

# HEALTHIER MINDS

# EAST RENFREWSHIRE COUNCIL

A Community Approach to Supporting Bereavement, Loss and Grief

When a Suicide Happens: Supporting Young People, Families and Staff







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#### How to use this Document and Additional Resources

The information contained in this document is for the use of anyone who may be in the position of supporting a child or young person and their family following a suicide.

You will also find guidance about how an organisation can:

- · embed measures which promote resilience and emotional wellbeing
- plan their response to a suicide in the community

For additional information and guidance related to response procedures in the case of self-harm or suicide behaviour please refer to:

Getting it Right in East Renfrewshire. Multi-Agency Summary Guidance for Practitioners and Managers (2015). Self Harm and Suicide: Guidance for Staff Working with Children & Young People

www.eastrenfrewshire.gov.uk/ercpc

For guidance on supporting children, young people, families and staff following a bereavement please refer to:

A Community Approach to Supporting Loss, Grief and Bereavement. Guidance for Educational Establishments (2018)

https://blogs.glowscotland.org.uk/er/meetinglearnerneeds/support-for-health-and-wellbeing/support-for-bereavement-and-loss/

Organisations are encouraged to utilise this document and supporting resources for staff training and development and to raise awareness in the school community.

An electronic copy of this document and supporting resources can be accessed at

https://blogs.glowscotland.org.uk/er/meetinglearnerneeds/support-for-health-and-wellbeing/support-for-bereavement-and-loss/

#### Introduction

Sudden and unexpected losses are incredibly difficult for both children and adults to deal with. They produce a perceived threat to one's sense of security or personal safety as well as providing no time to think, review and adjust prior to the event. In addition, the difficulty that many adults experience in coping with suicide and sudden death means a child may not always have the emotional support of carers and family members. While the death of a loved one does not always result in trauma, experience of suicide or sudden death can have a devastating impact on survivors.

It is important for staff to be mindful of their own beliefs about suicide and how that may affect the way they respond to a child bereaved through suicide. The taboo around suicide can make it more difficult to talk about.

The opportunity to say goodbye is lost in sudden deaths and it is important that the child is offered the opportunity to say goodbye in other ways. The task of grieving for death by suicide and sudden death is the same as for other causes of death but the emotions may be more intense. The same strategies apply as those for loss, grief and bereavement. For further information please refer to *East Renfrewshire Guidelines: A Community Approach to Supporting Loss, Grief and Bereavement*. However, it may be helpful to consider the following key points:

# Key Points in supporting a child or young person bereaved by suicide or sudden death

- Blame a child may feel responsible for the death and will require reassurance that this is not the case
- Honesty be as honest as you can in your responses to questions (in accordance with the child's age and stage of development)
- Listen be available to allow the child to talk whenever he/she is ready
- Build Resilience children who have previously developed helpful coping strategies for dealing with difficult situations will be better equipped to cope



#### What We Know about Suicide

Every 40 seconds a person dies by suicide somewhere in the world and many more attempt suicide

(World Health Organisation, 2014)

- Suicide is the14<sup>th</sup> leading cause of death worldwide and amongst the leading causes of death worldwide in adolescents aged 10-19 years (World Health Organisation)
- Young and middle age men are particularly at risk with suicide the leading cause of death among this group in the UK (Office of National Statistics, 2015)
- In Scotland, every day around 2 people die by suicide in 2017 there were 680 reported suicides (National Records of Scotland)
- Northern Ireland and Scotland have the highest rate in the UK followed by Wales then England (Office of National Statistics, 2015)
- 60% of people with suicidal thoughts and behaviour do not receive treatment (*Bruffaerts* et al., 2011)
- While men account for ¾ of all suicides, female suicides rates are at their highest in a decade (World Health Organisation)

Although risk factors and high risk groups have been identified, these have little positive predictive value in determining eventual suicide. However, the following factors may increase a person's vulnerability to suicide:

- Men 20-29 years & 40-49 years
- Involvement with the criminal justice system
- History of, or current, mental health difficulties
- Past history of suicidal behaviour or self-harm
- Risk taking behaviour particularly alcohol or drug misuse
- Financial difficulties
- Experience of being Looked After and Accommodated
- Adverse Childhood Experiences (ACES) experience of traumatic events
- Autism Spectrum Disorder
- · Close relationship with someone who has died through suicide

