

## **Bereavement through suicide**

A death through suicide delivers a double blow to families – not only do they have to cope with a sudden and often unexpected death but they also have to deal with the way their relative has died. They may feel very alone in their grief but sadly more people are bereaved through suicide than most of us realise. The following is addressed to any family facing life after a death by suicide or to anyone who is trying to help a family in this situation.

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### **Impact on families – does bereavement by suicide differ from other types of bereavement?**

The death of someone important can cause great grief and sadness whatever the cause of death. However, families bereaved through suicide also have to face additional pressures and pain. You can often face agonising questions and intrusive public scrutiny at a time when you are feeling confused and vulnerable. For adults and children it can take a long time to trust others again.

If you have been bereaved through suicide, you will probably go through the shock, deep sadness and occasional anger felt by people bereaved in other ways. At the same time, you may also have to cope with extra emotions such as guilt, shame and self blame. You may find yourself plagued by thoughts of 'what if' and 'if only'. On top of everything else, parents can fear for the future mental health of their children. The feelings and emotions can be more painful and seem to last longer than with other causes of death. One person described it as 'grief with the volume turned up'.

Because a death through suicide is one of the most painful and complicated types of bereavement families can experience, families are left asking many unanswerable questions. Families feel isolated within their own community as a result of the stigma attached to this type of death; individuals within families are left isolated as the pain is felt too great to bear and permission to talk and share thoughts and feelings are not given.

Many families have difficulties being open about their thoughts and feelings after a bereavement through natural or accidental causes. With the added dimensions of secrecy, shame, guilt and distortion associated with bereavement through suicide, communications

within families is further hindered. The result is individuals and families who feel alone in their grief and powerless to mobilise the support they need to negotiate the path ahead.

There will be differences for all members of the family depending on who dies. The death of a parent or a brother or sister or of a partner or child will impact differently on children and adults depending on the previous relationships. For example, it is particularly hard to parent a child through adolescence if their older brother or sister killed him or herself.

### **A note on language**

Please note that we never refer to 'committing suicide'; this expression has remained in public usage long after suicide legally ceased to be considered a criminal act. Its use can distress families and it is preferable to refer to 'death by suicide' or that the deceased 'took their own life' or 'ended their life'. A child recently described his father's death by suicide as 'Dad made himself die'.

### **Feelings and thoughts**

#### Numbness, shock and disbelief

*'The day after, I was walking around as if nothing had happened. It couldn't be real, could it? Surely I'd wake up and find it was a dream?'*

By its very nature, suicide is often untimely, unexpected and may be violent. Sometimes a death through suicide comes out of a clear blue sky to those close to the person who has killed himself or herself. Even if someone has said they plan to kill themselves or has attempted to do so before, the death will still come as a shock and it can be a long time before you can believe it is really true. However the numbness at the beginning can protect you from feelings which may seem overpowering and may help you get through the early days when there is too much to cope with.

#### Guilt, anger and even relief

*'I hate that she died like this and sometimes I hate her too'*

Guilt and anger are common reactions in bereaved people but tend to be felt more intensely and for longer by relatives and friends of people who have killed themselves. You may feel guilt that you are alive and that you didn't or, indeed, couldn't prevent the suicide.

You may be angry for being hurt like this and being left behind to cope. You may find it impossible to 'switch off' the last conversation. This is difficult enough if your last conversation with the person seemed cheerful and normal; it is very hard if you are left with the memory of angry last words or a family row.

Some people may even feel a sense of relief, especially if there have been frequent suicide attempts or violence or if your family life has been dominated by one emotional crisis after another. However, even this relief can be brief, swamped by feelings of guilt for having felt relieved.

#### Rejection and betrayal

*'We had gone through so much together and I'd given him so much support. Yet it's as if I hadn't cared less – or as if he hadn't.'*

Family members often feel rejected by someone who has killed themselves. You may be left asking 'Why did he or she do this to me?' 'Did I fail them in any way?' 'What have I and the children done to deserve this?' You may have devoted years to supporting a child or partner with depression and feel all your loving care has been rejected. You may feel as if your love has also been rejected. One writer said 'suicides put their skeletons in other people's closets'.

