

FRAMEWORKS YOUTH SUICIDE PREVENTION PROJECT

CLERGY

POSTVENTION RESPONSE

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INTRODUCTION:

Clergy are often at the forefront of dealing with the immediate aftermath of a death by suicide. In their unique role, they can provide guidance and comfort for families, congregations, and communities dealing with the pain and grief due to the death of an individual by suicide. Clergy are typically called very soon after the family learns of the death of their loved ones. In this capacity, as one of the first responders to a family's grief, clergy are uniquely placed to assist the family to maintain a healthy perspective on the grieving process and to insure that memorial services and other remembrances follow guidelines to minimize the risk for survivors.

It is essential that clergy have a thorough understanding of the impact of a suicide death on survivors, including the fact that the death statistically places survivors at greater risk for suicide. Particularly for youth suicide, it is also essential that clergy understand about contagion, how it occurs, and strategies for reducing the risk of contagion.

While religion and cultural heritage are often closely aligned and intertwined, it is not unusual for clergy to work in communities or congregations with diverse cultural backgrounds. Clergy should make every effort to understand, respect, and embrace this diversity particularly as it relates to bereavement and the grieving process.

GENERAL GUIDELINES:

Many of the guidelines in this section have been adopted from the 'Texas Mental Health Association Toolkit' and from 'The Compassionate Friends Guide for Clergy.' See Resources section for more information.

- Focus primarily on being a supportive presence, sharing empathically in family members' and loved ones' profound feelings of loss, and on listening non-judgmentally to questions, concerns, expressions of pain, anger, confusion, guilt, and a myriad of other thoughts and feelings.
- Be in touch with your own feelings. Don't emotionally separate yourself from the grief-stricken family. Becoming an honest part of the hurt establishes a relationship for sharing. Showing emotion does not mean the loss of objectivity and professionalism.
- Personalize your responses using the name of the deceased, as well as the names of the surviving family members.
- Avoid speaking excessively, being a "fixer" of the problem, an alleviator of the pain, or a provider of answers to questions of "why?" One experiencing profound grief is typically shocked and unable to comprehend what has happened, especially for the first several days following the loss. Moreover, when one asks "why" questions this is most often more an expression of one's deepest pain than a query seeking explanation. Their "why" is really unanswerable and is very internal and unique to them. Most beneficial to the bereaved is the offer of presence, care, concern, and non-judgmental listening.
- Offer your care and support but also be aware of and respectful toward bereaved person's needs for solitude, privacy, and emotional "space" in which to mourn in their own way.

