



SUICIDE GRIEF: SUPPORTING CHILDREN AND FAMILIES AFTER A DEATH BY SUICIDE

In the words of Iris Bolton, “surviving the death of a dear one is to endure great pain. Surviving *suicidal* death is to compound that pain with embarrassment, private humiliation and tremendous feelings of guilt and anger.”

This resource gives practical advice on supporting children and families who are grieving a death by suicide. For more tips or resources on bereavement support, visit katesclub.org.

STOP THE STIGMA

First, know that language matters. Using the phrase “died by suicide” helps reduce stigma around suicide. Did you know about the stigma around suicide?

- Some religions won’t bury a person who died by suicide.
- Talking about death by suicide is taboo in many cultures.
- There is a lot of blame and shame.
- People don’t know what to say to someone who experienced a death by suicide, further isolating them.
- Survivors of death by suicide commonly experience loneliness and isolation.

STATISTICS ABOUT SUICIDE

We know that suicide is as underreported as drug overdoses. Some deaths by car accidents may even be suicides, though they are considered accidents. We also know that 90% of all suicides are associated with a diagnosable mental health disorder or substance abuse disorder.

Here are more statistics about suicide:

- Suicide is the 11th leading cause of death in U.S.
- Suicide was the 2nd leading cause of death among individuals between 10 and 34 years of age.
- In 2023, the suicide rate among males was nearly 4 times higher (22.8 per 100,000) than among females (5.9 per 100,000).

There are also some groups at a greater risk for suicidal ideation, suicidal attempts, and death by suicide. These groups include:

- **Veterans:** Veterans have an adjusted suicide rate that is 52.3% greater than the non-veteran US adult population



- **Sexual and Gender Minorities:** High school students identifying as lesbian, gay, or bisexual report attempting suicide in the prior 12 months four times more than high school students who identify as heterosexual.
- **Middle-aged Adults:** Middle-aged adults (aged 35-64 years) account for 47.2% of all suicides in the United States, and suicide is the 9th leading cause of death for this age group.
- **Tribal Populations:** Suicide is the second leading cause of death among American Indian and Alaska Native youth ages 8 to 24, and American Indian and Alaska Native youth aged 10-24 have the highest rate of suicide of all demographic groups.

These groups are at greater risk because they have a greater chance of experiencing other risk factors linked to suicide, including:

- Substance misuse
- Job-related or financial concerns
- Relationship discrepancies
- Physical or mental health concerns
- Easy access to lethal means
- Adverse childhood experiences (ACEs)
- People bereaved in childhood have a higher risk

THE “WHY”

There are many reasons why someone may die by suicide. They may include:

- Revenge
- Reunion with a person who died
- Physical pain
- Mental or emotional pain
- Perceived burdens
- Hopelessness
- Impulsiveness
- Problem solving
- Thinking it will help others

MISCONCEPTIONS ABOUT SUICIDE

Talking honestly about suicide does not give others the idea to take their own lives.

In fact, understanding mental illness and suicide helps surviving family members to be watchful about their own health, and to take preventative steps when something is wrong.

EMOTIONS AND REACTIONS

These are some common emotions and reactions for survivors of death by suicide:

- Sadness and disbelief: Shock and overwhelming sadness, almost feel numb



- **Guilt:** "What if..." "I could have..." or "It's my fault."
- **Anger & Blame:** At the person who died, at other family members, at oneself, at God.
- **Confusion:** "I just don't understand." or "It doesn't make sense."
- **Shame:** "I feel disgusted at myself." or "How could I have not known?"
- **Fear:** "What now? How will I move on??"
- **Relief:** "At least they are no longer suffering, and I no longer need to worry about them"
- **Denial:** "I don't want to talk or think about it."
- **Regret:** "I wish I paid more attention...I should have done something."
- **Avoidance:** Jumping to tasks, adding to your plate, isolation.
- **Somatic Responses:** Headaches/body aches, changes in appetite, changes in sleeping patterns, changes in energy levels, etc.

IMPACT ON THE FAMILY

Adults in the family are usually so traumatized by the death that they have a hard time thinking straight, let alone how they are going to talk with their children. Some adults who have young children won't tell them at all.

Adults also tend to blame themselves or the deceased, and children quietly feel like it's their fault.

However, not all family members will feel guilty. Some may experience a sense of relief. The answer to "why" may never be answered, and some may be okay with that. We also know that not all suicide grief will lead to complicated grief.

TALKING TO CHILDREN ABOUT DEATH BY SUICIDE

This is a sensitive topic, but it must be talked about with kids of all ages. If adults don't talk about the death, children will sense something is wrong and imagine all sorts of things.

It is important to consider the developmental stage of the child. Young children up to about seven need simple and short explanations. They will ask why, and it's okay to say you don't know why.

Remember that young children take what you say literally, so it is best to avoid phrases like "lost" or "passed away." For example, if you say, "We lost Daddy," a child might not understand why we can't go find Daddy.

You can say phrases like:

- "When someone dies by suicide, their body is no longer working anymore."
- "Something was wrong with their brain that made them feel bad and caused them to not want to live anymore."
- "They loved you a lot."



When talking to school-aged children, you can remind them that people who die by suicide often do so because they feel there is no other way to solve their problems or to end the pain they are feeling. They may have had depression that made them feel awfully sad, hopeless and confused. However, most people who are depressed are not suicidal, even though people who are suicidal can be depressed.

You can say phrases like:

- "Your mom had a disease called depression, which made her feel sad and/or angry. Because of her depression, she could not think clearly like we do."
- "She could not think of any other way to get help or end her pain except to end her own life."
- "Your dad was very upset about losing his job. He felt ashamed. He just didn't know how to handle his emotions and thought it would be better if he was dead."

SUPPORTING CHILDREN AND FAMILIES WHO EXPERIENCED A DEATH BY SUICIDE

Death by suicide remains stigmatized, but we can all work together to reduce that stigma. It's important to educate ourselves from groups that specialize in supporting those who have experienced death by suicide. We should also support survivors with compassion, honest conversation and listening without judgment.

Professionals who are interested in interventions and activities to do with survivors should contact us at info@katesclub.org or katesclub.org.



← Visit katesclub.org for more resources.