When someone may have died by suicide

This information sheet aims to give guidance when someone may have died by suicide. It covers what might happen in the first few days, how you might feel at the time and in future, ideas for what to tell people, and what might help to support you.

It may not be clear whether the person has died by suicide, or the official cause may be given as something else, such as ‘accident’ or an ‘open verdict’. In this sheet, we use the terms ‘death by suicide’ and ‘bereavement by suicide’ as many of the same issues and feelings may apply when the cause of death may have been suicide but it is not clear.

There is no right way to grieve or respond when someone may have died by suicide. This information is based on what we have learnt from bereaved families and professionals. Everyone’s situation is different, and you can use whatever information here is helpful or relevant.

We also have a separate information sheet specifically about supporting children called Supporting children and young people bereaved by suicide.

The impact of bereavement by suicide
Any bereavement can be immense, but with suicide the ‘normal’ grieving process may be more complex, more intense and longer, although the actual experiences of grief may be similar to other bereavements. Death by suicide is particularly shocking, because it goes against our natural survival instinct that we should live and thrive. The suddenness and nature of the death can be deeply upsetting or harrowing and hard to make sense of. Some people feel a social taboo in discussing suicide, which can make it a difficult topic to talk openly about.

Families and professionals advise people to use the term ‘died by suicide’ rather than ‘committed suicide’ which can create stigma associated with ‘sin’ and ‘crime’. Today, many people’s views are more understanding and supportive towards families bereaved in this way. How we respond to the idea of suicide will be influenced by our own beliefs and culture, our family and our environment.

The first few days
The first few days are likely to be full of complex practical issues which focus on how the person died, rather than on how they lived. You may have many mixed thoughts and emotions, or feel completely numb and detached. You may have an immediate need to find answers, or feel ‘frozen’ in disbelief. For some people, this is helpful in managing some of the decisions and tasks that are needed in the first few days. The more shocking the news, the longer you might feel disbelief that it has happened.

The circumstances and immediate impact
The person who found the body may be particularly shocked and badly affected by the event. They may experience feelings of horror, fear and feeling physically ill, or numb. They may have flashbacks (where they re-live the experience as if it is happening again), have nightmares or be unable to sleep.

Such reactions would be expected in the first few weeks or months, and their experience may have affected their ability to process and create normal memories. Being supported to talk about what they saw or experienced may help them to start to process what happened. Some people may not be able to talk about the event, and some need some additional help, for example if they continue to have the symptoms described above, months after the event. They can seek professional support or an assessment for trauma symptoms through their GP.
The police and a coroner may be involved, depending on the circumstance of the death. A coroner’s officer can be a good point of contact, and may be able to suggest further sources of support. The police may need to take away some belongings as evidence to help with any investigation, including any note or message that the person left. You can ask for a photocopy of the note before it is taken away, and you can also ask for the original to be returned after the investigation.

You may need to take part in an initial hearing so that the coroner can issue an interim death certificate. This certificate allows you to make arrangements for a funeral.

There may be interest from the media which you might want to respond to, but you should feel no pressure to do this. It is important that you do whatever feels right for you and the family.

**What to say**

How do we find the right words for ourselves, for family, for children and for others? Some people find the word ‘suicide’ very difficult or impossible to say. However if any details, including the word ‘suicide’, are likely to appear in the media, social media or in your community, it is important that family, including children, hear this from you or from someone else they trust first.

It may help to practice the words beforehand, talk it through with someone or call our helpline for support. You may want to break the news into stages and only say what you need to at each stage. Each stage might be days, weeks or even years apart, depending on what you feel is needed at the time.

Depending on who you are talking to, and how much is known about the death, here are some ideas of words you could use:

“[Name] has died. We don’t know how they died yet but there will be an investigation because it was sudden and unexpected”

“It is too soon for us to say how she died”

“I can’t say any more about it, but thanks for your concern”

“[Name] has died. It looks like she took her own life. We can’t give you any more details, but this is how you can help…”

Certain people you may want to tell yourself, and close family members can help you by telling other people. Some people may be glad to be given this, or another, specific practical task to do.