- Allow silence. The clergy may be skilled with words. However, when called upon to touch the lives of family who have experienced a death by suicide, you may need to be sparing with words. Silence allows a space within which the family can cry, shout out in anger, doubt, plead with God, or fall into his or her own painful quiet. A caring silence is a valuable ministry.
- Listen. Bereaved family members need to express themselves. Some feelings expressed may cause others discomfort and may reflect untruths or inaccuracies. Being accepting of what is authentic to them is more important than any clergy words.
- Do not suggest or otherwise indicate that suicide is somehow “God’s will” or that it “fits into God’s plan.” Related, never suggest or affirm another’s suggestion that a suicide is in some way “a test of faith.” Not only are these responses theologically suspect, but they also have little to offer a bereaved person in the way of comfort or support. A better alternative is to express your belief that you and your community share some of their pain and are willing to stand by them.
- Do not offer platitudes or pithy wisdom such as “God never gives us more than we can handle,” “It’s okay, he/she is with God now,” “God needed him/her more than you did,” “There is now another angel in heaven,” “At least he is at peace now,” or similar responses that minimize the bereaved person’s loss and often contribute to their anger, confusion, and despair.
- Be aware that family members, loved ones, and close friends often feel more angry, guilty, and even suicidal themselves following a suicide than is the case with other means of death. Family members may also be at risk for a post-traumatic stress condition (especially if they found the body). This is particularly true for adolescents. Pay close attention to, and check-in with, all of these persons regularly, enlisting the contributions of other supportive persons, groups, and resources within the faith community and beyond.
- With time, and as is consistent with one’s religious faith and tradition, encourage the bereaved to believe that they will survive their loss as they rely on God and others to journey with them through their mourning. *Continue to stress that the suicide survivor is not responsible for the death.* Many faith traditions also believe that the person who died was not in their right mind at the time that they died, and they are also not responsible for their actions.
- When dealing with crisis situations such as a death by suicide, many people find it helpful to practice things like prayer, meditation, Tai Chi, or yoga; be sure to encourage these and other self-care activities, including proper sleep, eating, and physical activity.
- Serve as an advocate for the family, when necessary, with the hospital personnel, coroner, police, or funeral director.
- Help the family with decisions that need to be made about viewing of the body of the loved one, funeral arrangements, visitation by friends, and burial rites. Remember that families have to live a lifetime with decisions that are made.
- Faith community leaders have an opportunity to help de-stigmatize mental illness and deaths by suicide while at the same time being aware that it is important to support families’ wishes. Some families are uncomfortable with any mention or indication that the death was a suicide. Others want to help de-stigmatize suicide and want to mention it in either a direct or indirect way. Death by suicide may be used in the obituary, or clergy may suggest that the suicide be described as “an untimely death” or a death “after a struggle with a mood disorder” or with similar language that omits stating specifically that suicide was the cause. Because the obituary is often an object of lasting importance and meant to be a celebration of the person’s life, “softening” the language of suicide may be appreciated long-term. Another way to address this indirectly is to suggest that the family add a statement at the end of the obituary about contributing to a local suicide and crisis hotline, survivors of suicide support group, or one of the national suicide prevention organizations. (See the section below on Death Notices for more information.)
- If the family grants permission, clergy conducting the funeral service may choose to speak of the suicide as a result of a disease called depression or a mood disorder, by which the deceased person was overcome. But in general, it is wise to avoid speaking of causes for the suicide. (See the section on Memorial Services below for more information.)

FUTURE CONSIDERATIONS/FOLLOW-UP:

- Help bereaved parents to discover the value of self-help groups. Bereaved parents need your caring ministry. Many parents and families can also benefit from the support available through self-help groups such as those offered by the Samaritans, the Compassionate Friends, local hospice organizations, or other groups specifically for family members dealing with suicide or untimely death. Your personal encouragement of the concept of self-help actually will strengthen the pastoral relationship rather than threaten it. Do familiarize yourself with supports that are available in your area so you may refer people to them, as indicated.
- For longer term care, make a note of the anniversary of the death, and perhaps the deceased person's birthday and wedding anniversary, which are often times of acute grief and which bring increased risk of depression and suicide. Convey your care and concern for family and loved ones more explicitly as those dates approach.
- In an ongoing way, offer schools a space at your place of worship for children to memorialize a friend, parent, family member, or other significant person who has died by suicide, meaning a "safe" space for children to find age-appropriate support and opportunities for expressing feelings, thoughts, questions, and concerns with trained pastoral or trained adult support.
- With time, invite, but do not insist upon, family members and loved ones to share their feelings concerning the suicide with clergy or spiritual leaders of their choice, helping professionals, or both. Since some research indicates that survivors of suicide may have a higher risk of suicide themselves, be sure and give them the names of local mental health professionals and the 1-800-SUICIDE Hope-line, or 1-(800) 273-(TALK) 8255, as well as local hotlines. You might also suggest that they consider attending one of the survivors of suicide support groups if there is one available in your area.
- Clergy, faith communities, and spiritual centers should actively seek and access opportunities for educating themselves on how best to provide care and support following suicide with respect to immediate and longer term needs. The appendices of this toolkit have a number of resources for professionals in the faith communities.

OBITUARIES/DEATH NOTICES:

One of the first big decisions a family will need to make is what to include in an obituary. Historically, suicide was never mentioned as the cause of death in an obituary (unless it was a very public person). More recently, some families have chosen to mention that the person died by suicide. Although many newspapers have established guidelines for the length and type of information they will print in an obituary, few have established guidelines for how to write about the death of someone who took their own life. Likewise, while there is extensive information regarding recommendations for media coverage of suicide (see Appendix), these guidelines, while providing some good general information, do not mention obituaries specifically. Furthermore, there is little information in the professional literature regarding best practices for disclosing in an obituary that the death was by suicide. Also, in some situations, the cause and manner of death may take weeks to be officially determined and the family will not have this information. Below are a few things to consider when writing an obituary:

