After a Suicide: Answering Questions and Assisting Students
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Overview:
The aftermath of a youth suicide is a sad and challenging time for a school or a community. The major tasks for suicide postvention are to help youth manage the understandable feelings of shock, grief and confusion and to prevent further suicides.

The research literature estimates that once a suicide happens the chances of another death by suicide increases dramatically in the adolescent and young adult population. The following suggestions are intended to guide teachers, parents, and others working with youth during this difficult time.

- It is important to balance being truthful and honest without violating the privacy of the suicide victim and his/her family and to take care not to glorify their actions.
- It is Important to have the facts of the incident, to be alert to speculation and erroneous information that may be circulating and assertively, yet kindly, redirect students toward productive, health conversation.
- Center for Disease control research has found teenagers and young adults to be the most susceptible to suicide contagion. Those believed to be most at risk include the following:
  - Students who backed out of a suicide pact
  - Students who had a problematic relationship or a recent negative interaction with the decedent
  - Students who now feel they missed warning signs
  - Students with their own set of childhood adversities or previous suicidal thoughts or behavior who need not have known the decedent.

- Numerous professional associations caution that memorials not be dramatic and permanent and encourage activities that focus on living memorials such as funding suicide prevention.
- National research has found that talking with youth about suicide does not implant the idea of suicide, and in fact provides an opportunity for youth who are thinking about suicide to unburden themselves and get help.
- Protective factors identified by the World Health Organization are the following:
  - Positive connections at home, school, and with other youth
  - Religious involvement
  - Lack of access to the means for suicide
  - Access to mental health care and awareness of crisis hotline resources.
• It is important to let parents and youth know that everyone (including youth) can play a key role in suicide prevention.

**How to Talk to Youth After a Peer Dies by Suicide**

Do not be afraid to bring up the topic. Research has shown that talking about suicide does not implant thoughts of suicide.

*I heard about the suicide of your classmate. I am so sorry that this has happened. Teenagers shouldn’t have to say goodbye to a friend and not this way.*

- How are your friends dealing with this? How are you dealing with this?

- Suicide is a shocking death and it can make grief feel more complicated. The way that people react is also connected with how close they were to the person or even what they are going through in their lives at the time of the death.

- Suicide is very complicated and can feel very confusing.

- I know that people can have lots of feelings after someone takes their life. We can feel confusion, anger, anxiety, sadness, guilt, or even just feel numb. We can have trouble getting our mind off of the person and we may not be able to stop thinking about the way they died. Sometimes our bodies express our feelings and we could have trouble sleeping or have nightmares, or not feel like eating, have headaches or stomachaches or just feel tired all the time. We can have trouble concentrating and focusing and we may not feel like being with anyone or doing the things we usually like to do. After a suicide we can even begin to worry that someone else we care about will take their life. These thoughts and experiences are normal right after the death and even for some weeks. However, if these feelings don’t begin to lessen as time goes on or they feel even worse it is time to tell someone that can help you.

- Since the suicide, have you or any of your friends had any of these experiences that I have described?

- I want to ask you if you or anyone of your friends have ever had thoughts of suicide? What kinds of thoughts have you had?

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- If you ever did begin to have those kinds of thoughts it would be important to tell me or another adult that you trust about them so you can get help. Depression can trick people into believing that the bad way they feel now will never go away and that the only way to stop the pain is to kill yourself. That is so untrue. Depression and thoughts of suicide can be treated like any other medical illnesses and the person can get better.

- I want you to always remember that there is no problem that we can’t solve. There are people that love you and can help you. Suicide is never, ever an answer.

- Life is sometimes hard and it’s important to have an “A” team walking though it with us. Let’s figure out who your “A” team is. If you were struggling with depression or thoughts of suicide or any other serious problem, who would you go to for help?
Commonly Asked Questions by Youth and Appropriate Responses:

**Why did he/she die by suicide?** We are never going to know the answer to that question as the answer has died with him/her. What we do know is that 90% of people that die by suicide have a mental health disorder at the time of the death. Things like depression or anxiety or substance abuse are examples of mental health disorders. These disorders can feel very overwhelming and can make a person believe that they will never go away and the only way to stop the pain is to kill yourself. The truth is these disorders are very treatable and people get well and feel better. The feelings of everyone left behind to make sense of it is the focus now.

**What method did they use to end their life?** How he/she died isn’t important. If a person is insistent about knowing, answer specifically with brief information as to the method such as he/she died by hanging or they used a gun. Do not go into explicit details such as what was the type of gun or rope used of the condition of the body, etc.

**Why didn’t God stop him/her?** There are varying religious beliefs about suicide and you are free to have your own beliefs. However, many religious leaders have used the expression “God sounded the alarm but could not stop him/her. God has embraced them yes, and he/she is in whatever afterlife you believe in, but God is actually saddened that he/she did not stay on this earth and do God’s work over their natural lifetime.”

**Didn’t he/she make a poor choice and is it okay to be angry with them?** They did make a very poor choice. The suicide was a very big mistake and the person could have solved their problems in a better way. It is very normal to have feelings of anger and many other feelings in the aftermath of suicide. You can care about someone very much but still be angry about something they did, or feel angry that they left you, or didn’t give you a chance to help them.

**Isn’t someone or something to blame for this suicide?** The suicide victim made a very poor choice, and there is no one to blame. The suicide of a young person has been compared to throwing a rock into a pond with ripple effects in the school, church, and community. There is often a search for a simple explanation. Suicide is a multifaceted event and psychological, biological, and physiological elements were all present to some degree. The suicide is no one’s fault.

**How can I cope with this suicide?** It is important to remember what or who has helped you cope when you have had to deal with upsetting things in your life before. You can turn to the important adults in your life for help and share your feelings with them. It is important to maintain normal routines, proper sleeping and eating habits and to engage in regular exercise. Please avoid drugs and alcohol. They may seem to help in the short run, but can make grief and even depression worse. Resiliency which is the ability to cope with adversity is a learned behavior. Everyone does the best when surrounded by friends and family who care about us by engaging in healthy activities, and by accessing physical and mental health care when needed.

**What is an appropriate memorial to a suicide victim?** The most appropriate memorial is a living one such as becoming involved in suicide prevention efforts. The American Association of Suicidology cautions that permanent markers or memorials such as plaques or trees planted in memory of the deceased dramatize and glorify their actions. Any thing that glorifies the suicide victim will contribute to other teenagers considering suicide. Reaching out to the victim’s family and funeral attendance are also appropriate in coping with grief reactions.
What are the warning signs of suicide? The most common signs are the following: making a suicide attempt, verbal and written statements about death and suicide, fascination and preoccupation with death, giving away prized possessions, saying goodbye to friends and family, making out wills, and dramatic changes in behavior and personality.

What should I do if I believe someone to be suicidal? Listen to them, support them and let them know that they are not the first person to feel this way. There is help available, and mental health professionals such as counselors and psychologists have special training to help young people who are suicidal. Do not keep a secret about suicidal behavior even if your friend asks you to do so. Please get an adult to help you. This is too big a responsibility and keeping a secret about suicide is not a fair request of a friend.

How does the crisis hotline work? We are very fortunate in NJ to have several crisis helplines. One is the Second Floor that is available 24 hours a day and manned by trained volunteers. They can be reached at 888-222-2228. Another is the NJ Hopeline at 855-654-6735, and the National Suicide Hotline and they can be reached 24 hours a day at 1-800-273 TALK (8255). The calls are free and confidential, and caring trained individuals are available 24/7 to help.

How can I make a difference in suicide prevention? Know the warning signs, listen to your friends carefully, and do not hesitate to get adult help for yourself or someone you know.