#### Suicide Bereavement

Discovering a person has died by suicide is a deeply painful experience. Bereavement by suicide shares characteristics with other bereavements but the grieving process is often complicated and can typically last longer. The emotional reaction is likely to be intense and overwhelming including extreme shock and guilt that the death could have been prevented. Questions as to why the person died by suicide are frequently expressed and these often cannot be answered. Police investigations surrounding the death can be lengthy and media attention can limit the opportunity for the family to grieve in privacy.

#### Suicide Bereavement is often characterised by:

#### Guilt

Searching for reasons for the suicide, wondering what they or others could have done to prevent the death, or questioning why the person didn't look for support. These are impossible questions to answer and eventually the person may have to either accept that they will never know or settle on an answer which they can live with. Self-esteem, confidence and hope can be severely compromised where a person cannot reach a stage where the questions occupy less of their thoughts or if they cannot find an answer they can accept. The death may lead to new information arising about the deceased e.g. sexuality or financial situation which can increase the sense of confusion and guilt.

#### Despair

For some people suicide remains a shameful act. Concerns about how they will viewed by other people create additional stress. As a sudden death, survivors can feel a loss of control or despair at missing the opportunity to say goodbye. The death is often sudden, unexpected and can be violent increasing shock and trauma which can be heightened through flashbacks, 're-experiencing' or imagining the death.

#### Isolation

The stigma of suicide means some people feel alone in their grief and potentially rejected by others; or they feel avoided as people are unsure how to react, what to say or how to comfort. Survivors can also feel rejected by the person who has died by suicide, perceiving that the person made a choice to die. Fundamental beliefs about life and death may be challenged. While not inevitable, suicide bereavement can increase vulnerability to suicidal thoughts and Post Traumatic Stress.

# Anger

Disbelief, confusion, and fear about the loss can present itself as anger. This may be directed towards the person who has died, to themselves or towards others. There may be a desire to deny that the death was a suicide which 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.



# The Impact of Suicide on Children and Young People

# Children's Understanding of Suicide

For children's grief responses by developmental stage please refer to *East Renfrewshire Guidelines: A Community Approach to Supporting Loss, Grief and Bereavement.* 

By age seven or eight most children can understand the concept of suicide, can use the word *suicide*, and can name several common methods of causing death by suicide. It is at this age that children are starting to understand that death is final. However, children as young as age five and six can understand and talk about killing themselves, even if they do not understand the word *suicide*. Children age five to twelve generally have quite negative attitudes toward suicide; they consider suicide something that one should not do and generally feel that people do not have a right to kill themselves. This can contribute to the complicated feelings about suicide if someone they are close to dies in this way.

Mishara (1999) studied the experience of children bereaved by suicide and found that 8% of children were able to say that they knew someone who died by suicide, but none of the children said that they were told about the suicide by an adult.

# Impact of Suicide on Children and Young People

Young people who have lost a peer to suicide describe feeling guilty at not having recognised the signs of suicide, or having missed the opportunity to intervene. Feelings of depression, anxiety or suicidal ideation can be exacerbated and young people are particularly susceptible to the phenomenon of suicide contagion. Gould et al. (1990) reported that the relative risk of suicide following exposure to another individual's suicide was significantly higher between 15-19 year olds than other age groups.

This can be the result of a peer suicide or even a high profile media suicide. How the media report on the death can have a significant impact on how the public react. The media is encouraged to be sensitive in their reporting to avoid sensationalising deaths by suicide and to avoid providing detail as to the reasons behind the death or methods used.

# Communicating with Children and Young People about a Suicide

It is natural to want to protect children and young people from knowing what has happened, and to create an alternative explanation for the death. However, media coverage, overheard conversations, social media, police visits etc increase the risk the child will discover the real cause of death. As a professional in a child's life you are unlikely to be in the position of telling a child about a death but they may come to you for clarification or to discuss the death.

