# **COPING WITH SUICIDE LOSS**

## National Suicide Prevention Lifeline (24/7) 1-800-273-8255

It's important to remember that you can and will overcome the pain.

If you have lost someone to suicide it is important to know that you are not alone. Each year over 33,000 people in the US die by suicide. Research shows that in the course of a lifetime, 85% of us will lose someone we care about to suicide. That means that there are millions of people who, like maybe you today, are trying to cope with this painful loss.

The loss of someone we cared about by suicide is often shocking, painful and unexpected. The grief that ensues can be intense, complex, and long term. Grief work is an extremely individual and unique process; each person will experience it in their own way and at their own pace. Grief does not follow a linear path. Furthermore, grief doesn't always move in a forward direction.

#### **HOW TO COPE**

- You may find that it helps to reach out to family and friends. Because some people may not know what to say, you may need to take the initiative to talk about this, share your feelings, and ask for their help. Even though it may seem difficult, maintaining contact with other people is especially important during the stress-filled weeks after a loved one's suicide.
- Keep in mind that each person grieves in his or her own way.
- Each person also grieves at his or her own pace; there is no set rhythm or timeline for healing.
- You may experience unexpected waves of sadness; these are a normal part of the grieving process.
- Some survivors find comfort in community, religious, or spiritual activities, including talking to a trusted member of the clergy.
- Many survivors use the arts to help them heal, by keeping a journal, or writing poetry or music.
- Try to take care of your own well-being; consider taking to a counselor or another professional if needed.
- Be kind to yourself.

### Some additional suggestions:

- > Struggle with "why" it happened until you no longer need to know "why" or until you are satisfied with partial answers.
- > Know you may feel overwhelmed by the intensity of your feelings, but all your feelings are normal.
- Anger, guilt, confusion, forgetfulness are common responses. Remember you are in mourning.
- Be aware you may feel appropriate anger at the person, at the world, at God, at yourself. It's okay to express it.
- > You may feel guilty for what you think you did or did not do. **Guilt** can turn into regret through forgiveness.
- > Having suicidal thoughts is not uncommon. It does not mean that you will act on those thoughts.
- Remember to take one moment or one day at a time.
- Find a good listener with whom to share. Call someone if you need to talk.
- Don't be afraid to cry. Tears are healing.
- Give yourself time to heal.
- Remember, the choice was not yours. No one is the sole influence in another's life.
- Expect setbacks. If emotions return like a tidal wave, you may only be experiencing a remnant of grief, an unfinished piece.
- Try to put off major decisions.
- Give yourself permission to get professional help.
- Be aware of the pain of your friends.
- **Be patient** with yourself and with others who may not understand.
- > Set your own limits and learn to say no. Steer clear of people who want to tell you what or how to feel.
- Call on your personal faith to help you through.
- It is common to experience physical reactions to your grief, such as headaches, loss of appetite, inability to sleep.
- The willingness to laugh with others and at yourself is healing.
- Wear out all your questions, anger, guilt or other feelings until you can let them go. Letting go doesn't mean forgetting.
- Know that you may never be the same again, but you can survive and even go beyond just surviving.

If you recently experienced a death or other loss, these feelings may be part of a normal grief reaction. But if these feelings persist with no lifting mood, ask for help.

Risk factors are often confused with warning signs of suicide, and frequently suicide prevention materials mix the two into lists of "what to watch out for." It is important to note, however, that factors identified as increasing risk are not factors that cause or predict a suicide attempt. Risk factors are characteristics that make it more likely that an individual will consider, attempt, or die by suicide. Protective factors are characteristics that make it less likely that individuals will consider, attempt, or die by suicide.

#### **Risk Factors for Suicide**

- Mental disorders, particularly mood disorders, schizophrenia, anxiety disorders and certain personality disorders
- Alcohol and other substance use disorders
- Hopelessness
- Impulsive and/or aggressive tendencies
- History of trauma or abuse
- Major physical illnesses
- Previous suicide attempt
- Family history of suicide
- Job or financial loss
- Loss of relationship
- Easy access to lethal means
- Local clusters of suicide
- Lack of social support and sense of isolation
- Stigma associated with asking for help
- Lack of health care, especially mental health and substance abuse treatment
- Cultural and religious beliefs, such as the belief that suicide is a noble resolution of a personal dilemma
- Exposure to others who have died by suicide (in real life or via the media and Internet)

#### **Protective Factors for Suicide**

- Effective clinical care for mental, physical and substance use disorders
- Easy access to a variety of clinical interventions
- Restricted access to highly lethal means of suicide
- Strong connections to family and community support
- Support through ongoing medical and mental health care relationships
- Skills in problem solving, conflict resolution and handling problems in a non-violent way
- Cultural and religious beliefs that discourage suicide and support self-preservation

The following signs may mean someone is at risk for suicide. The risk of suicide is greater if a behavior is new or has increased and if it seems related to a painful event, loss, or change. If you or someone you know exhibits any of these signs, seek help as soon as possible by calling the Lifeline at 1-800-273-TALK (8255).