not going to talk about it so please don’t ask me.’

If the person who died was a friend, young people may need intense support; they may have shared things together and they will wonder if there was more they could have done. Their friend may be someone they knew online and other people may not understand the intensity and importance of that connection.

It can help if young people know there are places (such as support organisations, school counsellors, helplines) where they can talk about their feelings, as sometimes they may struggle to share their thoughts with other members of the family.

It is important that children and young people get the right support at school or college. Some places can be very understanding and supportive. When you call to inform the school or college what has happened, ask if there is someone on the staff with a particular responsibility for supporting students who have been bereaved and try to speak to them.

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‘At the time of my brother’s death I was only ten years old. I had never experienced loss, and suicide was certainly not something I was aware of. Straight away I was looking for someone to blame, looking for a reason why my big brother would have made that decision. I was confused, lost and lonely. The one person I wanted to talk to had been taken away.’
Matthew, whose brother died
**Siblings**

If your brother or sister dies, you immediately lose someone who you have grown up with, laughed with, argued with, and with whom you share a lot of memories. You could feel you should have protected them, or you may feel really hurt that they did not turn to you for support, especially if you are the eldest. If you have had a troubled relationship, you may feel as though you are left with unresolved issues.

“He was my baby brother. I don’t know why he couldn’t talk to me. As many teenagers do, he’d often stay up late, playing his music and at times he’d come in and talk to me. I was there that night and I often think why didn’t he come and see me and tell me about how he was feeling.”

Lotte, whose brother died

Not only do you have your own grief and confusion, but you can feel responsible for helping to support your parents with their grief too, and also feel that you have been given additional responsibility for looking after your parents as they age. You may also find people enquire after your parents without recognising that you are also grieving. Sometimes, it may feel as if you have lost all your family at once because your parents withdraw from you into their grief, and it can be hard not to blame the person who has died.

It can be helpful to talk through how you are feeling with your wider family and friends to get their support.

**Older people**

Older people may grieve for the person who died and for the grief being felt by other family members. Or they may feel they should not express their grief, feeling it is in some way ‘less important’ or that they need to ‘stay strong’ for others in the family. This may complicate communication within the family.

Some older people may remember when suicide was a criminal offence and may, therefore, feel a deeper sense of the stigma that can accompany a death by suicide.

Older people may be at risk of developing depression or having their physical health suffer after a family death by suicide and yet be reluctant to seek medical help or support. It is important to remember you are experiencing something very tough and your GP is there to help.
‘I felt I had to stay strong to support the rest of my family, especially my heart-broken son, my grandchildren and great grandchildren. But I also had my own pain to deal with as she had been like a daughter to me for 45 years.’

Joan, whose daughter-in-law died
Friends

Most people who have died will have friends with whom they have shared many experiences and with whom they feel closer than they do with some of their family. As a friend of the person who died, you may sometimes feel that your grief and needs can be overlooked and that it is difficult to get your voice heard or obtain support. It can be hard to find yourself in a secondary role after the death, and having little or no involvement in planning the funeral or other arrangements. You may also have particularly intense feelings to deal with if you are the person who knew how low your friend was feeling. Maybe they knew things about you that no-one else did – and now, no-one does.

Friends can sometimes feel that they are not ‘entitled’ to any support after someone dies. It is important to remember that what matters is how this loss affects you, not whether you were related to the person who died. If you are grieving, you deserve to be supported in your grief. Talk to your GP for support or go to www.mindingyourhead.info for an online directory of services.

People with learning disabilities

People often underestimate the capacity of a person with learning difficulties to feel grief and understand death. Your knowledge of the person with learning difficulties is likely to help you to know best how to support them in dealing with new experiences. It can feel particularly difficult if the person who died was one of the people who could best understand them and their needs.

Sometimes, because people may not be able to express their grief in the usual ways, those around them may assume they are not grieving when they are actually feeling distress and pain.

Any death can be a difficult concept to convey, and the idea of a death by suicide may be even harder to understand. Simple, clear, repeated explanations of what has happened will help; our language around death can be very confusing. People with learning difficulties may struggle to understand concepts such as ‘lost’ or ‘passed away’ and may prefer a more literal explanation such as ‘died’.

It can help if people with learning disabilities are included in any rituals such as the funeral, with a special role, for example, choosing a song or carrying some flowers.

Talk to someone now

If you are in distress or despair, or know someone who is, you can contact Lifeline free on 0808 808 8000 or Samaritans free on 116 123 (both numbers are free from landlines and mobiles in Northern Ireland). You can also ask your GP for support.