Mental health professionals agree that after any tragic event, children should be encouraged to talk about their feelings of bewilderment, shock, disbelief, sadness, guilt and anger just as adults do. One way you can explain suicide is to talk in general about how death comes to everyone. We may die by illness or accident, or old age. Children and young people can usually understand that suicide is when the person made themselves die. Most professionals agree that it is best to refrain from specific details about the death unless the child directly asks for them in which case they should hear the truth. Open and honest discussions are always preferable - talking about suicide to a young person who is not thinking about suicide will not put the idea in their head.

Young survivors find great comfort and reassurance in hearing:

- That they are not to blame for the death
- That they will begin to feel better over time
- That their physical symptoms of grief are normal reactions and will lessen over time
- That they are loved and will always be cared for



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Examples of how suicide can be explained to children and young people

"I played the game of Jenga with my young daughter to help her understand what happened when her father died. We built a tower of wooden blocks, and slowly as we recognised a difficulty for her daddy we pulled a block out and placed it on top of the tower. After these difficulties began to pile up the tower became unsteady and eventually tumbled. This showed her that there was never just one event that caused her daddy to take his own life but that there were a number of unresolved issues and pressures which finally became unbearable for him"

Teresa, From After A Suicide, SAMH

This extract provides an example of how a Jenga block can be used to discuss the pressures someone may face and its impact on mental health.

Encourage understanding that our thoughts and feelings come from our brains. And sometimes our brains become troubled and our thoughts get jumbled up.\_Reassure that very few people\_feel bad enough to kill themselves and usually people can get help when their brain is confused.

#### "Some people just feel so much pain that nothing can help them"

"Suicide is when people decide they do not want their body to work anymore and they stop their body from working. They are so, so sad or so, so angry or so, so depressed that their mind becomes mixed up. They forget they can get help. There is always another way."

**Linda Goldman: Breaking the Silence** 

http://www.elesplace.org/resources/articles-tips/explaining-suicide

It is not uncommon for family members to request that the school does not disclose suicide as a likely cause of death. It is important that the family's wishes are respected, however, the topic of suicide can still be addressed as raised by the young people:

"We are all saddened by John's death. It is still under investigation however, many of you have raised the question of death by suicide and/or death by suicide has been discussed in the news, so it's important that we talk about suicide"

# Promoting Wellbeing and Responding to a Suicide:

# A Prevention, Intervention and Postvention Strategy

#### Prevention and Intervention

Promoting emotional wellbeing and preventing suicide amongst young people is a significant challenge for education staff. Schools must embrace a whole establishment ethos whereby all staff see wellbeing and mental health as part of their role and this message is endorsed through their regular interactions with children and young people rather than a stand-alone part of the curriculum.

Creating an environment which reduces stigma and promotes wellbeing requires:

- Formal and informal opportunities to talk about death and suicide, to learn coping skills and identify signs in peers
- Curricular opportunities to equip young people with the skills to manage their emotions and build resilience
- Staff members who feel confident and skilled in speaking to children and young people about their mental health

Scotland's Mental Health First Aid: Young People This course is available to all East Renfrewshire Education staff, particularly those working with young people aged 11-17. It is a blended learning course including a short online module and a full day face-to-face learning session. It is designed to support all adults to recognise mental health problems and provide guidance and immediate assistance to a young person in crisis. Enquiries should be directed to the East Renfrewshire Educational Psychological Service 0141 577 8510 or ps@eastrenfrewshire.gov.uk.

Applied Suicide Intervention Skills Training (ASIST) is available to all East Renfrewshire staff. This 2 day course will provide participants with the skills, language and confidence to discuss suicide with anyone about whom they have concerns. Details of training dates and venues are available on the HSPC Training Calendar.

#### **Promoting Positive Emotional Wellbeing**

Some schools champion wellbeing through a 'Mental Health Awareness Week' which provides a springboard to more embedded mental health work. Devoting the focus of all staff, pupils, parents and local organisations to this issue ensures a level of ownership and shared responsibility. Increasing the visibility of local and national organisations which can offer support, websites and resources can eliminate the barrier perceived by some young people by directly asking teachers for support. Increasing awareness of these organisations can also direct young people to more helpful forms of support than they might otherwise seek through social media.