- Above all, the decision to include or not include the information in an obituary that the individual took their own life is a personal decision that each family will need to make on their own. Cultural and religious beliefs may impact on the decision that the family makes.
- The obituary is not the only opportunity to publicly disclose how the person died:
 - The family may wish to do so privately with family/friends.
 - The family may choose to include this information in any wake or memorial service that is planned.
 - By having the obituary ask for donations to a suicide prevention program (in lieu of flowers), a family can indirectly acknowledge that the death was a suicide.
- If the family chooses not to disclose the death as a suicide:
 - Avoid using euphemisms such as "died after a brief illness" or "died as a result of an accident."
 - Making no statement about the cause of death is better than stating something misleading.
 - Be aware that if the cause and manner of death has been determined by the Medical Examiner, they are a matter of public record and can be accessed by media or others who request the death certificate.

- Not openly disclosing the cause of death sometimes forces friends and family to “pretend” the death was not a suicide when it may be obvious (or known) to all involved.
- Families who choose not to disclose the death as a suicide isolate themselves from the support of other people who have survived the suicide of a loved one.
 - Remember that 30,000 suicides in the US per year equals over a quarter of a million suicides in ten years. While you may not be aware of it, many of your friends, family, neighbors, and colleagues have experienced traumatic loss by suicide.
- Stating outright that the individual died by suicide will:
 - Immediately end all the rumor and innuendo that often accompany an untimely death – especially the death of a teen or young adult.
 - Allow friends and families who are also suicide survivors to come forward and provide support from their own personal experience.
 - Allow mental health counselors and others to begin postvention activities that may help prevent suicide contagion/reduce the possibility of future suicides.
 - Assist in reducing the stigma associated with suicide.

If disclosing privately that the death was a suicide, it is OK to mention how (e.g. used a gun, hanging), but state it simply and avoid providing specific/graphic details.
- The family may wish to establish a memorial fund for donations. The fund can be used to offset the costs of the funeral services.
- Whether the family chooses to disclose that the death was by suicide or not, the family may wish to identify a mental health organization or suicide prevention organization as a recipient of any donations.

MEMORIAL SERVICES AND REMEMBRANCES:

In the aftermath of a suicide, one of the most challenging aspects for families, survivors, schools, and communities is planning a memorial service for the deceased. The memorial service can be a highly emotional event that has the potential for either increasing or decreasing the possibility of suicide contagion.

Suicide contagion can occur when events (such as memorial services and media coverage) glorify the life or sensationalize the death of the individual. This increases the risk factors for youth who are depressed, troubled, or at increased risk for suicide. Media reports as well as memorial services are two of the biggest factors that contribute to suicide contagion. It is a human tendency to overstate the positive qualities of the deceased while at the same time minimizing or even ignoring less positive attributes, particularly their decision to take their own life. Yet this inclination can increase the risk level of suicide for survivors.

Teens or young adults who are troubled, socially outcast, or at increased risk of suicide may wrongly perceive this glorifying and memorializing as the only option to “make good” for their own life. Believing they may be remembered in the same manner increases the risk that they may attempt or complete suicide. Essentially, the challenge becomes one of how to appropriately grieve, remember, and honor the deceased without (unintentionally) glorifying their death.

There may be a number of different viewpoints about what type of services or memorial to have. How to respect the wishes of grieving and emotional family, friends, or others while balancing the need to reduce possible contagion can be a very difficult task. Many community members play a role in this process. Clergy, funeral directors, and others who have access to the family and are likely to be consulted about planning the memorial services can help educate the family about the risk of contagion and assist in designing services that are both respectful and reduce the risk of more suicides.

Below are a set of suggestions and explanations about points to consider when designing a memorial service or remembrance.