### Shame and blame

*'At the funeral I knew his mother was looking at me and thinking "this wouldn't have happened if you hadn't left him". She didn't know the half of it...'*

Suicide is thankfully no longer a crime but there still seems to be a stigma associated with it. The legal framework that goes with the investigation and inquest can make families feel on trial. You may feel that neighbours, work colleagues or even other members of the family are questioning the death in a way they never would if the death had been through cancer or heart failure. Relatives may be desperate to understand what has happened and, in trying to make sense of everything, they may try to put the blame on to someone other than the person who died. This is even harder if you are already blaming yourself, however much you understand that nothing anyone says or doesn't say, does or doesn't do can cause someone to die by suicide.

One of the particularly hard feelings is shame; adults often feel that there is a strong sense of shame attached to a death by suicide and they try to protect their children from this feeling. In fact, children do not experience shame in the same way as adults do when someone has killed themselves. They may well be blaming themselves and possibly others, but shame is usually less of a burden for them.

### **Trying to make sense of it**

Suicide can seem like a totally meaningless act and those left behind are often desperate to understand more about why it happened. For some people, the list of questions is endless and the search for answers can become a big part of your life. The list of questions is always led by 'why?'....

- Why?
- Why did it happen?
- Why now when s/he seemed so much better?
- Why didn't s/he say anything?
- Did s/he really mean to die?
- Why did s/he do this to me?
- How could s/he do this to the children?
- What sort of person were they really?
- Did I really know her/him?
- What did I do wrong?
- How can I bring the children up alone?

Everyone connected to the person who has died will have their own beliefs about 'why'. But all they have is their part of the picture; the person who died is the only one who knew how all the pieces of 'why' added up to a situation they found intolerable.

Many people point to events that have happened (redundancy, family break up, relationship difficulties, exams, financial difficulties etc) and see these as the cause. What is more complicated, though, is the fact that many people are able to weather similar pressures without the despair that leads to suicide. Some people are more naturally resilient or have better mental health. Only the person who dies knows how all the 'whys' joined with all the feelings and thoughts and all their own emotional history to make suicide seem the only choice. 'Final straws' may be the weight of iron girders or as light as gossamer – only the person who died knew what the final straw may be.

This search for clues and the need to make sense of the answers is probably one of the biggest challenges to face. In the end, it may be a case of accepting that there are things that will never be known. Some people find that it helps to settle on an answer they can live with, others find they can live with not knowing. Whichever way you choose, it is important at some time to end the search so that you can look forward.

### **Saying goodbye**

The funeral is an important and often daunting event for any bereaved family. You may have regrets that you couldn't stop the suicide but feel that the funeral is something positive you can do for the person who died. This can then become an opportunity to celebrate their life and achievement and so help to remember positive feelings about them rather than just concentrating on the way they died. But in many cases, the funeral comes too soon to be thought of as any kind of tribute and instead is overshadowed by strong feelings over the way in which the death happened. If this is the case, it may help to plan a memorial service at a later date.

### **Being in the public eye**

Sadly, the death of a family member by suicide means that you will have little chance of grieving in private. As well as the funeral, families also have to face an inquest which can be stressful. The full inquest may not be held until months later. This delay can be difficult for families; you may feel that you can't begin to grieve properly until the inquest has taken place. It can also be painful to have your family member discussed by strangers or referred to in newspapers; it can feel as if they are 'not yours' any more.

### **Talking about it**

*'It is amazing how often you need to explain that they have died – each time I dread the next bit when you are asked 'how did they die?' Even when I feel strong enough to explain what happened I need to be sure that the person listening can take it. There's often a painful silence and I end up trying to comfort them because they feel so tongue-tied.'*

Death is still a difficult issue for many people to discuss and a death by suicide is probably one of the hardest things to explain or talk about. You may bump into someone you haven't seen for a long time at the supermarket and be asked how your partner is. A new teacher at your child's school might ask if your partner will be coming to see the school play. An acquaintance might ask 'How did Sam get on with his exams?'

Thinking in advance about some answers to unexpected questions like these should make them easier to deal with.