Mental Health Awareness Events might include:

- Creating and displaying posters around the school with the purpose of:
  - o highlighting the issues surrounding mental health
  - o identifying strategies to promote positive wellbeing
  - o promoting local and national charities and organisations
- Utilising social media to promote themes related to mental health e.g. twitter feeds, newsletters, school website, blogs
- Offering a range of health promoting activities alongside the curriculum for example yoga, mindfulness, sports, walking, arts, drama
- Parent/Carer workshops on a range of issues for example promoting resilience, sleep, social media
- Social Media workshops on how to use the internet safely and positively to promote emotional wellbeing
- Inviting local organisations in to run workshops for pupils and staff.

This whole school approach ensures all children and young people have the opportunities to access support at a universal level. However, some children may require more targeted group or individualised support.

The following evidence Based Programmes can be provided to groups of children or on an individual basis to promote resilience and emotional wellbeing:

**Living Life to the Full** – Cognitive Behavioural Therapy (CBT) based programmes for a range of mental health concerns including stress and low mood. Can be used with individuals or groups of secondary aged young people and adults.

https://llttf.com/

**We Eat Elephants** – from Living Life to the Full, CBT based resources for primary aged children

#### http://www.weeatelephants.com/

**Bounceback** - positive education approach to wellbeing, resilience and social-emotional learning for preschool and primary aged children. Can be used with whole class or smaller groups.

#### http://bounceback.com.au/

**Kitbag** - range of resources to support mindfulness and resilience in whole class or smaller groups

#### http://www.iffpraxis.com/kitbag

**DEAL** – developed by Samaritans, Developing Emotional Awareness and Listening programme includes free lesson plans, resources and staff training materials for developing resilience with groups of children and young people.

https://www.samaritans.org/scotland/how-we-can-help/schools/deal/deal-resources/

**Seasons for Growth** - loss and grief peer-group education programme to support young people aged 5-19 years and adults who are affected by change, loss and grief.

https://seasonsforgrowth.co.uk/

Additional advice about promoting emotional wellbeing through universal or targeted approaches can be provided by the Educational Psychology Service.

The ability to carry on, and even flourish after setbacks

Adaptability in the face of adversity

#### Postvention

Postvention describes the activities developed by, with or for suicide survivors, in order to facilitate recovery after suicide and to prevent adverse outcomes including suicidal behaviour. At the heart of any successful postvention is strategic planning which should be undertaken before a suicide occurs. Responding effectively to the suicide will be enhanced by developing plans ahead of time. The following themes should be considered in developing immediate and longer term postvention plans.

#### Theme 1 Communication

- The Senior Management Team should communicate with all staff as soon as possible to ensure everyone hears the same message and limit rumours
- Provide the opportunity for staff, before addressing pupils, to ask questions and consider their own feelings and needs
- Promote the message of open discussion reflecting that it is ok to talk about suicide and that staff will listen and support
- Be honest about the facts but omit graphic details
- School staff should be encouraged to come forward if they are not comfortable discussing the death with pupils
- A staff member who is familiar with the pupils should share a prepared statement to deliver to groups – year group or classes as appropriate
- Include information about the availability of support personnel and how pupils may access this
- Prepare a statement for parents which notifies them of the death and provides information on support organisations and in-school supports
- Publicise organisations, resources, helplines and websites which may be helpful
- Contact Educational Psychology Service who will endeavour to provide immediate and direct consultation (0141 577 8510)
- Contact Samaritans Step by Step Service who offer comprehensive postvention support
- A member of the Senior Management Team should maintain contact with the family to ensure their wishes are respected on an ongoing basis

#### Theme 2 Resources, Support Services and Contacts

#### Time to Talk

Consider where, who and how support will be provided to any pupil or staff member who feels they need it. In the immediate aftermath this is best provided informally on a 1-1 or in groups by teaching staff, the Educational Psychology Team or Clergy. Specialist help and counselling is usually not appropriate as a natural response to grief is to look for comfort from close friends, family and familiar adults. The focus of these groups should be simply for children and young people to share their feelings about the death and positive memories about the person. This form of support may be required for a few days after the suicide but children and young people should be encouraged to return to classes and to normal activities.