If you need immediate help dial 999.
Helping someone who has been bereaved

Most of this guide is directed at those who have been directly affected by suicide but this section is for those who are supporting the bereaved.
**My relative or friend**

If a member of your family or a friend has been bereaved by suicide, they are going to need love, kindness and support. However, it can be very hard for a bereaved person to explain how they are feeling and to ask for help. They may tell you that they are fine when actually they are not. People who have been bereaved by suicide say that regular offers of help and support and making yourself available to listen or talk are invaluable. You may want to provide offers of practical help: support to do their shopping or drop by with a cooked meal. Even a simple text to let the person know they are in your thoughts can be really appreciated.

The key things – as with any loss – are to let your relative or friend talk and for you to listen without making judgements. Sometimes, people bereaved by suicide say that they find that many people find it very awkward to talk about what has happened. This can leave the bereaved person feeling even more isolated. So making sure they understand that you will be there for them will be very helpful.

I needed people to say the same things they might have said if she had been a sister or had died in an accident: that they were sorry, that they would listen, that they were there for me. No-one did. I think they were – still are – scared to talk about suicide and thought it was best not to mention my friend. It’s as if she is best forgotten – and she did die a long time ago. But I haven’t forgotten her.’

Di, whose friend died

People bereaved by suicide may have many questions running through their heads and the most difficult are: ‘why did this happen?’ and ‘could I have done something to stop it?’ Your friend or relative may want you to tell them that they were not to blame – and sometimes they may need you to let them express their feelings of guilt and responsibility. Sometimes they may want to cry without being told to stop, or they may simply want you to spend time with them. People usually appreciate hearing others’ memories of something the person did or what they meant to you. It may be hard, but try not to focus only on the death, but also on when they were alive and enjoying life.

If there are children or young people in the family, they will appreciate it if you acknowledge that they are grieving too. Children sometimes report being told to ‘look after your mum’ when they need support themselves.

You may find it too hard to hear some of the things that your friend or relative feels they need to say. You could suggest they may want also to talk to some of the organisations that offer support and for you to keep talking together about the other aspects of what has happened. It may be that you could help them to go and speak with their doctor or to attend a support group.

You could also make a note of particular dates (such as the birthday and the date of death of the person who died, Father’s Day or Mother’s Day) and remember to mark and acknowledge these in the years to come.
My work colleague or employee

Someone who has been bereaved through suicide may feel aware of the stigma associated with a suicide and find it difficult to return to work into what may seem like the spotlight of people’s attention. It may help to ask them beforehand what they would like people to know about the person who died and how they died and to give colleagues hints about what would help. For example, you could tell all staff something like this: ‘Xxx is coming back on Monday. Most of you will know that his daughter (name) died a month ago. Xxx wants everyone to know that (name) took her own life. As you can imagine he and his whole family are reeling with shock and grief. He has asked me to tell you that he doesn’t mind people expressing their condolences but would prefer not to be asked about the details of what has happened.’

Equally, your colleague may not want to disclose this information. Either way, it is important to respect their wishes.

People bereaved by suicide often appreciate colleagues acknowledging what has happened, even very simply: ‘I was so sorry to hear about your daughter’, rather than having it ignored completely.

No bereavement follows a neat pattern and bereavement by suicide can be chaotic. It is possible your colleague or employee may need time off in a few months’ time, or around the anniversary of the death – even in a couple of years’ time.

It is likely that, for some considerable time, they will find it difficult to concentrate or function as they have in the past; they may lose confidence in their ability to perform even simple tasks. Alternatively, they may want to work themselves to exhaustion to avoid thinking about what has happened.

It would be helpful to all staff, especially if it was a member of staff who has died by suicide, to be reminded of the support available to them within or beyond the workplace (for example, if your workplace has an Human Resource department or an occupational health department).

The Labour Relations Agency in partnership with CRUSE Bereavement Care has guidelines for employers called ‘Managing Bereavement in the Workplace’. This guide aims to assist employers to respond appropriately to the grief and practical needs of the employee that has suffered a bereavement. Copies of this guide are available to download from the Labour Relations Agency website: www.lra.org.uk
My student

The death by suicide of any member of the school or college community – student, relative of the student or member of staff – needs to be considered and responded to appropriately. You may find that young people react in different ways: some may find it hard to talk, some may find it hard to stop crying. Young people appreciate staff acknowledging what has happened, even very simply: (‘I was so sorry to hear about your brother’) rather than having it ignored completely.