*'I'm sorry to say that he killed himself – we're still struggling to understand why.'*  
*'Anne felt she couldn't go on living any more and so decided to end it.'*  
*'Callum seems to have felt that suicide was his only choice, which is very painful to think about.'*

## **Explaining suicide to children and young people**

### Never too young to know

It is a natural reaction with any death to want to hide away from the outside world but with a death from suicide you are much more likely to have to cope with outsiders such as the police, coroner and the media. It may be tempting to think up another explanation for the death or another description of the circumstances just to protect the children. But as the story of what has happened can quickly become public knowledge, it is generally best to try to be open and honest from the start. This can seem an almost impossible task – especially as you yourself will need time to adjust.

Media interest, police visits and overheard conversations can all lead to a child finding out the truth by accident or indeed finding out something that is not true. You will probably prefer that the children hear the news from you rather than from someone in the playground. It will also give you a chance to reassure them that they are not to blame.

You will of course want to protect your children and to let them know they can trust you. Try to avoid secrets and also unnecessary details. If at all possible, a parent is generally the best person to tell their child this difficult news. If you are just not able to do this, then please be present when someone else does.

*'How do you tell a child their mum has died and that she decided to end it all? It didn't seem fair to burden them with it but then again I thought, above all, they now needed to be able to trust me completely.'*

It can help even very young children to have a simple story that they can use to re-tell and slowly make sense of what has happened. Use words they understand. Always ask them what they think about what you have said to make sure that they have actually understood.

Events surrounding suicide can often become very confused. Facts may be changed to become more comfortable to live with or to make them easier to explain. Try to be consistent in your explanations to the children, telling them honestly what you believe to be true.

It may be that you have already given your child a different explanation for the death than suicide. If this is the case, it is possible to go back and explain things again. You could try something like this:-

*'You know I told you that Steve died and that he died from a heart attack? Well, I'd now like to tell you a bit more about it. When Steve died it was hard to explain exactly what happened and it was hard for me to think straight. But now I'd like to tell you more about how your brother died.'*

Older children may feel hurt to have been protected from the full facts before. In these circumstances it can help to say something like:-

*'I have been impressed by how you've been since Dad died and I think you're mature enough to know some more about what happened when he died.'*

### Finding the right words

Our experience shows that there may be five stages involved in telling a child that someone has died by suicide. These five stages may happen in the space of minutes, hours, days, weeks, months or even years. The pace between the stages is often led by the child's needs and ability to understand which is in turn affected by their age and developmental understanding. The pace will also be affected by the situation, for example, the possibility of your child finding out what has happened from other sources or from older members of the family.

The five stages may be:-

- 1 Explaining that the person has died
- 2 Giving simple details about how they died
- 3 Saying that the person chose to take their own life
- 4 Providing a more detailed description of how the person died
- 5 Exploring possible reasons why the person chose to kill themselves

This process takes time. It needs to be handled with care, giving the children the chance to say how they are feeling. You may want to ask your child if they would like to know more details and then be guided by their response. If a child says they don't want to hear more just now, they need to know that they can come back to you for more information. Then again, you may feel that your child can not handle any more information at the moment. It is important then to tell your child that you will tell them more on another occasion – and to do this.

Our experience indicates that if a child asks a question about what has happened, they are ready to hear the answer.

### Stage 1 – explaining that the person has died

This is the stage when you explain gently and simply that someone has died.

*'I have something really sad to tell you. Mum died today.'*

### Stage 2 – giving simple details about how they have died

This is an opportunity to explain in general how or where the person died. This allows you to tell part of the story honestly but without giving some of the details which you may feel to be too much at this time. However it is important to check out with the child what they understand and to find out if they want more information. As said above, if a child asks a question, we believe they are ready to hear the answer. If they are not given information, they tend to fill in gaps themselves which can lead to difficulties and confusion later on.

You can start by telling the story of how the person died with simple details.

*'Daddy died up on the hill by the trees.'*

*'Mum died in the car.'*

*'Granny died because she took more of her tablets than she should have.'*

*'Jack died by the railway line.'*

*'Sally died because she got very badly burnt.'*

### Stage 3 – saying that the person chose to take their own life

This is the stage when you need to explain that the person killed themselves. There are many explanations as people and their situations are so different. Here are some ideas of what you might say; you would need to adapt one to fit your situation.

