

First Hand



Making sense of lasting memories
and emotions after the suicide
of someone you didn't know



Support
After Suicide
Partnership

This support guide has been developed by Thrive LDN, Grassroots and the Support after Suicide Partnership.



About Thrive LDN

Thrive LDN is a citywide movement to improve the mental health and wellbeing of all Londoners. It is supported by the Mayor of London and led by the London Health Board partners.

Thrive LDN is the regional lead for suicide prevention in London on behalf of NHS England. As part of that role, they facilitate the multi-agency Thrive LDN Suicide Prevention Group to deliver citywide projects to prevent suicide and support those affected by suicide.

www.thriveldn.co.uk

About Sussex Health and Care Partnership

Across Sussex, the NHS and local councils that look after social care and public health are working together to improve health and care.

The Sussex Health and Care Partnership (SHCP) brings together 13 organisations into what is known as an integrated care system (ICS). We take collective action to improve the health of local people, ensure that health and care services are high-quality and to make the most efficient use of our resources.

www.sussexhealthandcare.uk

This resource is funded by Sussex Health and Care Partnership, Thrive LDN, and the Support after Suicide Partnership.



About the Support after Suicide Partnership (SASP)

SASP is a UK-wide network of over 100 members and supporters, ensuring that everyone bereaved or affected by suicide is offered timely and appropriate support.

www.supportaftersuicide.org.uk



About Grassroots

Grassroots is a UK leader in suicide prevention. We help to create safe spaces in our communities for lifesaving conversations about suicide. We support people to develop the skills and confidence needed to save lives.

www.prevent-suicide.org.uk

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Foreword

Suicide will directly or indirectly touch many of us in our lives and have profound and long-lasting effects. Being a witness to it can happen to anyone; professionally, at home, or in the street.

This *First Hand* resource makes an important contribution to an area that is often neglected, frequently shrouded in stigma and something that people struggle to talk openly about. Its approach of using scenarios where people have witnessed suicide, with the feelings of desperation, guilt, shame, hopelessness and self-blame that they are often left with, is particularly helpful in making it as inclusive and relevant as possible.

The effect of a close experience of suicide is profound, traumatic and life changing, and can lead to a reduction in ability to function and work. Helping those affected is all our responsibility and this resource gives effective, practical advice for anyone who has witnessed this distressing and disturbing event.

By talking about suicide openly and compassionately, recognising that there is space for the feelings of grief and trauma of everyone involved, we contribute to reducing the devastation and pain that people experience in these circumstances.

Parts of this guide may be hard to read. You might want to just read some of it. It has been designed to be used however you find the most supportive.

Adrian

Dr. Adrian James

**President,
Royal College of Psychiatrists**

About this resource

First Hand is for anyone affected by being at the suicide when they did not know the person who has died. You may have happened to be at a particular location or your job may involve responding to incidents. You may have seen it happen or been first on the scene after a suicide. Regardless of how you were involved, this guide is for you.

Being at the scene of a suicide is shocking. We do not take your experience lightly. Many people have told us just how stressful and upsetting it can be and through their words and with their guidance, we have collected some advice and information that we hope can help and support you – now and in the future.

You can also access this information online at www.first-hand.org.uk.

If you feel that you need help straight away, or you feel very distressed, please contact our friends at **Samaritans on 116 123**. They have a huge amount of experience in listening to and helping people like you. They are always open and calling is free of charge.

If you are affected by the suicide of a family member, friend, colleague, or classmate, you may find more relevant advice in Help is at Hand:

<https://supportaftersuicide.org.uk/resource/help-is-at-hand/>

A note on language

You are likely to read this before an inquest has taken place to formally establish cause of death. We are using the term suicide here based on whether you feel this is the event you have witnessed, regardless of the eventual inquest outcome.

We have used the word trauma. Here, we are defining trauma as the reaction you have to the event you may have seen. Trauma can be short term or last a few days or weeks. It can be completely normal and doesn't mean there is 'something wrong' with you.



Pete's story

It was very early on a Sunday morning. I'd been out the night before and couldn't sleep, so I went for a walk at about 6am. I walked to a park nearby and towards the park's tennis courts. It took me a little while to process what I was seeing, then I realised that I was looking at someone who had died by suicide. It all felt very surreal, like I was watching a frightening film – it didn't feel like it was happening to me.

The ambulance came very quickly, with three crew members. As they rushed by me to get to the scene, I remember one of them squeezed my shoulder as he passed. That moment was really important to me at the time, it was a very compassionate thing to do even when he was in an emergency situation.