**Telling children that the person has died**

Try to do this as soon as possible, as children can overhear the news from other sources. It is best for them that they hear it from someone they are close to and who they trust.

- Use clear words like ‘he has died’. Avoid euphemisms such as ‘he is in the stars’ or ‘he went to sleep’.
- Say that you have something very sad to tell them, and then say something very simple and clear, for example: “Dad died last night.”
- Check they understand what ‘died’ means.
- Be guided by their response. They may cry, show they don’t want to hear any more, or ask questions. Answer any questions honestly but don’t give more information than you need to.

There is more detailed information about talking to children in our information sheets: **Supporting children and young people bereaved by suicide** and **Explaining to young children that someone has died**.

**Viewing the body**

Although our instinct may be to protect ourselves and any children from seeing the person who has died, and seeing how they died, many bereaved families have reported that seeing the person’s body was helpful. However difficult it is, the truth can be more bearable than what we don’t know, because our imagination can haunt us in a way that facts and real images are unlikely to. But it is always your decision to see the body or not, and you may need to take some time to make this decision. It can help to talk it through with someone, and to prepare for the viewing by asking the coroner’s officer, the hospital staff or funeral director for information about how the body will look and what to expect.

Different cultural customs and beliefs will also be important in deciding whether to see the body. If someone does want to see the body it is important to respect this wish, as long as they have been told what to expect. If the body is disfigured, it could be arranged to see just part of the body, such as the person’s hand, or some clothing. See also our information sheet: **Viewing a body with a child**.
Suicide brings particularly strong feelings which are often conflicting, including shock, anger, despair, guilt, shame, blame, relief, betrayal, isolation, confusion, exhaustion and low self-esteem. Many people’s grief will stay ‘on hold’ until after the full inquest, which may be many months ahead.

There may be a desperate ‘need to know’ in addition to all the other grief responses to sudden death. Thinking can become circular, endlessly trying to find answers to ‘why?’ and ‘what if?’ questions, searching to make sense of what has happened in a way that feels bearable. The loss of ‘what might have been’ has an even more powerful impact when a death is by suicide because of the person’s decision to die. The greatest longing can be to go back and put right the terrible wrong of their death, to replay the film and have a different ending.

Questions can seem unanswerable. Did we fully know the person who has died if they chose to end their life? How can anyone else understand the depth of pain we are experiencing? What do we do with the confusing feelings of fury and loss and longing? Some people might want to say to the person who has died: “If you loved me, how could you do this to me and leave me with this mess?”

Family members may grieve in many different ways. Your grief will reflect the relationship you had with the person who has died, as well as whether the death was completely unexpected or not. The feelings of a partner will differ to that of a parent. The grief of siblings and friends may sometimes be hidden or their reactions may feel overwhelming. Family structures can be radically disturbed. It may feel that you are supporting others when it is your partner or child who has died. Some people say that they put on a mask to help protect themselves or others from their true feelings.

The impact of the shock of suicide is often underestimated. It is physically exhausting and can feel like a physical wound. Because we tend to live in the blissful belief that bad things happen to other people, when something as traumatic as suicide happens, it can shake our confidence and feeling of security in the world. The impact can be all-consuming, leaving almost no mental space for any other activity.

What might help?
Expressing feelings: Families report that finding ways to express thoughts and feelings, without being judged, is one of the things that can help the most. Talking within the family or with friends can be very helpful, but in some cases may feel too difficult. You may wish to talk to someone through a bereavement support service, or a support group. You can also call a confidential helpline, such as Child Bereavement UK’s helpline on 0800 02 888 40. Other ways to express thoughts and feelings are by keeping a journal, or through creative activities such as painting or gardening.

Rituals: Rituals can help with expressing complex and abstract emotions. Some rituals, such as a funeral, may be delayed or not possible due the circumstances or the investigation into the death. You can create your own family ritual – it could be as simple as lighting a candle or reading a poem.

Remembering and creating memories is generally helpful in bereavement but for those bereaved by suicide, harsh or frightening images associated with the death may block the happier memories of the person. However, trying to avoid these painful memories can get in the way of the grieving process. It may help to focus on different and positive parts of the life of the person who has died, using photographs, stories about them or by using a memory box or memory book (see Resources section).