Schools should have a Critical Incident Policy which will be activated following the death of a student.

The Department of Education has published guidance for managing critical incidents in schools which outlines how to support pupils and staff following a traumatic event, including suspected suicide.

The fear and stigma around suicide can be particularly strong within a school or college, especially when a young person has died. Staff may fear some imitative reactions and because of that, avoid talking about what has happened. This may be the response that is most likely to put both the bereaved young person and others at risk.

If the person who died was a student’s parent or carer, the student will need a lot of support and understanding as they try and keep going with their studies while their head is full of questions and whirling emotions. They may be feeling deeply hurt and rejected as well as desperately sad and they will bring these feelings with them to school or college.

Of course, as a member of staff, you may also be affected by the death and it may remind you of previous losses. Make sure you have sufficient support too.
### Tips on supporting someone bereaved by unexpected death

#### When supporting someone who has been bereaved unexpectedly, do:

- Give time to listen and understand
- Ask what you can do to help
- Be yourself and communicate naturally
- Ask the person if he/she would like to talk about it
- Find out and share what supports and services are available elsewhere
- If you don’t know what to say, explain that you don’t know what to say

#### When supporting someone who has been bereaved unexpectedly, don’t:

- Avoid the person or allow awkwardness to prevent you offering support
- Offer too much opinion or speculate on events
- Avoid talking about the person who has died
- Assume you know how the person is feeling
- Use clichés (‘there is a reason for everything’, ‘time is a great healer’, ‘they must be at peace now’) – this can sometimes irritate those bereaved
- Attempt to find reasons for or pass judgement on their loss
- Ask how they are unless you have time to listen
Getting through and facing the future

Rebuilding your life can seem an enormous challenge.

This section has advice from people who have been bereaved by suicide.
It is important to understand that an extreme grief reaction is a very natural response to such a sad and tragic event. This is a time to be aware of your own vulnerability and to take care of yourself. Most of all it is important to remember that you are not to blame. No one is to blame.

Every bereaved person has their own needs – no two people will feel the same after death by suicide; even though you may experience different intense emotions your loss is the same. There is no time frame for coping with grief and it does not always move in a forward direction. Family and friends can help you meet practical and emotional needs. Information, meaning-making and physical safety will also have a big part to play in how you cope.

**Taking care of yourself**

After someone dies, it may be that you look after everyone except yourself. This can be especially true after a death by suicide, partly because the world has been shattered around you and partly because you feel you can’t allow others to look after or support you. Some people have said, after a death by suicide, they feel that they are not ‘entitled’ to sympathy. Or you may be the type of person who has a reputation for ‘coping’ and it is important to you not to show the world how you are feeling.

It can sometimes be tempting to become very busy, and to exhaust yourself with tasks so that the tiredness can blot out some of the pain, even for a moment or two. You can become so busy trying to protect others, such as your children, that you don’t protect yourself.

Trying to put a brave face on and ignore your feelings only prolongs the pain, hurt and grief.

Taking care of yourself may mean time spent in the company of friends with whom you can be open, or it may mean choosing to be alone: and you may want different things on different days. It is important to recognise your needs and to make sure you care for them.

’It’s like they say on planes – put on your own oxygen mask before you look after others. I found I had to take a few moments for me or I’d have gone under and been no help for anyone.’

Faye, whose husband died
Finding a listener

People who have been bereaved by suicide say that the most helpful thing is to find someone (or more than one person) who can listen. They may not be the most obvious people — friends may not be as easy to talk to or as available as you might hope. Look out for people who will simply listen and let you ‘be you’.

If friends and family seem to struggle to know how to support you, or if you find it more helpful to talk to someone who does not know you, consider calling your GP or contacting a bereavement support organisation. There is a list of local organisations on the website www.mindingyourhead.info

Having a listener who is on your side does not mean you have to talk to them about how you are feeling. Sometimes their best support may be doing something alongside you in silence such as going for a walk or watching TV.

‘After my son died I found it really difficult — I felt I had failed as a father and a husband. My ‘practical’ self was telling me I had to fix the situation for my wife and two other sons. I was scared to talk about me and thought I would be perceived as weak and not able to care for my family in the way they needed me to. I had some very dark times, but with time I realised it was the exact opposite – talking about how I was feeling made me stronger and more able to deal with what had happened. I would say to anyone that it’s essential to talk to someone, be it a friend, family, someone at work, or your GP, about how you feel — it does not make you any less of a man to do so. Losing my son will never change, but I now know that talking makes me better equipped to cope.’

