

APPENDIX 1

Survivors of Bereavement by Suicide

A charitable organisation that has a website page for professionals dealing with bereavement by suicide. It outlines the ways that they feel this differs from other types of bereavement

- Circumstances of the loss: a death by suicide is usually sudden, often unexpected and may be violent. These factors increase the degree of shock and trauma experienced compared to many other types of bereavement, and the bereaved may develop symptoms of post-traumatic stress disorder, even if they did not witness the death or find the body
- Emotional and physical reactions: bereavement by suicide can bring intense and a wide range of emotions and physical reactions which may be unfamiliar, frightening and uncontrollable. People who have been bereaved by suicide may become vulnerable to thoughts of suicide themselves.
- Survivors' questions: most people bereaved by suicide are haunted by two questions – “why did the person take their life?” and “could I have somehow prevented it?” These are impossible questions to answer and eventually the person may have to either have to accept that they will never know or settle on an answer which they can live with. It is natural that the bereaved person will take some considerable time in exploring these questions and it is an important part of the grieving process. However, it can also be damaging if they are unable to reach a stage where the questions occupy less of their thoughts or if they cannot find an answer they can accept.
- Stigma and isolation: death by suicide, even more than other types of bereavement, makes many people uncomfortable and unsure how to react. There is still a stigma attached to suicide, rooted in centuries of history and this generates misplaced associations of weakness, blame, shame or even sin or crime. This stigma can prevent people from seeking help when they need it and others from offering support when they want to. There may be a desire to deny that the death was a suicide – this may be driven by cultural values or from a sense of denial or of shame. This can create further confusion in an already complex situation. Many people who have been bereaved by suicide find that they feel isolated. Others may avoid them, perhaps not knowing what to say or because they don't want to upset the person. The sense of isolation may be especially acute if the bereaved person perceives other people to be uncaring or judgmental. It may also be that the bereaved person avoids contact themselves – they may struggle to share their own feelings because they are fearful themselves of what they are experiencing, they don't want to upset other people or they may worry about how to answer questions such as “how did he die?”
- Family and community tensions: whilst family and friends are often a great source of support, they can also be a source of tension and conflict. Sometimes families struggle to communicate, protective instincts kick in and they may be worried about causing more pain or about having a different view or feeling to others. Because the range of feelings and emotions experienced after a suicide can be so unfamiliar and

frightening, people may be uncomfortable or scared to share. Existing tensions and difficulties in family relationships can be surfaced as a result of the shock and trauma. Some people cope with their pain by blaming another person for the death – this may go as far as excluding them from the rest of the family, denying them the opportunity to attend the funeral and withholding information about the investigation. This can lead to huge rifts and a deep sense of hurt and isolation being added to the loss.

- Lack of privacy: when someone dies by suicide, it can be difficult to maintain privacy. There may be emergency services at the scene and visits from police. There may be media attention – this can happen when the person dies and may be repeated after the investigation by the coroner or procurator fiscal. The inquest is held in a public court of law and anyone can attend – in certain circumstances reports will be made which remain on publicly accessible databases.
- Investigations: the investigation by the coroner or procurator fiscal is a source of considerable concern for those bereaved by suicide. The process can be lengthy; the proceedings are unfamiliar and the language is legal and technical. The process is open to public attention and there is often media reporting. There may also be additional investigations e.g. if the death happened whilst the individual was under the care of another agency e.g. in prison or if they were receiving mental health treatment. In addition to being an added strain, investigations may reveal information about the bereaved person which was unknown to their family and friends.

APPENDIX 2

DEATH OF A CHILD

(Information from www.childbereavementuk.org for parents dealing with the death of a child)

The funeral

You can create a ceremony that really expresses the spirit of the person who has died. Take time to consider the options. Whatever you decide, the memory of a beautiful service that felt absolutely right will bring you comfort in the future.

Visiting the grave

This can be a way of 'visiting' the person who has died. For many people it is a chance to put the rest of the world aside. You may find that telling them your news, expressing your feelings to them and showing your love through flowers and other gifts becomes an integral part of your mourning.