They took my details and I was told I could go home, but first I just sat there for a bit and had a cry. I was living in a shared house at the time and it was still really early, so nobody was up yet. The next thing I can remember was waiting until it was a reasonable hour, then calling my mum. I cried down the phone to her.

I do remember having a very strong feeling about the place itself, which was very close to

my house. It's a popular park where we would go to play tennis and barbecue. And it did feel kind of haunted. I like walking, especially in the evenings, but now the park felt slightly off limits.

What happened that day opened my eyes to how fragile life can be. And to really try to offer opportunities to other people to talk and to share their feelings.

It's quite difficult to ask for help when something like this happens. It might be easier to shy away from such tough emotions. But if it happens to someone you know, check in with them often, not just in the first days but in the weeks, months and even years after. It has been about six or seven years since all of this, but I can still feel emotional about it ■

PETE

Understanding what has happened

Research suggests that around a third of suicides take place outside the home, in a public location¹. The impact can extend far beyond family and friends. Bystanders, including children, may experience shock from witnessing a suicide in a public place or as part of their job.

Why does suicide happen?

There is no simple reason why someone might take or try to take their own life. Suicide is extremely complex and the reality is that we may never know why it happened.

Some people wonder if they could have done something to prevent someone from taking their own life. This is a normal reaction, especially if you were the first person on the scene. Thinking that you (or anyone else) could have prevented the suicide, is assuming that we all have far more power over the lives of others than we actually do.

What is trauma?

We face trauma when we go through a stressful, frightening or distressing event.

When we experience trauma, our brain tries to keep us safe from harm while trying to make sense of what has happened. These very normal processes in our brain can lead to physical and emotional changes that can affect everyone differently.

There are some common reactions to trauma that are helpful to know about. When, or if, you feel these emotions will be very personal, so this is just a guide. There is no 'right' way to feel or to react when you have experienced a traumatic event such as a suicide.

¹ Public Health England. Preventing suicide in public places. 2015

“After it happened, I was doing strange things like sleeping in my work lunch break. I would go into an empty meeting room or walk to the park and just sleep for an hour. This went on for about ten days.”

Jack

What happens to our brain after a traumatic event?

When faced with trauma, your body and brain produce chemicals that prepare you for an emergency. The part of our brain that usually makes considered, rational choices (the frontal cortex) switches off to let the amygdala take over. This is where evolution kicks in, getting you ready to freeze in the face of danger, to fight or to escape from the danger (flight).

► **Physically, this can lead to:**

- raised blood pressure
- increased heart rate
- increased sweating

► It is also possible to feel completely numb or detached from what has happened. This too is your brain's normal response to trauma. We cannot control how our mind and body reacts in a traumatic situation. It isn't a choice whether we fight, flee or freeze. Other physical and mental responses can be:

- trembling and unsteadiness – needing to sit or lie down
- crying – sobbing, tearful, screaming
- tense muscles - tight chest, hard to swallow
- headaches
- nausea
- diarrhoea, constipation
- tiredness – exhausted, lack of energy
- feeling wired – restless, wanting to move, bursts of energy
- sleep problems – sleeping less or more, hard to get to sleep, waking often, nightmares
- appetite changes – eating less or more
- hot and sweating or cold and shakiness
- existing health conditions worsening
- falling ill more easily
- becoming clumsier and more accident prone
- finding it hard to focus or concentrate
- feeling forgetful
- being continually on alert
- difficulty making decisions or planning
- disturbing memories or thoughts
- distressing flashbacks
- dwelling on aspects of the event and its aftermath
- being extremely sensitive to any sounds, smells, tastes, sensations, or sights that trigger bad memories

Time passing, rest, care and support can help these feelings to decrease and eventually go away.

How you might be feeling right away

Immediately after the event, you might be feeling any one of the brain's and body's responses to trauma. Or you may be feeling detached and keen to get on with your day. All of this is a normal response.

Perhaps there was a lot happening at the scene, with other witnesses or emergency services around you.

Many people have said that it was only once they had left the scene and were alone that they felt any reactions at all.

Understanding emotions after a suicide

There are a range of emotions that you might feel after a suicide. People like you have told us that they have felt:

Guilty that they had not been able to intervene or change what has happened.

Frightened that the same thing might happen again.

Helpless because something bad happened to someone and there was nothing they could do to help.

Angry about what has happened, even anger with the person who has died is a normal emotion to feel at a time like this.