If the suicide is completely unexpected

*'I have something I need to explain about how your brother died. People die for lots of different reasons – illnesses and accidents and sometimes people hurt themselves and they die. Your brother did something very dangerous to himself which led to his death. When people do something like that they are often very confused or depressed – they think that killing themselves is the best thing to do. It was very unlike Will to think like that – It's so hard to believe that it's happened.'*

If the suicide comes after a period of depression

*'Sometimes people become very sad and down. It's not like the feeling you get when you can't have something you want. This sort of 'feeling down' goes on for a long time and all the problems and worries pile up on top of the other. It's a bit like when you build a tower out of bricks. When people feel like this, they might feel that nothing they or anyone else does can make the situation any better. If they carry on feeling like this – with more and more worries piling on top of the other – they might think that life is not worth living and that it would be better if they were dead. In the end, one more worry may be just too much. The tower of bricks topples and falls over. Because Dad was so confused and so depressed he probably thought we would be better off without him. I wish he hadn't thought this.'*

If the suicide comes after previous attempts linked to a history of mental ill health

*'Mum did something very dangerous and this is why she died. Mum had been unwell for most of her life. It wasn't an illness like chicken pox but an illness that changed the way she felt or thought about things. She thought life wasn't worth living any more and no matter what anyone tried to do to help her, nothing worked. Mum felt so awful she decided she did not want to be alive any more. She decided she wanted to die. As you know, she had thought this before when she had to go to the hospital after taking all those tablets. That time, the doctor managed to sort her out. Today it was different and she died before the ambulance arrived. There was nothing anyone could do.'*

After your explanation, you might want to ask the child again if they want any more information. This is the time when you could introduce the word 'suicide'.

*'When people do something like this, they are often very sad and confused and think it is the best thing to do. It is called 'suicide' or 'ending your own life'.*

#### Stage 4 – providing a more detailed description of how the person died

This is the point when you need to explain the method of suicide. This is probably the stage that people worry about the most, but if said gently, simply and factually it can help a child piece together what has happened. Here are some explanations for the more frequent methods.

#### Suicide by hanging

*'He went to a quiet place in the countryside and took a piece of rope with him. He climbed the tree and tied one end of the rope round his neck. Then he jumped. The rope pulled very tight around his neck and stopped him breathing. This is how he died.'*

#### Suicide by overdose

*'Normally tablets and medicines from the doctor are OK to take. But you only take as much medicine as the doctor tells you to. When you follow the right instructions, medicine can make you well if you are poorly. Grandma took too many tablets in one go. When you take too many tablets it is hard for your body to cope. It poisons your body and makes you so ill that you die. This is how Grandma died.'*

#### Suicide by overdose and alcohol

The above explanation can be adapted as in:-

*'.....Grandma took too many tablets all in one go and then she drank a lot of wine. When you take too many tablets and drink lots of alcohol together, it is hard for your body to cope.....'*

#### Suicide by jumping in front of a train

*'Dad went down to the railway line and he decided to jump in front of a train when it was coming towards him. The train was coming very fast and it did not have time to stop. It hit Dad. He was so badly injured when the train hit him that he died immediately.'*

#### Suicide by carbon monoxide poisoning

*'Alex drove off in the car and parked where not many people pass. He put a tube in the exhaust pipe of the car and put the other end of the tube into the car. Then, with the car engine running, he let the fumes from the exhaust go into the car. These fumes are poisonous and when you breathe a lot of them, you die. It isn't painful – he would have slowly become sleepy and eventually he died because his body couldn't live without oxygen.'*

#### Suicide by jumping

*'Sue went up to the top floor of the car park and jumped off. It was so high up that the fall from there hurt her very badly. When you are hurt that much, you die and that's what happened to Sue.'*



### Suicide by burning

*'Mum got some petrol in a can and poured it onto herself and then set the petrol on fire. The petrol burnt her so badly that she died. Mum would have died very quickly and though it would probably have been painful, the doctors said it would only have hurt for a very short time before she died.'*

### Other situations

There are of course many other ways to die by suicide such as drowning or shooting. The explanations given above can be adapted to fit other situations.

It is important to check what the child has understood after one of these explanations. They should feel informed without feeling too frightened.

If you would like any guidance on such explanations, please call the **Winston's Wish Helpline 08452 03 04 05**.