#### **Identifying Vulnerable Pupils**

There will be children within the school whose own mental health may increase their vulnerability at this time. Children, for whom staff have specific concerns, should be discussed and plans developed for the types of additional support which may be required. This will include Children and Young People who:

- have identified mental health concerns
- have presented with self-harming behaviours or suicidal thoughts previously
- have experienced a history of trauma or abuse
- have previously experienced death by suicide

It is often tempting to include the closest friends of the deceased in this vulnerable list. However, for most children and young people who do not have the above mental health concerns their grief will best supported by family, friends and trusted adults not by professionals. Friends of the deceased should be closely monitored by school staff and given the opportunity to discuss their feelings but may not require any additional professional help.

Supports for the most vulnerable pupils may include professional counselling but other internal supports can be just as, if not more, helpful:

- · daily check-ins
- scheduled or flexible time out from classes
- temporary reduction in timetable
- temporary reduction in homework

allocated alternative location to complete work

#### **Universal Opportunities for Expression**

All pupils should be encouraged to express their thoughts and feelings, to ask questions and share positive memories through a variety of mediums:

- Talking
- Arts
- Diary or letter
- Play
- Song

We know that the experience of grief can be unpredictable and does not follow a linear path. Some days will feel tougher than others and there may be no identifiable trigger for low mood or distress. At times when resilience feels low, children and young people should be encouraged to look to others for help and be reminded of positive coping strategies. There is no set time span for grief which is why establishments which endorse an ethos of openness around emotional wellbeing are in the best position to identify and support vulnerable children and young people.

#### **Social Media**

Many young people will turn to social media and the internet for a variety of positive reasons including commemorating the death, sharing stories and seeking help for their grief. However, social media can have a negative influence and can perpetuate feelings of despair, guilt and isolation increasing vulnerability particularly when this is done in private and outwith the control and supervision of parents or teachers. Promote public messages and talk with students about the appropriate use of the internet; publicise organisations which can provide appropriate support and forums for help; encourage children and young people to talk to a trusted adult as an alternative to seeking help online.

#### **Planning for Returning Pupils**

Pupils who have been closely affected by the death for example, family members, may be absent from school for a period of time. Their return to school will require planning in collaboration with the family and the pupil (if appropriate). As above, options such as counselling should be considered alongside more internal daily supports.

#### **Longer Term Considerations – Anniversaries and Celebrations**

It will not feel like it at the time but over time with a continued focus on support, an ethos which promotes open discussion and activities which encourage good mental health, pupils and staff will start to learn how to live with the grief and even to heal. However, there will be occasions throughout the year where individuals and the school community will be vulnerable to increased levels of grief. The anniversary of the death, birthdays, Christmas, transitions and other events which are a reminder of the loss can be challenging and can be planned for in order to reduce distress and bring some comfort for example:

- Charity and fundraising events
- Special Assemblies
- Renewed opportunities for informal support through internal structures

#### Theme 3 Honouring the Life

Finding ways to remember the person is a crucial part of the grieving process. Options include organising a fundraising event with funds raised donated to a mental health or suicide charity; volunteering at a local mental health helpline, or participating in events to raise awareness of mental health problems. The cultural and religious beliefs of the family should always be respected and family members should be involved in planning the event or memorial. Establishments should consider previous commemoration events for other pupils in their planning. For example if a bench, tree or plaque was previously established in memory of a pupil who has died, it is appropriate to plan a similar memorial for the pupil who has died by suicide as long as this is in line with the family's wishes.



#### Samaritans in Education

#### Step by Step - Samaritans Postvention Service

Samaritans have a team of trained volunteers, called Postvention Advisors who are available to offer practical support and advice to schools, colleges and other youth settings that have been affected by a suspected suicide or an attempted suicide.

Telephone - 0808 168 2528

Email - stepbystep@samaritans.org

#### **Other Samaritans Services**

For emotional support

Support is available to anyone wishing to talk about how they are feeling, 24 hours, every day of the year, by phone, text, letter or face to face visits in many branches.