Sad thinking of the person's family and friends, or the event may have reminded them of people they have lost.

Embarrassed or ashamed feeling that they shouldn't be having these strong emotions as they did not know the person and are not family or a friend.

Relieved that they are safe.

Hopeful that life will return to normal.

Numb you may not feel anything at all. This is also an entirely normal, common response to trauma.

How can I cope with these feelings?

▶ Give yourself some time

It can take days, weeks, months or even longer to adjust - and that is ok. Don't try to rush that recovery, your body and your mind will take as long as it needs to.

▶ Allow yourself to feel a range of emotions

No two people will have the same reactions, so try not to compare yourself to anyone else. Nothing you are feeling is 'wrong', even if some of your emotions make you uncomfortable. These feelings will likely pass as time moves on.

▶ Look after yourself

It may seem obvious but may not be easy. Looking after yourself after a traumatic event is incredibly important. Don't forget the basics of caring for yourself like sleeping regularly and eating well.

▶ Don't face things alone

It can be difficult to talk about what has happened. You may not want to upset family and friends with details of something traumatic, or you may not have the words to talk about what you are going through. But when you're able, being around other people can help you to recover well. You don't have to talk about the experience you have had but take up any offers of support or a listening ear. Even just being with others can help.

▶ Stick to your routine

Getting up at the same time, having the same daily routine and a regular bedtime can help you recover. There is nothing wrong with taking some time out to regain your energy, but as much as you can, stick to your regular daily routine. Get some fresh air and exercise when you can.

Try to stay away from drugs and alcohol. Instead of helping you to recover, they are more likely to make it harder to process and deal with what has happened.

If you do not have anyone you feel you can talk to, there are organisations who are there to listen. Find them in the More Support section of this resource.

Remember, if you are in distress and need to urgently speak to someone, Samaritans are always there. Call 116 123 free of charge, any time.

Finding out more about the person

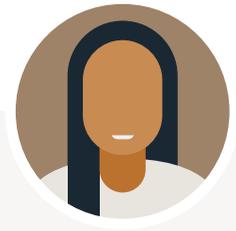
You may find that you want to know more about the person who has died. This is very normal, and for some this can feel like closure. While emergency services will not be able to share details with you, you may see a news story or something on social media that tells you more about the person. Equally, you may want to avoid all news and information about the person who has died. It is entirely your personal decision to do what you feel is right for you.

Jo's story

I was two weeks away from having my first baby and getting ready for maternity leave – doing all the usual things like packing my hospital bags and making appointments. I had taken that day off work. In the morning, I opened the curtains and sat down to have breakfast.

I looked out the window, thinking about the day ahead. The distance from my window to our neighbour's house was around 50 yards. I could see something at the back of their house, which took me a while to process. When I realised what I was seeing, I asked my husband to look too.

We immediately called the police. On the phone, we were almost downplaying things, perhaps it was a hoax and not



what we thought we were seeing. We were still in denial even when we were describing it. A police officer came and took a statement from us. I remember she seemed really shaken too, this wasn't a normal day for her either.

We tried to get on with the day as normal and even went to a breastfeeding class I had booked. But we barely listened, both of us were thinking about what had happened. When we got home, we pulled the curtains closed and just hugged each other. We spent the following days like that, talking about what we had seen and consoling each other. I don't know how I would have coped without my husband.

I wasn't expecting any support or counselling in those first days and weeks after the incident but looking back I certainly needed it. The feelings of trauma came later.

I felt uneasy every time I came home from work and was walking from the train. As soon as I turned off the main road to home there was a darkness associated with the place. I kept the curtains closed a lot; I didn't like looking out of the window.

I'd say to anyone who is going through this that time will really help. I felt in those early weeks and months that I would never be able to move on, that it would always dominate my thoughts. But now, four years on, I love where I live. I no longer fear the house where he died as I now know that it is a place of love and warmth. I have been able to replace the scene of something tragic in my mind through experiencing his warm family home full of life and special memories ■

Jo.

What happens after a suicide?

Because a suicide is an unexpected or unexplained death, the police will usually be among the emergency responders on the scene. Their job is to understand what has happened and to share any information they find with the coroner.

They will tell you if they need to take a statement from you. This may happen at the time, or they may call you or invite you to the station. If it helps you, you can bring someone along with you for support. The police will understand if you are struggling to remember or you still feel distressed, so please do not worry.