### Stage 5 – exploring possible reasons why the person chose to kill themselves

Most family members ask themselves the question 'why?' Why did someone in their family choose to take their own life? Children and adults may wonder why they didn't realise things were so wrong or wonder if they could have done something to make things better. People often think they might have been able to prevent the death, but even if they had known that something was wrong, they may still not have been able to change the course of events.

If you know some of the reasons that may have contributed to the person's decision to take their own life, it can be helpful to share these with your child.

It will be important to your child to know that there was nothing s/he had done or said – or not done or not said that made this happen. If it seems appropriate, it is also a time to reassure your child that the person who has died loved them and cared about them.

You might like to say something along the lines of the following.

When there appears to be a specific reason such as financial problems or relationship difficulties

*'Dad had lots of worries. He had lost his job and he was worried about money. I think he felt he had let us down because he didn't have a job. He worried so much that he thought he would be better off dead and that that would be better for us too.'*

*'Mum was worried about what would happen after we had stopped living together. And I think she worried whether all the arguments were upsetting you. I never imagined she'd feel so bad that she would think of suicide.'*

When it appears to be an impetuous decision

*'That night your brother had got into trouble with the police because he had been caught drinking and driving. He knew he would have to go to court. I suppose he thought he would*

*lose his job. He must have decided to kill himself on the way home that same night. Maybe the drink affected the way he was thinking.'*

When the person had little self-confidence

*'Mummy had lots of worries. Even as a young girl she never felt very good about herself. She used to think she wasn't good at what she was doing and that she could never be good enough. Sometimes when people feel like this for a long time, they choose to die to end the feeling.'*

When depression was a factor, leading to negative and irrational thoughts

*'Dad had been feeling very low for a very long time and he did not want to take medicine from the doctor. He kept hoping he'd feel better. He said in his note that he felt we'd be happier without him. If he hadn't been depressed, he would have realised that it's not true and maybe he would have been able to see a way through the illness.'*

When the reason is unknown

*'I really don't know why Jo chose to die. I suppose we will never know and that will be very difficult.'*

*'I know Dad must have felt very upset and confused to do something like this. It isn't something he would have done easily. He must have thought there was no other way out for him. It was his decision at a time when he was feeling very mixed up.'*

There is no set way to tell a child something as difficult as the fact that someone they know has chosen to kill themselves. Breaking the task up into the five smaller steps mentioned above may help you feel more in control and you can pace the stages to suit your child. As we said at the start, with an older child you may travel through all five stages in the space of a single conversation; with a much younger child it might be years before you discuss the reasons behind the suicide.

Conversations like these will be difficult and upsetting for everyone but afterwards you'll probably feel relieved you were able to be honest so as to give your child a solid foundation of trust in you.

*'In some ways, Jack seemed less bothered about the way he died. He asked me if he loved him and if so, why did he do it? I felt weary having to explain it over again and again. Eventually he found a way of understanding about depression and now his questions are more about his dad as a person.'*

### **Answering difficult questions**

Encourage children to ask questions. This will help you to find out what they are thinking and how they are dealing with the death. If you don't have an answer it is fine to say you don't know and do reassure the child that it was not a silly question to ask. Sometimes it can help to think ahead about questions that might get asked and then practice answers you are happy with.

It might help to ask your family doctor to answer specific medical questions so that the whole family can understand why the person's actions made them die (for example, how

does exhaust gas make you die) and also what sort of death it would have been. With a violent death, it is reasonable to assume that there would have been some pain or suffering. While it is difficult to talk about this, not talking does not stop a child worrying about it. Some reassurance that the death was quick and any pain of very short duration can help children deal with difficult facts.

Sometimes children ask whether they could have done anything to change what happened or if it is their fault the person died. This needs explaining because children often feel they have some sort of power over the people and events that matter to them.

*'Sometimes no matter how good we are or what things we say or do, if someone feels so bad that they want to kill themselves, there's nothing we can do to stop them.'*

*'Lots of us have wondered if we did something, or didn't do something to make them want to kill themselves – we've worried that it might have been our fault. But if someone feels very down about things and decides to kill themselves, then they've made the choice about what they want to do. It's no-one else's fault – it's their decision.*

*The sad thing is that sometimes people make that decision when they are feeling useless and don't like themselves much. I wish they'd realised they were important to us and didn't need to do this.'*

The most important thing to stress is that the person did not die because they no longer loved their child.