Telephone - 116 123 (free call)

Email - jo@samaritans.org

For raising awareness of Samaritans and emotional health and wellbeing Talks can be arranged with local branches. Availability varies from branch to branch.

Online - <a href="https://www.samaritans.org/scotland/how-we-can-help/schools/samaritans-schools-talks/">https://www.samaritans.org/scotland/how-we-can-help/schools/samaritans-schools-talks/</a>

Email - schools@samaritans.org

For free teaching resources about emotional health, coping strategies and building resilience

**DEAL (Developing Emotional Awareness and Listening)** is a free web based teaching resource that aims to develop emotional resilience and positive coping strategies in young people.

Online - https://www.samaritans.org/scotland/how-we-can-help/schools/deal/

Email - schools@samaritans.org

# Where to Find Help

#### **Confidential Help**

#### **Childline Scotland**

www.childline.org.uk

0800 11 11

Free, confidential telephone helpline and online support for children and young people available 24 hours

#### **Breathing Space**

https://breathingspace.scot/

0800 83 85 87

Free, confidential telephone helpline for those experiencing low mood or depression available Monday to Thursday 6pm – 2am and Friday to Monday 6pm – 6am

#### **Campaign Against Living Miserably (CALM)**

www.thecalmzone.net

0800 58 58 58

Free, confidential helpline and online support for males of any age who are in crisis

#### **Samaritans**

www.samaritans.org

jo@samaritans.org

116 123

Free, confidential telephone helpline and email support for those in crisis or need to talk available 24 hours



#### **Young Minds Crisis Messenger**

https://youngminds.org.uk/find-help/get-urgent-help/youngminds-crisis-messenger/

#### **TEXT YM to 85258**

- free, 24/7 crisis support across the UK
- aiming to connect every texter to a trained volunteer in less than 5 minutes to provide support via text in a crisis

#### **Preparing For and Following a Suicide**

#### **Beautiful Inside and Out Scio**

beautifulinsideandoutscio@gmail.com

07984 328808

- Scottish charity which supports bereaved parents and siblings of suicide victims
- Facebook page advertises group events (search Beautiful Inside and Out SCIO)

#### **PAPYRUS - Prevention of Young Suicide**

https://papyrus-uk.org/

pat@papyrus-uk.org

0800 068 41 41

- Free and confidential help and advice to young people and anyone worried about a young person
- Information, resources, training and awareness raising

#### **Petal – People Experiencing Trauma and Loss**

www.petalsupport.com

info@petalsupport.com

01698 324 502

- Telephone and face to face counselling and support for families and friends of murder and suicide victims including support for children and young people
- Drop-in centre in Hamilton and Outreach programmes in Glasgow and Edinburgh

#### **Step by Step - Samaritans Postvention Service**

www.samaritans.org/scotland/how-we-can-help/schools/step-step/

www.samaritans.org/scotland/how-we-can-help/schools/step-step/step-step-resources

stepbystep@samaritans.org

08081 682528

Supporting organisations which work with young people to prepare for and recover from a suicide

#### **Survivors of Bereavement by Suicide (SOBS)**

https://uksobs.org

email.support@uksobs.org

0300 111 5065

Froviding group support to adults (18+) who are bereaved by suicide



#### **Preparing for and Following a Bereavement**

#### **Child Bereavement UK**

www.childbereavementuk.org

#### support@childbereavementuk.org

0800 028 8840

- Confidential information and support line for families and professionals when a child has died and when a child is bereaved
- Counselling and Bereavement Support
- Web discussion for families and for professionals
- Message boards and forums
- Resources, information and training courses
- Child Bereavement App Grief Support for Young People

#### **Cruse Bereavement Care Scotland**

http://www.crusescotland.org.uk/

support@crusescotland.org.uk

0845 600 2227

- Telephone helpline, webchat and face to face support
- Support Groups including Step by Step Group in Fife
- Resources, information and training courses

#### **Hope Again (Youth website of Cruse Bereavement Care)**

http://hopeagain.org.uk/

helpline@cruse.org.uk

hopeagain@cruse.org.uk

0808 808 1677

- Free telephone and email support for bereaved young people available Monday to Friday 9.30am 5.00pm
- Individual and group support
- Resources, information and training courses