"I was called later that day to go into the police station and give a statement about what had happened. They wanted lots of very specific details, but in that moment, you're very emotionally caught up in it. I couldn't be more than about 60% sure of some of the basic details, everything was already hazy." Pete

In England and Wales, sudden and unexplained deaths are reported to the coroner, an independent judicial officer (usually a lawyer or a doctor) appointed by the local authority and approved by the Chief Coroner. The coroner will investigate the death, in which case you may be asked to be a witness at an inquest. An inquest is the final part of the coroner's investigation and cannot find anyone to blame for the death. It is a public court hearing to establish who has died, and how, when and where the death happened. Coroner's courts are separate to criminal courts.

What does it mean to be an inquest witness?

An inquest is usually held between six months and a year after a death has occurred (it may be earlier or later than this, depending on local and national constraints). The coroner decides who should give evidence as a witness. Some evidence is read by the coroner in court and some witnesses may be called to appear to give their witness accounts in person.

If you are called to be a witness in the coroner's court, you can expect the coroner to take you through your statement and ask questions related to this. The questions that may be asked will relate to who has died, when, where and how they came by their death.

Advice for attending an inquest

- ▶ Remember to take things with you such as glasses if you need them to read, any medication you may be on, water, change for car parks if driving. Give yourself enough time to get there, checking out the route and public transport if needed in advance to avoid any stress on the day.
- ▶ When giving evidence, take your time. You are not on trial, if you are not sure about the question, ask for clarification, don't guess and if you don't know, then say so.

▶ You may wish to consider taking someone along with you for support on the day. There may be support available too from the Coroner's Court Support Service if the court you are attending is part of their service.

▶ If you have any questions or concerns, you can call the Coroner's Court Support Service helpline – they can explain the process in detail and support you if needed. Call on **0300 111 2141** or visit their website www.coronerscourtsupportservice.org.uk

It is advisable to avoid discussing what has happened on social media, particularly if you have been called to attend an inquest hearing. Some professionals advise staying off social media in the week before and the week after the inquest. If you are contacted by a journalist or someone you do not know, however well meaning, it is best not to share details about what has happened.

After the first few weeks

In the weeks following the incident, you may find that you are still experiencing feelings of trauma. Some people say that they were able to get back to normal in that time. Everyone will have a very different experience, but what you are going through will be normal for you.

Look after yourself, reach out to people for support and avoid alcohol and drugs as a way to cope.

Try to continue to do the things that you enjoy; whether that's going out, walking the dog, playing sport, cooking, gardening – whatever makes you happy and fulfilled.

If you find that your symptoms are affecting your day-to-day life in a way that you are finding difficult to cope with, do not hesitate to contact your GP for help and advice. They will be able to signpost you to more specialist support if they feel that you would benefit from talking to a professional.

How do I know if I need more help?

- You are struggling to do your job
- You are finding it difficult to sleep weeks after the event
- Your friends have noticed a change in you and encourage you to get help
- You do not want to do the things that used to make you happy
- You are drinking or smoking too much, or using drugs to cope with your feelings
- Around six weeks has passed and you do not feel any better

Most people will recover, some will need more help. There is no shame in asking for professional support. It's important to remember what an enormous impact trauma has on our brain and our body. **Help can be found on our Support pages.**

Some exercises that might help

These simple exercises are designed to help you to calm your stress responses and can be used when you are feeling overwhelmed by thoughts about what has happened. You can find videos of these exercises online at www.first-hand.org.uk.

► Square breathing

- Sit or lie down in a comfortable position
- Close your eyes and begin to focus on your breathing
- Inhale for the count of 4
- Hold for the count of 4
- Exhale for the count of 4
- Hold it out for the count of 4
- Repeat the cycle
- Continue for at least 4 cycles

Tips:

- Be sure to draw out the inhale and exhale so it fills the full four counts (use counts of 3 or 2 if 4 is too much for you)

- Relax your face, chest, or head. Allow yourself to relax in all phases of the breath
- To help focus, hear and visualize the numbers as you count them or use the sides of a window

► Take five/star hand breathing

Spread your hand and stretch your fingers out like a star. You can choose your left hand or your right hand. Use the pointer finger of your other hand as a pencil: you are going to trace around the outline of your hand and fingers.

Breathe in through your nose and breathe out through your mouth. Remember to keep it slow and steady.

Place your pointer finger at the bottom of your thumb and breathe in as you slide up. Breathe out as you slide down. Breathe in as you slide up your second finger and breathe out as you slide down. Keep going until you have finished tracing your fingers and you have taken five slow breaths.