*'Whatever Mum was thinking, the one thing I know for sure is that she loved you with all her heart. She wasn't thinking straight or she would never have done anything to hurt you.'*

Children may worry about their other relatives doing the same thing.

*'I won't do the same thing. Like you, I have felt very, very upset and low since Jim died but I know that I will never choose to die like Jim. I know what it's like for those left behind after a suicide. At the moment, I still need to be sad and I will probably need to be sad and maybe angry for a long time. That doesn't mean I will kill myself.'*

### **Does suicide run in families?**

One fear that all families share is whether other members of the family will also die by suicide.

The factors that can bring someone to the point of suicide are many. And only the individual who dies by suicide can know how the various factors weighed with them. What is important is that those bereaved by suicide receive the skilled help and support that will make it unlikely that they will make the same choices. It is important for all children to have their resilience enhanced and encouraged in order to make them less likely to experience mental ill health.

There has been some evidence that knowing someone who has died by suicide may increase the chance of suicide attempts. This theory suggests that the previous suicide has lifted some of the taboo over the act. However, there is other evidence that the painful

experience of being bereaved through suicide along with appropriate help and support in journeying through the grief can in fact protect someone from making their own attempt.

### **Making opportunities to talk**

It can be difficult to find the opportunities to talk; this can be particularly true if the death occurred some time ago. You could use opportunities provided by news events, stories, TV programmes or a further family death to talk more about the person who died. Try to visit the grave, garden of remembrance or other special place and talk about the person who died. Also try to keep in contact with friends and family: it is easy to lose contact, especially if you feel people are still feeling guilty or blaming each other.

Children may raise the subject when you are least expecting it, but try to stay calm and take time to listen to what they are saying and asking.

### **Real memories**

Not everyone who dies is loved by everyone all of the time. Sometimes we can be fond of a person but hate their moods. Some people can behave in ways that are frightening, unkind or disloyal. Whether we loved a person or disliked them, we will grieve over their death. Similarly, family members react to a death in different ways: each will remember a different relationship with the person who died. If you had a difficult relationship, your grief is likely to be complicated. Other people might think: 'they didn't get on so she'll soon get over it.' But grief doesn't work that way. It is important that you and the children have the chance to remember the person who died honestly, not trying to make them perfect if they weren't.

### **Looking ahead**

If someone has died by suicide, it can be hard to hold on to positive memories: unhappy or unpleasant feelings may block everything else. To move on, we need to be able to handle all sorts of memories: the ordinary, the difficult and the precious.

If you've lived through many years of unsettled family life before the death, it can take a long time before you can recapture good, positive memories of the person who died. You may feel that the act of suicide has blocked out, or even destroyed, everything that went on before – including happier times. If the death was violent, memories of how they died can simply wipe out good memories for a long time. Feelings about the death often have to be faced and worked through before other, more positive memories can return.

Elsewhere on this website are many ideas to encourage children to remember the life of the person rather than their death. Memory box; calendar of memories; memory jar; 10 ways to remember; skyscape

*'Now we can look at his photo and think about him as a person. He will always be part of our family – regardless of how he died.'*

### **Facing the future**

Suicide raises so many difficult questions and feelings, that grieving can be complicated and it can be hard to look to the future with any optimism. Children and adults can be left wondering if there is something wrong with them for such a thing to have happened.

Confidence can be dented by a sense of failure. For children, a belief in the future is very important. Try to plan small events they can look forward to. Praise and encourage children's achievements whenever you can as a way of reinforcing their belief in themselves.

A secure, consistent home life with support from good friends will also help towards recovery. Don't be afraid to ask for help and it may be helpful for you and your children to meet others who have been through the same experience. Winston's Wish holds a residential group once a year during which children spend time with other children who have been bereaved through suicide on a programme that combines fun activities with grief work. Their parents/carers spend time nearby following a programme that allows time to reflect on their own stories as well as considering how to support the children.

Above all, be kind to yourself and give yourself time. It is hard to cope with any death, but the extra pain associated with a suicide probably means the healing and recovery will take longer. Letting go and moving forward does not mean forgetting.