#### Richmond's Hope

www.richmondshope.org.uk

glasgow@richmondshope.org.uk

0141 230 6123

- Individual and group support for bereaved children & young people from 4-18 years and their families
- Telephone Support & Advice
- Information, training and resources

#### **Winston's Wish**

www.winstonswish.org.uk

ask@winstonswish.org

08088 020 021

- Telephone helpline, email and online support or anyone supporting a grieving child
- Information, training and resources

#### For Those Affected by a Life Limiting or Life Shortening Illness

#### **Prince and Princess of Wales Hospice**

https://www.princeandprincessofwaleshospice.org.uk/

info@ppwh.org.uk

0141 429 5599

- Family Support Service offering support to anyone living with the impact of a life limiting, or life shortening illness through counselling and befriending
- Butterfly Service for children and young people

#### **ACCORD Hospice**

https://www.accordhospice.org.uk/

0141 581 2014

Bereavement support groups and 1-1 counselling for those affected by a life limiting illness

### **Further Information and Resources**

#### Websites with Useful Information and Advice

https://www.samaritans.org/scotland/how-we-can-help/schools/step-step/step-step-resources/

Provides guidance on a range of issues related to suicide and how to support those affected

SAMH (2012) After a Suicide. <a href="https://www.samh.org.uk/media/77846/after\_a\_suicide.pdf">https://www.samh.org.uk/media/77846/after\_a\_suicide.pdf</a>
Provides practical advice and information related to responding to a suicide

https://www.nhs.uk/Livewell/Suicide/Documents/Help%20is%20at%20Hand.pdf

NHS document providing practical advice and information

#### **Books**

Beyond the Rough Rock: Supporting a	One of a range of booklets designed to
Child who has been Bereaved through	offer guidance to parents, carers and
Suicide	professionals to support a bereaved child
www.winstonswish.org.uk	or young person.
Supporting Children After a Suicide Loss: A	A guide for parents and caregivers who are
Guide for Parents and Caregivers	supporting grieving children and families
Paperback	after a death by suicide. This guide offers
	practical suggestions on how to talk with
Sarah Montgomery & Susan Coale	children of all ages about suicide-loss as
	well as guidance for schools on supporting
	grieving children in a school setting. All
	profits go back to Chesapeake Life Center,
	a non-profit that supports grieving children
	and families.

Resilience and Emotional Wellbeing	
Self Help Anxiety Management	Advice, resources and advice related to anxiety
WellMind	Provides advice and signposting to support mental health and wellbeing
Mindshift CBT - Anxiety	CBT, mindfulness, meditation and mood trackinf

Mindfe	ulness
Headspace	Teaches breathing and meditation techniques
Stop, Breathe and Think: Meditation and Mindfulness	Guided meditation and calming breathing exercises for sleeping better and anxiety

Loss, Grief and Bereavement	
Apart of Me	An interactive game designed to help a child or young person to cope with a bereavement
Grief Support for Young People Child Bereavement UK	Information and advice for young people aged 11 - 25



# **Fiction Books**

Luna's Red Hat: An Illustrated	Luna's Mum died one year ago and she still finds it
Storybook to Help Children Cope	difficult to understand why. She feels that it may
with Loss and Suicide (6+)	have been her fault and worries that her Dad might
	leave her in the same way. Her Dad talks to her to
	explain what happened and together they think
Emmi Smid	about all the happy memories they have of Mum.
Amazon ISBN-13: 978-1849056298	This storybook is designed as a tool to be read with children aged 6+ who have experienced the loss of a
	loved one by suicide.
Rafi's Red Racing Car: Explaining	Rafi the rabbit loves playing with his daddy, and
Suicide and Grief to Young	especially with his favourite toy - a red racing car.
Children	But one day his daddy gets so sad and confused
Louise Moir	that he goes out and doesn't come back. Rafi is
Loade Well	confused and scared.
Amazon ISBN-13: 978-1785922008	This book aims to help young children come to terms with the loss of a family member to suicide.
Maran Olavada Mara	Ctal falls out of a tan flaggrapin day, and and a un
Up on Cloud Nine	Stol falls out of a top floor window and ends up
Anne Fine	unconscious in hospital with lots of broken bones
Amazon ISBN 13: 978-0552554657	and no-one knows whether it was attempted suicide or an accident. This book is written from the
	perspective of his best friend lan whilst he is sitting
	by his bedside.