► Deep muscle relaxation

Find a quiet, comfortable space where you won't be disturbed. Lie down and close your eyes. This exercise takes you through the different muscle groups, first tensing, then relaxing.

Breathe in while tensing and breathe out while relaxing.

Start with your hands, clench one hand tightly. Think about the tension this produces in your hand and your forearm. Hold for a few seconds, then relax. Notice the difference between the tension and the relaxation. Do the same with the other hand.

Move to your arms next, repeating the same tensing and relaxing.

Repeat with other muscle groups in this order - neck, face, chest, stomach, buttocks, legs.

Jack's story

One morning, on my way to work in London, I saw someone take their own life. My immediate memory was of feeling sick. That was the first thing that hit me.

I remember leaning against a barrier and as I was explaining to two police officers what I'd witnessed my legs started really wobbling. Once they had taken my information, one officer said, 'You know you're in shock, don't you?' and he advised me to be with people, not to be alone that day.

I knew my flatmates would be out for the day, so I went to work. I'd stopped shaking and didn't feel sick any more, but I was starting to feel dazed. As the morning went on, I knew I wasn't ok, so I left the office at 12pm and went home. One of my flatmates was home studying for some exams, she could immediately see that something



wasn't right. I went to my bedroom, got my pillow and duvet and just slept on the sofa beside her.

When I woke up hours later, I still felt dazed and had a really strange feeling that I didn't want to be alone. It wasn't something I had ever experienced before. I wasn't even registered with a GP at that time, but a friend who is a doctor told me I needed to get myself checked out. When I found a doctor, they could see that overall I was doing ok given the circumstances. I just needed time.

In the days afterwards, it was more productive for me to be at work than at home. I also needed to be around people. But I was still doing strange things like sleeping in my lunch break. I would go into an empty meeting room or walk to the park and just sleep for an hour. This went on for about ten days.

Despite how I felt in the days and weeks after the incident, I don't think I have been profoundly

impacted in the long-term. Perhaps that's because I didn't know the person who had died. When British Transport Police contacted me about my statement, just to go over some details, they asked me if I wanted to know about the person who had died. They told me some basic details, which helped me to process what had happened.

Even though I'm sure it was difficult to know what to say to me at the time, my flatmates were great. I was very lucky to be surrounded by people who supported me - my friends and my colleagues who were just there.

If you've never experienced trauma before, you've got no idea how your body or your mind is going to react to it. It's so important that you communicate with people. It can be quite a scary thing to go through and the more support you can get, the safer you're going to be ■

Jack

Help with moving on

Most people will be able to recover after being affected by suicide. For some, moving on can be more difficult. Some people may continue to be affected by feelings of trauma, or experience flashbacks and nightmares about what has happened.

Flashbacks

A flashback can feel like you are in the middle of a traumatic event all over again. It can happen any time – months or even years after the incident. It can be a very scary experience as the same stress reactions can happen to your body, causing your body to enter fight or flight mode again. It's important to note that a flashback is not the same as dwelling on the event, or finding it difficult to stop thinking about the event. We cover more on this in the section on **Rumination**.

You may experience a flashback when your memory is triggered by something you see, hear, smell, or feel. It can be helpful not to try to 'fight' the flashback, but to notice it, remind yourself it is a memory from the past rather than actually happening now, and try to allow it to pass from your mind. You can try to spot the differences between

what is happening NOW versus what was happening THEN to help this.

An approach that has been found to be helpful in reducing flashbacks is to make time to calmly think over, talk over and or write about the trauma, rather than always push the memories from your mind. This gives you some control over the memories, helping put them in the past where they belong, rather than have them intrude on you unexpectedly.

As your brain heals and recovers from trauma, flashbacks often become less powerful and decrease. If this isn't happening, and you are concerned, then contact your GP for advice. You may have your own coping strategies, but in the immediate term, the following grounding exercises can help you to cope if a flashback occurs.

Grounding strategies if you experience flashbacks

▶ Counting

- Backwards from 100 in 3s, in 2s or in 1s depending on your confidence with numbers.
- Count forward in 7s

▶ Grounding with your senses

Sight

- Take a deep breath, and then start to mentally catalogue the things you see around you. Notice even the mundane details (e.g., that electrical outlet is white, and is a little bit crooked).
- Choose an object and describe it in detail: colour, shape, texture, light, shadow.
- Colours: Notice and name 5 red things, then 4 blue things, 3 green things, 2 yellow things and then 1 white thing. Or find all the green things in a room, all the red things etc.