A memory box

You can make or buy a special box in which to put precious possessions. These could include letters or cards from friends or dried flowers from the funeral. You could also put into the box treasured things which belonged to the person who has died such as diaries or letters. Ready-made memory boxes often have sections for different keepsakes and a clear plastic cover on the lid for a photograph.

A remembrance book

Creating a book in memory of the person who has died can be a healing process. Include photographs, poems, letters or your own thoughts. In the future the book will bring your memories back to life.

A journal

Writing a diary of your grieving process can be useful for a number of reasons. The writing itself may be cathartic: putting your feelings into words can help to release some of the pain. Later, you will be able to look back on how you felt and to realise that however bad it was, you survived. That knowledge can help you to realise that whatever you are going through now will also pass. How you use the journal is, of course, up to you - some people sketch, others write down memories, others pour out feelings, yet others do a combination of all of these. You may choose to fill your journal with something entirely original.

Artwork

If you like sewing, stitching a sampler, and framing it can be a lovely option. You could paint a picture and frame that. Making anything in the memory of the person who has died connects you to them and gives you something to treasure.

A candle

Lighting a candle and reading a special prayer or poem can be a simple but powerful way of commemorating an anniversary.

A special walk

One family sent a beautifully illustrated leaflet about a special walk in memory of a little girl. The leaflet showed the route, described the girl and invited anyone who was interested to go on the walk. It was about two miles long, followed roads, went through a wood and ended by a river. Along the way were little hand-carved commemorative plaques with a few lines of a poem or a line drawing. You could create your own special walk.

Planting trees or shrubs

Some people plant a tree or a shrub and have a commemorative plaque set up beside it as a way of remembering. Choose a hardy shrub or tree and make sure you plant it in a place that you will always be able to visit. If you have no place of your own to plant a tree, you may be able to get permission to plant one in a park or other public area.

In memory of

Some families, particularly when a child has died, like to create a charity or a scholarship in their memory - a living memorial to the person. This can be a way of healing the wounds of the person's death. You can invest in a cure for the disease that led to their death, develop their field of interest or continue their work.

Remembrance service

A number of organisations such as Child Bereavement UK, Cruse (www.crusebereavementcare.org.uk) and Sands (Stillbirth and Neonatal Death Charity - www.uk-sands.org) hold national annual memorial services. Hospitals often hold a remembrance service each year.

You can organize your own service for your hospital or an organisation connected with the person who has died. These services are usually very beautiful and enormously appreciated. The service itself is often non-denominational and simple with a few prayers, poems and hymns, followed by the lighting of candles at the altar by members of the congregation.

For some people who have really moved forward in their lives, this service can be the only time they are able to put aside to remember, to feel the sadness again and to be enriched by the memories.

APPENDIX 3

SANDS' Principles of Bereavement Care

Parents' perspectives and collaborative working with healthcare professionals have informed these principles of bereavement care.

1. Care should be individualized so that it is parent led and caters for their personal, cultural or religious needs. Parents should always be treated with respect and dignity. Sensitive, empathetic care is crucial and may involve spending time with parents. This should be recognized by managers and staff.
2. Clear communication with parents is key and it should be sensitive, honest and tailored to meet the individual needs of parents. Childbearing losses can involve periods of uncertainty and staff should avoid giving assurances that may turn out to be false. Trained interpreters and signers should be available for parents who need them.
3. In any situation where there is a choice to be made, parents should be listened to and given the information and support they need to make their own decisions about what happens to them and their baby.
4. No assumptions should be made about the intensity and duration of grief that a parent will experience. It is important that staff accept and acknowledge the feelings that individual parents may experience.
5. Women and their partners should always be looked after by staff who are specifically trained in bereavement care and in an environment that the parent feels is appropriate to their circumstances. In addition to good emotional support, women should receive excellent physical care during and after a loss.
6. A partner's grief can be as profound as that of the mother; their need for support should be recognised and met.
7. All staff who care for bereaved parents before, during or after the death of a baby should have opportunities to develop and update their knowledge and skills. In addition, they should have access to good support for themselves.
8. All parents whose babies die should be offered opportunities to create memories. Their individual wishes and needs should be respected.
9. The bodies of babies and fetal remains should be treated with respect at all times. Options around sensitive disposal should be discussed and respectful funerals should be offered.