Winston's Wish has supported hundreds of families who have somehow managed to piece their lives together again. All of them would have thought this impossible in the early weeks and months after the death, but they have found a balance between remembering the person who died and continuing to live their life.

*'I don't dream about him dying any more. I can live with his life and I can live with his death. I can go forward.'*

### **How many families?**

In the UK, on average, someone takes their own life every 80 minutes. Suicide is the second most mentioned cause of death in calls to the national helpline and accounts for 20% of all calls. It is estimated that in the UK 50,000 family members are 'profoundly' affected by suicide each year. For every suicide it is estimated that on average six people suffer intense grief. With around 5,000 suicides a year in England and Wales, the impact of suicide is immense.

### **Sources of support**

**Winston's Wish** – help for grieving families. There is a lot of information elsewhere on this site.

Helpline: 08452 03 04 05

Email: [ask@winstonswish.org.uk](mailto:ask@winstonswish.org.uk)

**Samaritans** – confidential emotional support for anyone in a crisis – 24 hours a day

Phone: 08457 909090

Textphone: 08457 909192

Email: [jo@samaritans.org](mailto:jo@samaritans.org)

Website: [www.samaritans.org](http://www.samaritans.org)

**The Compassionate Friends** – support for bereaved parents who have lost a child of any age and from any circumstance

Phone: 0845 123 2304  
Email: [info@tcf.org.uk](mailto:info@tcf.org.uk)  
Website: [www.tcf.org.uk](http://www.tcf.org.uk)

**Survivors of Bereavement by Suicide** – local self-help and support groups for those bereaved through suicide

Phone: 0870 241 3337  
Website: <http://sobs.admin.care4free.net/>

### **Useful reading**

If you would like to read more, here are some suggested publications. Links to ordering them can be found in the Shop section under other books.

### **A Child's Grief: Supporting a child when someone in their family has died**

By Julie Stokes and Diana Crossley  
Winston's Wish 2001  
ISBN 0-9539123-1-0

This booklet aims to help families cope with the death of a family member and provides a range of ideas for families about how to support their children.

### **Help is at Hand: a resource for people bereaved by suicide and other sudden, traumatic death**

By Keith Hawton and Sue Simkin  
COI for Department of Health 2006

This guide has been produced to help people who are unexpectedly bereaved. It also provides information for healthcare and other professionals who come into contact with bereaved people, to help them understand the impact of suicide

Copies can be obtained from DH Publications Orderline, PO Box 777, London DE1 6XH quoting 274206

### **Cry of Pain: Understanding suicide and self-harm**

By Mark Williams  
Penguin 1997  
ISBN 0 14 02.5072 7

This book sensitively and thoughtfully considers why people kill themselves, offering a greater understanding of suicidal behaviour.

### **The Savage God: A study of suicide**

By A. Alvarez  
Penguin 1974  
ISBN 0 14003 747 0

A thorough study of historical, social and psychological perspectives on suicide that is also passionate, personal and readable.

### **A Special Scar**

By Alison Wertheimer  
Routledge 1992  
ISBN 0 41501 763 7

This book discusses suicide from an adult perspective and can be an invaluable resource for those helping children and families bereaved through suicide

**Silent Grief**

By Christopher Lukas and Henry M Seiden

Jason Aronson Inc 1987

ISBN 0 76570 056 5

A 'survivor's guide' for those grieving the suicide of a family member, written by a 'survivor' of suicide and his doctor.

**Up on Cloud Nine**

By Anne Fine

Corgi Children's 2006

ISBN 0 55255 465 0

A story about the friendship between two boys, one of whom is in hospital after a serious 'accident'. The implication is that this has been a suicide attempt – the subject is handled with warmth and appropriate humour.

**No Time to Say Goodbye**

By Carla Fine

Doubleday Books 1997

ISBN 0 38548 018 0

The author shares her own story of the death of her husband by suicide and includes accounts from other families

**The Scent of Dried Roses**

By Tim Lott

Viking 1997

Honest and searching account of the author's attempt to understand and accept his mother's suicide and his own depression

**Night falls fast (understanding suicide)**

By Kay Redfield Jamison

Picador 2000

ISBN 0 74755 905 8

This account combines scientific research with personal stories