Smells

Smells are an incredibly powerful way of coming to our senses. If you are deliberately paying attention to a smell, you are truly in the present moment. Try to find a smell that has positive associations for you - maybe one that reminds you of happy times, or a smell which you enjoy. Carry it with you and use it to bring yourself back to the present moment if you get caught up in an unwanted memory.

Touch

Hold something cool or smooth, such as a small pebble, moving it around in your hand and focusing on how this feels.

Taste

- Suck a very strong mint
- Bite into a lemon

Sounds

- Listen to the sounds you hear around you - inside the room and outside. Try to identify at least 5. Notice the layers of sound (e.g., the sounds behind the sounds). Notice how sounds rise and fall, their pitch and timbre.
- Put a favourite piece of music on and try to pick up the different instruments

► Mind Body Ground Linking Exercise

Sit in a location where you will be able to relax and focus for a few minutes. Focus your attention on the sensations in your feet resting on the floor.

Rest your attention on that area for a little bit. Relax. Be curious. Watch. Breathe. Begin to focus on specific sensations. What do you notice?

Is there pressure on any part of your foot? Are there different temperatures?

Do you feel any sensations like slight tingling, your shoes touching your feet, or air moving around?

Describe in your mind or out loud the characteristics of the sensations on the bottoms, insides, and on the surface of your feet.

Feel what it feels like to be supported by the floor. Feel how solid the floor is. You may think to yourself, "The floor supports me." You can slide or push your feet against the floor to make that sensation stronger if you want. Feel the floor just a little bit longer than you feel inclined to. Breathe.

Move your attention around your body, using the same technique, e.g., the back of your legs, your back against the chair.

Dwelling and rumination

Rumination is when you repeatedly think about the event, what has happened since and things linked to it. This can feel out of your control. You may find yourself repeating the experience in your mind, dwelling on what could have been different, and asking yourself unanswerable questions like, "why?", "what if?" and "if only?"

Looking back at the memory of the event can be a positive part of processing what has happened, However, if you find that you're repeatedly going over and over the same situation without getting anywhere, you need to notice and break the cycle of dwelling.

Below, we have included some activities you can try.

- Set aside time to write down your thoughts and think about what has happened, instead of letting it become a 'niggle' in the back of your mind. When the time is up, set aside what you have written down or thought about.
- Practice mindfulness. It can often help to spend a few minutes a day sitting quietly and focusing on your breathing. Relaxing music or sounds may help, and make sure you plan this time into your day, even if it's for 5 minutes.

- Talk to a friend. Talking about what has happened and your thoughts can help you to see things in a new perspective, and connection is known to help you move on.
- Focus on the positives. When you feel yourself starting to dwell, try writing down three things that make you feel safe, you enjoy, or that you are grateful for.

If you continue to have problems with rumination after giving the above tips a go or have concerns about your mental health, contact your GP to arrange an appointment.

Supporting others who have seen a suicide

You may be reading this because someone you care about has been affected by the suicide of someone they did not know. That person may be finding it difficult to talk about what has happened, or you may be worried about some of their reactions. We hope that the information on the very wide range of physical and emotional responses people can experience has helped you to understand a little more about what they are going through.

► What can I do to help?

Be there for the person, even if they do not want to talk

Just spending time with someone or being at the end of the phone to message or chat, can let them know that they are not facing their feelings alone.

Listen when they are ready to talk

We know that it is not easy to talk about suicide. It is also not easy to listen to details that you might find distressing. Finding a balance between being open to listen and protecting yourself is important. There is more advice on talking to someone about suicide in **Finding the Words**, a resource from the Support after Suicide Partnership.

Don't judge how they are reacting

There is no one way to react to trauma – and sometimes responses can be extreme or worrying. Give the person time to process what has happened and if you are still concerned about their reactions, encourage them to seek help from a GP.

Offer practical help

It is important for a person recovering from a traumatic event to eat well, sleep regularly, get fresh air and stick to a routine. Anything you can do to help them to do this will bring them closer to recovery. They may also need some company if there are legal requirements for them to give a statement or attend an inquest.

How to support children who witness a traumatic death

When a child or young person witnesses a traumatic event, such as a suicide-related incident involving

a stranger, they can have all the same emotional and physical responses as an adult. However, their understanding and ability to express their grief may be different. With the help of Winston's Wish, an organisation that supports bereaved children and their families, we have put together some advice on how to support children.