#### Staff CLPL

#### Suicide Scenarios for Discussion

#### Pre School

During the summer you are informed that the dad of a Preschool child killed himself. You are aware that she has 2 siblings; one of whom is in Primary 5 and found her dad in the garage. The other sibling is only a few months old.

#### **Discussion points**

- What language might you use with Katie or other children if they ask what has happened to her dad?
- What resources and play materials can you have available in the nursery for Katie and the other children?
- Should you, and if so, how will you communicate with the family, other families and staff considering this has happened during a holiday?
- Consider how you link with the school to ensure you are providing joined up support for the family.
- Are there any other supports that could be considered for Katie and her family?
- Consider your support plan using the following themes as prompts

#### **Primary**

A popular teacher from the school has died by suicide. You were aware that she had suffered with depression since she separated from her husband. She is also the aunt of a child in the school and the child's mum (the sister of the deceased) has asked that the circumstances of her death are not disclosed in order to protect her daughter. Due to social media reports, rumours have been circulating that she died through suicide and some of the children have asked about it.

#### **Discussion points**

- Would you (and if so how) approach the topic with the child's mum (sister of the deceased) about disclosing the cause of death? What language would you use?
- How might you communicate the death to the staff and pupils? Think about the specific language you would use?
- How might you use the death as an opportunity to discuss the topic of death and suicide?
- In what ways could you commemorate the teacher's life?
- What resources and play materials can you have available in the school for the pupils considering their different ages and stages?
- Are there any other supports that could be considered for Katie and her family?
- Consider your support plan using the following themes as prompts

Communication
Danasurana
Resources
Support
Honouring the Memory

#### **Secondary**

A 14-year-old boy has died through suicide. He seemed to "have it all." He was popular at school, had lots of friends, and he was a very able student. He was a member of the football team and enjoyed going to concerts with friends. He strived to be the very best that he could, since his father had died and he wanted to be a good example for his younger siblings who also attend the school.

You are informed that he has taken an overdose and died. You are unaware of the exact circumstances around this however, there are a lot of rumours on social media.

#### **Discussion points**

- How might you communicate the death to the staff and pupils? Think about the specific language you would use considering you have little information about the circumstances?
- Would you (and if so how) approach the topic with the family about disclosing the cause of death? What language would you use?
- How might you use the death as an opportunity to discuss the topic of death and suicide?
- What supports might you identify for his siblings?
- How will you identify other pupils who are vulnerable at this time?
- In what ways might you commemorate his life?
- What resources and opportunities can you have available in the school for the pupils?
- Are there any other supports that could be considered for the boy's family?
- Consider your support plan using the following themes as prompts

Communication
Danasana
Resources
Support
- Capport
Honouring the Memory

# Whole Establishment Strategic Planning

Prevention and Intervention
How do we support and promote emotional wellbeing and resilience?
e.g. promoting local support organisations, use of whole establishment resilience building programmes (universal), targeted interventions for vulnerable pupils, understanding of nurture principals, whole establishment awareness raising, staff members trained in ASIST and Mental Health First Aid, communication with local support organisations.
Next Steps

Postvention
How can we respond in the event of a suicide in the school community?
e.g. communication, support structures (short and longer term), resources,
honouring the memory
Immediately following the death
In the following days and weeks
Longer Term planning – e.g. Anniversaries

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Siobhan Drummond Educational Psychologist

Spencer Gooch PT Pupil Support, Mearns Castle High School

Jennifer Greenhill Trainee Educational Psychologist

Janette McGarvey Prince and Princess of Wales Hospice

Ainsley McGoldrick Educational Psychologist

Caroline McGrory Child Development Office, Glenwood Family Centre Karen Wynne Depute Head Teacher, St. Joseph's Primary School

Educational Psychology Service East Renfrewshire Council Main Street Barrhead G78 1SY

0141 577 8510

ps@eastrenfrewshire.gov.uk

