



Helping Children Cope with Suicide Loss

From the American Foundation for Suicide Prevention

For many adults, suicide can be very upsetting and frightening. If you find yourself having to explain suicide to a child, you may be wondering about the best way to do it. You can even be so overwhelmed that you feel tempted to “protect” the child by saying that the death was caused by a heart attack or an accident, rather than by suicide. To help, here are some practical guidelines.

Telling the Truth

If someone dies of a brain illness such as a tumor, you’d intuitively know what to say, even to a young child: “Daddy died of a serious illness in his brain.”

So it’s important to keep in mind that the research shows that more than 90% of people who die by suicide have a diagnosable (although not always identified) brain illness at the time of their death, most often depression, bipolar disorder, or schizophrenia, often complicated by substance abuse. Just as people can die of heart disease or cancer, they can die as a complication of psychiatric illness.

These illnesses can cause terrible suffering and desperate hopelessness. They can also affect a person’s ability to make appropriate decisions such as whether to seek help, continue treatment, or take prescribed medication. If you can begin to see suicide as the tragic outcome of a serious illness, rather than as a moral weakness, a character flaw, irresponsibility, or a hostile act, it will become easier for you to talk about it openly and with compassion.

Talking about suicide will not increase the risk that others will go on to take their own lives. In fact, like a death from any other serious illness, suicide is now part of the family’s health history. Knowing the truth about mental illness and suicide enables all surviving family members to be appropriately vigilant about their own health going forward, and take preventative steps.

Although it’s understandable that adults naturally wish to protect children from pain or bad news, shielding children from the truth can undermine trust and create a legacy of secrecy and shame that can persist for generations. You can protect children best by offering comfort, reassurance, and honest answers to their questions.



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Where to Start

Find a place where you can talk quietly and without interruption. Include another adult if the child (or you) may be comforted by their presence. You will want to adjust what you say depending on the age of the child (if you have to talk to several children of different ages at once, start with language appropriate to the youngest).

Very young children (3 and under), don't understand the meaning or permanence of death, and primarily need comforting and physical affection. If asked where Daddy is, respond simply, "Daddy has died and I am sad. I'm here and I'm going to take care of you."

With children ages 3 to 6, you may want to start by explaining, "I know you have seen me crying. I am very, very sad. Daddy has died." You can then go on to explain, "Dead means the person can't eat, or hear, or talk, because when someone dies his body stops working forever and it can't be fixed. When someone is dead, they are dead forever."

Children this age will tend to be especially focused on what the death means to them (is it my fault? Who will take care of me and read me stories? Will my mom die, too? Will I die?). Reassure them by addressing their (often unexpressed) concerns that they will continue to be loved and cared for.

They may not ask how the death occurred, but if they do, you can start by simply saying, "Daddy died by suicide, which means he killed himself." The rest of the conversation will depend on her response to that statement. It's very possible that she may not have much to say and even change the subject. In general, young children will be more focused on the loss and what it means for them, rather than on the cause of death.

Let the child lead the conversation. Answer questions honestly, being careful to avoid euphemisms (such as "passed away" or "went to a better place"), which can confuse kids. The older the child, the more likely she'll ask more direct questions.

The following are some examples of honest answers:

- He was probably suffering from an illness in his brain that made him confused, and he didn't know he could get help
- I don't know—I wish I knew the answer
- You'll need to ask your mom/dad that question
- With a gun

Children may not want to talk much at all, but like adults, they may worry that the suicide was somehow their fault. Reassure them that they are not responsible, and that nothing they said or did caused it. Let them know, too, that everyone has their own way of coping. And acknowledge your own feelings about suicide: "It makes me really sad. I'm also really angry. I can't believe this has happened to us."

What if you've previously said it was a heart attack or an accident? You can always fix it: "I wasn't sure what to say to you and I made the wrong decision. I'd like to start over."

Whatever the age of the child, do your best to use simple, truthful language. Here are some suggestions:



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- She died by suicide. Suicide means she killed herself.
- He had a very serious illness in his brain. The illness is called depression. It's very different from just having a bad day.
- The illness in his brain caused him . . . to feel very confused, . . . to feel hopeless, . . . to make very bad decisions, . . . to stop taking his medication,. . . to end his life
- He didn't know how to get help/see any other way to stop the pain.
- Suicide is complicated – we'll never know exactly what went through her mind or what she was feeling – but I do know she must have been in terrible pain.

Now What?

Children grieve differently than adults. You may find that they want to have the conversation in several “doses,” asking additional questions over a period of time, moving between conversation and play.

Be prepared to talk about the suicide multiple times during the next days and weeks, and indeed throughout the child's life. You can open the door to this continuing dialogue by saying, “You may choose to talk with me now or later about what you are feeling, and if you want to ask more questions, I will be available to you. It may be hard to figure out what you need right now, but we will figure this out together.”

Young children may ask same questions over and over (“When is Mommy coming back from being dead?” “Where's Daddy?”) or make repetitive announcements, such as telling strangers in the grocery store line, “My mommy died.” You may also see some short term regressive behavior such as bedwetting, thumb sucking, troubles getting dressed, or separation anxiety.

Children may behave in a seemingly perplexing manner. They may seem unfazed by the news of suicide, or they may want to go on as if nothing dramatic has happened. This “denial” may simply mean that they need time to process the loss. Be assured that they don't have to talk about it in order to heal.

But it is important for you to invite their questions, which may arise at random times. It may be helpful for you to make a point of “checking in” with them periodically, and to be sure to make time alone with them in the hectic aftermath of a death.

You might want to consider finding a bereavement support group for your kids (or yourself). You can find groups through AFSP's online directory, through community mental health centers; the psychiatry, psychology, or social work departments of local universities or hospitals; hospice, or the Dougy Center for Grieving Children and Families (www.dougy.org).

Providing truthful information, encouraging questions, and offering loving reassurance to your children, can allow your family to find the strength to cope with this terrible loss.

For more information, invaluable resources and support services, visit...the American Foundation for Suicide Prevention at www.afsp.org