Help the child to understand what has happened

All children will react differently - some will want to talk about what they have seen and some will not want to discuss it yet, or at all. Encourage the child to talk when they are ready. Some children may need just the basic information – that someone has died – and others will need more detail about the death. Be prepared to add more information as time goes on and the child is ready to hear it.

It is important to be truthful and open. Remember that talking about it will not make the situation worse but can help to make sense of the event for the child. If a child asks a

question that you're not sure how to answer, it's okay to say "I don't know, but I'll find out and let you know". Just make sure it's followed up after.

Try to make things normal for the child

Experiencing a traumatic event can make a child feel fearful of what is going to happen. It is helpful to offer lots of reassurance and remind them that what they are feeling is okay. Maintaining the child's usual routines can help them to feel safe and secure. Some children may not want to return to school immediately, whereas others will be keen to return soon. Try to continue to go to school, to eat and sleep at regular times and have time for play and fun.

Talk to the child's teachers if you can, so that they can look out for any unusual behaviour and provide support during school hours. The child may also find it easier to talk to adults outside the home, so it is good for teachers to be aware of what has happened.

Be prepared for change

Children may move in and out of their need for support. Also, as time goes by, some children may return to the incident, asking more questions as they process events as an older child. This is also normal behaviour; readdressing what has happened in the past is a helpful way to support the child to understand it and learn how to manage the feelings it may evoke.

Know when to get more help

Most children will be able to find ways to manage their experience of a traumatic incident with help from family, friends and other people in their life. If you are worried that a child may need more specialist help, then the GP is a good first point of call.

You can also call the Winston's Wish helpline on 08088 020 021 or visit their website for more information on talking to children about the death.

When you experience suicide at work

There are some places of work where witnessing a suicide can happen more frequently. For emergency services, railway staff, coastguard and seafront teams there may be an increased chance of being affected by suicide.

If you are affected by suicide while you are working, regardless of your role or what you are trained for, the advice and guidance in this resource applies equally to you.

It is completely normal to have a human, empathetic response to a traumatic event. It is also normal to feel a range of emotions and physical symptoms, from shock and sadness to guilt and helplessness.

Not every workplace will have policies and processes in place to support someone affected by a suicide. You can access support via the organisations listed at the end of this resource, or visit first-hand.org.uk to read more about the experiences of other professionals and organisations.

People who have experienced suicide at work told us what has helped them:

▶ Don't bottle it up

Having an emotional or physical reaction to death by suicide is normal, regardless of how many times you have experienced this. Specialists in trauma believe that by working through every traumatic event as it happens, complications such as Post Traumatic Stress Disorder (PTSD) can be avoided.

You may feel more comfortable talking to someone outside your workplace, such as a friend or family member. There are organisations who can offer help over the phone, check the More Support pages.

► Have a debrief

Some workplaces have processes in place to hold a debrief after a colleague experiences a traumatic event. These processes exist to support you, not to judge your actions. It is an opportunity to talk about what has happened and to let those around you know if there is anything you might need to help you to get back to your normal work routine.

► Take time if you need it

In most cases, people can recover relatively quickly from witnessing traumatic incidents. It does take time though, and you should not feel guilty or ashamed if you need to take some time out of your normal work duties to help you to recover. You are having a wholly human reaction to something traumatic and should do whatever you need to do to recover.

Please remember that trauma can affect anyone, even if they have had years of experience or training. You should not be expected to manage it by yourself.

“ You never forget the suicides you have attended. You remember their aftershave smell or what the weather was like. Of course it gets to you. That night, or days, weeks, months or even years later.

I know we are often worried about mentioning it at work in case it affects our career but please make sure you talk to someone, whether that's inside or outside of work. ”

Theo, police officer



Helen's story

I've been a mental health street triage practitioner in London for five years, after training and working as a social worker. We work with the police, supporting people in a mental health crisis. Most of my time is spent out on patrol with the officers, no two shifts are ever the same.

A lot of what I do is instinctive, it isn't something you can easily train for as you never know what to expect next. When I started the job, I went to counselling regularly for the first couple of years. That was very important to build my ability to cope and it gave me strategies to be able to manage what I experience.

Sadly, much of my day-to-day role is supporting people who are suicidal. Sometimes, it is just me and that person talking. It can be frightening, working out what is safe for me to do. I have a toolbox in my head of things to talk about, just trying to get the person to think again.

If there are other members of the public on the scene, I will only get a short time to be able to check in

with them as we're often quickly off to another job. I do ask people if they have someone at home they can go back to, and I make sure to tell them to keep talking.