Dean, whose son died
**Immediate needs**

You may feel the need to be safe and secure – it is important for you and your family to feel as safe as possible. If necessary have a safety routine and someone you can call when you feel unsafe. Daily routines, such as going to work, should be restarted as soon as you feel able. Avoid long or unnecessary separations from family and friends.

- Have a consistent routine at home, work, and with friends.
- Don’t isolate yourself.
- Give time and emotional support to others, and accept help in return.

You need to talk to other people. Following bereavement by suicide you may lose interest in other people and not want to talk to them about what happened. To get through this difficult time you will need the support of other people. You may turn to family, friends or a representative of your faith/belief group.

- Talk honestly with friends and family about your feelings and confusion.
- Find people you can feel comfortable talking to and being emotional with.
- Seek additional support from counsellors or doctors if you feel you need it.
- Meet others bereaved in the same way if you feel it would help.

You need to make the loss real – sometimes it is difficult to believe that the person who died is gone, or that they won’t just walk into the room like nothing happened. This is a normal reaction to death. Find positive ways to remember or honour the person who died now and in the future.

- Take part in mourning ceremonies (for example attending the funeral, leaving a gift on the grave).
- Share your feelings of sadness.
- Keep photos or special mementos of the person who died.

Some people who have been affected by suicide find it helps to connect to others who have been bereaved by suicide. It may be helpful to learn about their feelings and to feel less isolated. This could be through reading articles or books by bereaved people or by attending a support group for people who have been bereaved by suicide.

‘As I left my first support group meeting for people bereaved by suicide I felt like a huge weight had been lifted off my shoulders. I knew that I wasn’t alone’.

Angela, whose partner died
‘If you’d have told me weeks before that this would happen, I would have been fairly certain that I would have been unable to cope, that my own death would have been the only solution to unbearable grief. But it didn’t turn out that way. It is an exhausting, painful and long process, but it is possible to enjoy life again. Slowly, we have found we have survived and the sun has come back into our lives.’

Dick, whose son died
It may be daunting to imagine walking into a room and joining other people who have been bereaved or affected by suicide. Some people fear they will not be able to face other people’s pain. However, support groups are designed to do just that, to support people, and they will do all they can to help people attending for the first time to feel accepted, less isolated and under no pressure to talk about their experiences.

Some people might prefer not to attend a group and instead find support in other ways, and some people might choose to wait a while before going along.

**Long-term needs**

Remember that everyone needs time to adjust after an unexpected death. You may find it helpful to talk and think repeatedly about what happened before you can understand it fully.

Allow yourself more time to come to terms with unfairness, blame, or anger. Visit the grave or places where you feel close to the person. Looking through photo albums can be helpful.

Dealing with reminders, unsettling thoughts or images of the death can come at random or in response to things that remind you of what happened. These can make you upset, physically and emotionally unsettled, prevent sleep, and interfere with your work. Managing reminders and triggers can give you more stability and a greater sense of emotional control.

- Be aware that significant dates such as anniversaries or special occasions will be reminders.
- Have a plan for dealing with reminders when they occur.
- Reminders will get weaker and fewer over time, and you will get better at dealing with them.

**Additional support**

You may feel you need or would like some professional support. Try to avoid saying to yourself ‘I’m not ill, I’ll be fine, and I don’t need any help’. Losing someone through suicide is unbelievably tough. It is not a sign of weakness to have to ask others to help you through this difficult time.

You can access additional support through your GP or go online to www.mindingyourhead.info to get a list of services within your area.

“Hope is like the sun which as we journey towards it casts the shadow of our burden behind us.”

Samuel Smiles
Helpful reading

This section provides some suggested literature which you may find beneficial.
Helpful reading

The list below is not exhaustive, further information can be obtained using an internet search facility.

Books for adults

• **Aftershock: help, hope and healing in the wake of suicide.** David Cox and Candy Arrington: Trust Media Oto (2003).

• **A special scar: the experiences of people bereaved by suicide.** Alison Wertheimer: Routledge (2001).

• **Bereaved by suicide.** Patrick Shannon: CRUSE Bereavement Care (2001).

• **Dying to be free: a healing guide for families after suicide.** Beverly Cobain and Jean Larch: Hazelden (2006).