- Involve the family, including any remaining children, in planning the funeral service, visitation, and burial rites. Ask for and take into consideration the family suggestions regarding the readings, prayers, music, and other service details.
- Contact your local community mental health center or other social service agency to see if they can have crisis/grief counselors available before and after the memorial service.
 - Be sure to let people know they will be available and how to connect with them.
- Have someone watch out for and provide extra support to those people who might be at greatest risk including siblings, immediate family, girlfriend/boyfriend, teammates and other close friends.
- Work with local law enforcement officials to request their assistance.
 - They can often assist with directing traffic.
 - Discuss with them how they think they can best assist.
 - Their presence can have a calming effect for some youth/adults.
 - For other individuals, police presence may make them more tense or agitated.
 - Different police and police departments have different relationships with youth/communities. (Decide what works best for your situation/community.)
- Oftentimes, the suicide of a youth or young adult draws large crowds of mourners for memorial services. Be prepared for a large turnout and plan how to accommodate mourners.
- Some communities do not have a church or other public facility large enough to handle the anticipated crowd.
 - Consider all available options/locations including churches, civic halls, and neighboring communities.
 - Use school facilities only as a last resort (see below).
- Avoid any type of large scale memorial service or remembrance that takes place at school and especially during school hours.
 - Students who did not know the deceased may be traumatized by attending a mandatory or school-wide service.
 - Other students may forever associate that room/hall with the student's funeral or death.
 - If school facilities must be used:
 - Hold the service in the evening or on weekends when students can be accompanied by their parents and family or other responsible adult.
 - If possible, use an elementary school or middle school (off hours) so that it is not held at the same school the student and peers are currently attending.
 - Avoid closing the school during the memorial service. This gives students the option of whether they wish to attend or not. For some students and staff, staying with their usual routine (and supports) is the healthiest way to grieve.
- Do not allow permanent plaques or dedications to the individual to be erected in public buildings or other locations (other than traditional cemetery markers).
 - Do not dedicate yearbooks, dances, ball games, etc. in memory of the person.
 - These types of memorials increase the likelihood of suicide contagion.
- Publicly acknowledge that the death is a suicide.
 - Providing factual and timely information about the cause and manner of death greatly reduces the rumor and innuendo that often accompany an untimely death.
 - Publicly acknowledging the suicide allows mental health, school officials, and others to take steps to reduce possible suicide contagion.
 - The cause and manner of death listed on the death certificate is public information and can be obtained by the media or any qualified individual who calls the Medical Examiner's office. (603) 271-1253
 - In most communities/situations, believing that this information will remain a secret is not realistic.

- Celebrate the deceased’s life, accomplishments, personal traits, etc.
 - Also talk about the loss/unknown potential of what the individual might have accomplished in the future.
 - Openly acknowledge and discuss the pain (anger) and heartache the death has caused.
 - Both of the above help reduce the risk of contagion by de-glamorizing the suicide.
- Some families choose to publicly disclose that the individual struggled with mental illness or substance abuse which contributed to their decision to take their own life.
 - This is one way of not glorifying the person’s death.
- Encourage anyone who is depressed or has been having thoughts of harming himself or herself to ask for help.
- Encourage donations to the bereaved family, to favorite charities of the deceased or their family, or to suicide prevention efforts.
- Consider having a temporary memorial site where students or community members can leave remembrances and other personal expressions of grief. Examples include a scrapbook or spot where students can leave appropriate memorial remembrances.
 - Let people know in advance:
 - The display will be time limited (e.g. 1 week).
 - All remembrances will be turned over to the family at the end of that time period.
- Review Media Recommendations (see Appendix) before talking with the media or providing the media with personal information about the deceased. A few key points to remember regarding the media:
 - The family is not obligated to speak with any media person.
 - The family may wish to identify a spokesperson (who is familiar with how to speak with the media about suicide) to talk on their behalf.
 - Redirect the media by asking them to focus their story on services available to youth in your community or to suicide prevention efforts (rather than details about the deceased’s life/death).

RESOURCES:

Compassionate Friends is an organization that works with parents who have experienced the death of a child. They provide local support groups nationwide. Their website has information on locations of support groups as well as links and other information. They offer specific guidelines for clergy ministering to parents who have lost a child. <http://www.compassionatefriends.org/Brochures/clergy.htm>

Clergy Response to Suicidal Persons & Their Family Members. *Author: David C. Clark, Ed., Exploration Press: Chicago, IL 1993*

Texas Mental Health Association. Their website provides general information on mental illness and a “toolkit” to assist community members in doing suicide prevention work. www.mhatexas.org