I see how these incidents affect police officers too. At the scene they can seem ok, but I know that some minimise what they see even though they can be really affected. I always listen to them when they want to talk, they need to have someone neutral to offload to.

It is an intensive job but watching mindless TV helps me to relax when I am at home. I make sure I talk to my husband when I need to share how I'm feeling. He understands the value of listening. That's the thread that runs through my whole day – the importance of talking and listening ■

Helen



Heather's story

I've been working in the railway industry for 15 years now. Fewer than 1% of freight drivers in the UK are women. They assume it's going to be dirty and heavy and physically draining, let alone mentally, but to be honest all those things have proven to be false.

Being in such a male dominated industry, I've recognised men need help in talking about their mental health. It's something that has really resonated with me since I experienced a rail fatality, which was really quite life changing for me. I'd always known something like that could happen, but nothing could have prepared me for how it actually felt. I was signed off work for three months. My employers supported me - I had counselling and hypnotherapy. One of the things that helped me most was the support I received from colleagues. Big, hard, burly men, who don't show their emotions, rang me up to say: 'I've been through this too, I'm here for you.'

When I returned to my duties, I knew I wasn't quite the same person that I'd been before. I was more irritable, less patient than I used

to be. I couldn't watch television crime dramas or anything violent that might remind me of what I'd witnessed.

I found **Samaritans' rail training** really useful and got some great insight about the importance of listening and encouraging people to work through their own thoughts, as well as getting them the support they need. I find it heartbreaking that men feel they can't speak and lives are being lost so needlessly, so I'm always talking to the guys at work and even after ten minutes, I can see the weight of the world lifting from their shoulders and what a difference it can make. It's about breaking down those barriers and removing some of the uncertainty around mental health ■

Heather
x

Advice at a glance

We hope that, whatever your personal experience, this resource has helped you to understand your responses and find ways to support yourself or others.

Here are some of the key points to remember when you have experienced the suicide of someone that you do not know.

Witnessing a suicide is stressful and traumatic. The brain's response to this can lead to physical and emotional changes that can affect everyone differently.

There is no 'right' way to feel and to react, just as there is no set timetable for when you will have your strongest response. Take each day as it comes and allow yourself as much time as you need to process and recover.

Look after yourself, try to stick to a routine of sleeping and eating. Get fresh air and stay active. Avoid drugs and alcohol as a way to cope.

Talk to others. Show them this resource if you feel that it will help them to understand what you are going through. If you do not want to talk to people you know, or the incident happened at work and you do not want to talk to managers, there are so many organisations who are there to support you.

Take a little time out to try some of the exercises we have described. They really do work as a way to think, to process and to move on.

And most people will be able to recover and move on. If that doesn't happen for you, however, talk to your GP. You might find that you are still having strong reactions some weeks after the incident, or you might be struggling to get back into your normal routine. Your GP will be able to help to work out what else you might need to recover.



Finally, remember that you are not alone. We have included just a few of many stories from people just like you, who have experienced the suicide of someone they don't know. There will always be someone who understands what you are going through.

More support

If you would like to access further support, then contacting your GP can be a good starting point – you can find out more about booking an appointment here.

www.nhs.uk/nhs-services/gps/gp-appointments-and-bookings

First Hand online (first-hand.org.uk) has been developed in partnership with this resource, and offers further support, including videos to demonstrate the exercises we have included.

To find local support that may not be listed below, you can either visit first-hand.org.uk, or Ataloss.org. Both websites offer support and signposting across England.

Nationally available support

▶ Samaritans

They offer confidential, non-judgemental, listening 24/7, 365 days a year. You can call them for free, their number is **116 123**.

▶ Support after Suicide Partnership

Their website offers information and support for anyone impacted by a suicide. You can visit them online at supportaftersuicide.org.uk

▶ Coroner's Court Support Service

They can explain the process in detail and support you if needed. Call on **0300 111 2141** or visit their website www.coronerscourtsupportservice.org.uk

▶ Our Frontline

They provide 24/7 emotional support, by call or text with trained volunteers, or online resources, to frontline workers
www.mentalhealthatwork.org.uk/ourfrontline

▶ Winston's Wish

Winston's Wish provides emotional and practical bereavement support to children and young people (up to the age of 25) and those who care for them. Call the Freephone Helpline – **08088 020 021**, visit winstonswish.org or email – ask@winstonswish.org



Support
After Suicide
Partnership

Hosted by Samaritans Reg. Charity No. England
and Wales (219432) and in Scotland (SC040604)