

Healing After a Suicide

Suicide leaves a painful legacy in the lives of people it touches. The pain is often deepened by the same stigma and taboo that stifles open talk about suicide. Everyone's bereavement journey is different. Even people within a family or circle of friends will experience the suicide loss of the same loved one in their own way. Yet it may help to know about some commonly experienced feelings and thoughts. Some of these may be familiar to you or to someone you are caring for following a suicide.

After a suicide, people may feel:

- ☹️ **Alone** Why do others avoid talking about the suicide and keep their distance?
- ☹️ **Sad** I'll miss him/her... a tragic end to a troubled life.
- ☹️ **Devastated** How could it have come to this?
- ☹️ **Angry** Why was so little support available?
- ☹️ **Afraid** Are these powerful feelings normal?
- ☹️ **Ashamed** How could this have happened in our family?
- ☹️ **Guilty** Did we do all we could?
- ☹️ **Abandoned** How could he/she have left me like this?

Other feelings will likely be present. Not all those named above will be experienced by everyone. Feelings are not right or wrong. They locate where we hurt and it does help to share them and talk them through with people we trust.

Struggles after a suicide can include:

- ☹️ **Disbelief** Was it really a suicide? It is so hard to accept.
- ☹️ **Ambivalence** She/he's no longer suffering, but I wish she/he'd found a way to stay alive.
- ☹️ **Coping** How can I get on with life while coming to terms with this suicide death?
- ☹️ **Review** I go over and over what happened—sifting events and conversations.
- ☹️ **Searching** How can I make sense of this and find meaning in the loss?
- ☹️ **Renewal** I'm seeking a way to carry on, perhaps reviewing values and priorities.

People's internal conversations following a suicide vary greatly. Other struggles may be present or more important. Talking things through provides focus and gains perspective.

Some have thoughts of suicide themselves after a suicide death and occasionally act on these thoughts. Find ways to KeepSafe while dealing with the pain of the loss.

Tell

Tell people you trust about your thoughts, feelings and struggles including thoughts you may have about self-harm or suicide.

Ask

Ask a person bereaved by a suicide about support they need and whether they have thoughts of suicide themselves.

Listen

Listen to the stories of the suicide bereaved—hear the pain, attend to the distress, support the search for meaning in the loss.

KeepSafe

KeepSafe from suicide while creating a safe place for people to share their sorrow and struggles and experience healing support.

Some Keys to Healing

1. Acknowledge the death and the suicide.

The wounds are not only over the loss but how and why someone suicided. This may initially evoke shock, disbelief, even denial. For some there is the additional trauma of discovering or identifying the body. And the endless questions which often remain unanswered, or unanswerable. Why did it happen? Could it have been avoided? Could I have done more to prevent it?

Resolving the death and the suicide both facilitate healthy grieving.

2. Attend to pain and distress.

Personal reactions to a suicide vary greatly. Typically overwhelming, changeable and even contradictory thoughts and feelings appear uninvited and won't go away. Initially, many feel swept along by these reactions, but increasingly there are opportunities to examine, explore and come to terms with them. People can be surprised by painful memories that resurface, particularly in response to anniversaries or personally significant events.

Taking the time to experience, express and explore the pain of the loss helps heal the wounds, even though the scars will remain.

3. Seek support and solitude.

There is usually a bond among those touched by the same suicide and emotional kinship in the presence of other suicide survivors. Many also gain perspective from seeking support outside the circle of the suicide bereaved. Social expectations about how one might respond to suicide deaths are poorly developed. Those grieving and their caregivers each need to play a role in shattering the stigma and journeying together into unknown territory. There are also times when it is necessary to be alone with one's own thoughts and feelings—bereavement is ultimately a personal journey.

Those inside and outside the circle of the suicide bereaved require sensitivity to the need for support and solitude—and to be able to seek and ask for what is needed.

4. Give healing time.

There is no standard schedule or timetable for grief. And while time does not heal all wounds, most indicate that the intense pain associated with the suicide lessens, even though emotional scars remain. Coming to terms with a suicide can be affected by personal factors, the level of support received, and circumstances before, during and after the death. What is recovered is not life as it was, but the ability to come to terms with life as it is and to create a meaningful future built around the loss, the bereavement experiences and the memorials in our minds.

Impatient advice from others (or from within) often says "get over it." But suicide is something people learn to live with rather than put behind them. Grief, like all wounds, heals from the inside out—and this takes time and patience.

5. Take an active role in recovery.

Any death can be confronting and disempowering. Suicide adds to this feeling in that those affected must come to terms with another person's choices. But the bereaved have choices, too—about how to respond.

The challenge is to make choices which face the loss, seek support, strengthen positive relationships, build a new future and facilitate healing.