• **Echoes of suicide.** Siobhan Foster Ryan: Veritas (2001).

• **I wasn’t ready to say goodbye: surviving, coping and healing after the sudden death of a loved one.** Brook Noel and Pamela Blair: Source Books Inc (2008).

• **No time to say goodbye: surviving the suicide of a loved one.** Carla Fine: Doubleday (2002).


• **Eastern Trauma Advisory Panel booklets:**
  - Dealing with sudden death: helping children and adolescents
  - Dealing with sudden death: information for young people
  - Dealing with sudden death in adulthood
  - Dealing with sudden death: common grief reactions.

These booklets are available to download electronically from the bereavement page on Belfast Health and Social Care Trust website www.belfasttrust.hscni.net

• **Hope and light in the darkness.** This booklet was produced by the Northern HSCT in collaboration with families bereaved by suicide. You can download it from their website at www.northerntrust.hscni.net/pdf/Bereavement_booklet_final_10_6_16.pdf

Books for teens


Books for children/those supporting children

- **Beyond the rough rock: supporting a child who has been bereaved through suicide.** Di Stubbs and Julie Stokes: Winston’s Wish Foundation (2008).
- **But I didn’t say goodbye: helping children and families after suicide.** Barbara Rubel: Griefwork Centre Inc (2009).
- **How to help children and young people bereaved by suicide.** Barnardo’s Northern Ireland (2008).
- **Muddles, puddles and sunshine.** Diana Crossley: Hawthorn Press (2010).

Books for people with a learning disability

- **When somebody dies.** Sheila Hollins: Gaskell (2003).
- **When Mum died.** Sheila Hollins: Gaskell (2004).
- **When Dad died.** Sheila Hollins: Gaskell (2004).
Further support

This section has local contact details for finding help and support.
Further support is available through your GP or by contacting your local Bereaved by Suicide Support Service:

<table>
<thead>
<tr>
<th>Trust name</th>
<th>Council areas</th>
<th>Contact name</th>
<th>Contact</th>
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<tbody>
<tr>
<td>Western HSCT</td>
<td>Derry City &amp; Strabane Omagh &amp; Fermanagh</td>
<td>Fidelis Simpson Colette Cullen</td>
<td>Mob: 078 4156 9000 Mob: 078 2653 5199</td>
</tr>
<tr>
<td>Northern HSCT</td>
<td>Causeway Coast &amp; Glens Mid-Ulster (parts) Mid and East Antrim Antrim &amp; Newtownabbey</td>
<td>Danielle Gallagher</td>
<td>Tel: 028 9441 3544</td>
</tr>
<tr>
<td>Belfast HSCT</td>
<td>Belfast City</td>
<td>Jillian Neville</td>
<td>Tel: 028 9504 9290 Mob: 079 2324 1343</td>
</tr>
<tr>
<td>South Eastern HSCT</td>
<td>Lisburn &amp; Castlereagh Ards &amp; North Down</td>
<td>Fiona Dagg</td>
<td>Tel: 028 4461 1797 Mob: 077 3885 1807</td>
</tr>
<tr>
<td>Southern HSCT</td>
<td>Armagh, Banbridge &amp; Craigavon Newry, Mourne &amp; Down Mid-Ulster (parts)</td>
<td>Orla Murtagh</td>
<td>Tel: 028 3756 4461 Mob: 078 2562 7133</td>
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Each local Health and Social Care Trust has a bereavement support section of their website where you can find more detail on services that are available:

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<tr>
<th>Location</th>
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<td>Belfast HSCT</td>
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</tbody>
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‘For a long time after she died all I could think about was her death and the manner in which she died. They were torturous thoughts and it pained me that I couldn’t remember anything of her life beforehand. I had no memories, no dreams. But then good thoughts started to come back. Now when I think of her, we’re always enjoying time we spent together.’

Amy, whose mother died

Acknowledgments
This booklet has been adapted with permission from Help is at Hand (revised 2015), a publication produced by Public Health England (www.gov.uk/phe) and the National Suicide Prevention Alliance (www.nspa.org.uk).

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The PHA would also like to thank all those who helped adapt the booklet for use in Northern Ireland, including the Northern Ireland Bereaved by Suicide Services working group.
‘It’s five years now since my wife died and I still miss her every day as she has left such a huge void. I try to concentrate on my daughter and the happiness we share and I have gradually learned to accept that the feelings of pain will never go and I now have ways to cope with this.’

Chris, whose wife died