Looking after yourself: Although it may be difficult to do this, try to eat well, and make time for any activity that might help you feel better physically. We feel grief physically in our body, and improving physical wellbeing can help to reduce feelings of exhaustion, isolation or helplessness. A walk can be as helpful as a major workout in the gym. Physical activity is also a good way of expressing and releasing strong feelings such as anger, whilst avoiding hurting yourself or others. A punch bag, or just punching a cushion, can help adults and children to release angry feelings in a safe way.

Supporting children
You know your children best, but here are some ideas on what can help support children:

- Give simple, age-appropriate information about what has happened, and answer any questions honestly but without giving more information than they have asked for.
- Give repeated reassurance that they are in no way responsible for what happened.
- Keep routines as normal as possible and explain any changes. Ensure that planned activities happen, as this will help children to feel secure.
- Involve and inform other adults who see your child regularly, such as teachers and parents.
of your child’s friends, so that messages from other people are consistent.

- **Acknowledge feelings** they might have now and in future, and say that it is OK to have lots of different feelings.
- **Useful ways to express feelings** other than talking include drawing, writing or playing.
- **Encourage them to build memories** of the person, by collecting items such as photos, music on a CD, or by writing or drawing memories of their own. A memory box or book can become their own special place for this.

Our information sheet ‘Supporting children and young people bereaved by suicide’ has more detailed information.

**For professionals supporting a family**
As with any bereavement, it is impossible to make things ‘better’ for someone who is grieving, but the following may help if you are supporting a family bereaved by suicide:

- Listen to, and follow the wishes of the family, avoiding making judgement or giving your own opinion about the person who died or what you think the family should be feeling.
- Use the language that the family are using, such as ‘died by suicide’.
- Offer information about practical options, and emotional support.
- Offer support with practical decision-making, if needed.
- Offer follow-up meetings or phone calls if appropriate, and keep to any follow-up arrangements.

Not all families need or want professional support, but research suggests that those bereaved by suicide tend to seek support. Support interventions include individual or family face to face support, support groups, counselling and specific therapy, for example for traumatic bereavement.

Child Bereavement UK offers a comprehensive range of training and development events for professionals (see our website for details), and you can also call our confidential helpline on 0800 02 888 40 for guidance and personal support.

**Resources and further reading**

**Child Bereavement UK information sheets**
- Explaining to young children that someone has died
- Supporting children and young people bereaved by suicide
- Viewing a body with a child

The following are available from bookshops or online booksellers, unless otherwise stated.

**Help is at hand: support after someone may have died by suicide** (2015)
Department of Health
Comprehensive and sensitively written handbook of useful information and research. Download a free copy from [www.supportaftersuicide.org.uk/help-is-at-hand](http://www.supportaftersuicide.org.uk/help-is-at-hand) or call 0300 123 1002 to order a copy.

**Beyond the rough rock: supporting a child who has been bereaved through suicide**
Winston’s Wish
Guidance and support for supporting children and families bereaved by suicide.
[www.winstonswish.org](http://www.winstonswish.org)

**Support after a Suicide**
booklet by Survivors of Bereavement by Suicide. This organisation also offers services including local support groups, online forum and a national helpline.
[https://uksobs.org/](https://uksobs.org/)

**Coping with sudden death**
Booklet, pdf or online guide by the organisation Sudden, which includes guidance aimed at families at the time of the death. They also produce ‘Someone has died suddenly’, a book for children.
[www.suddendeath.org](http://www.suddendeath.org)
Support around an inquest
The Coroner’s Court Support Service aims to help, guide and support everyone attending an inquest. They offer a helpline and guidance via their website and by email.
https://coronerscourtsupportservice.org.uk/
Helpline: 0300 111 2141 (Monday – Friday 9am – 7pm, Saturday 9am – 2pm)

For those supporting someone affected by suicide
Finding the words: how to support someone who has been bereaved and affected by suicide
UCL in association with Support after Suicide Partnership
http://supportaftersuicide.org.uk/