



EXPLAINING SUICIDE TO CHILDREN AND YOUNG PEOPLE

Breaking any kind of bad news to children and teens is difficult, but something as painful as suicide makes it even harder. See **skylight's** Information Sheet *BREAKING BAD NEWS TO CHILDREN AND TEENS* for helpful ideas around this—online at <http://www.skylight.org.nz/page.php?p=199> or call 0800 299 100.

The following ideas and suggestions relate specifically to suicide. To support your bereaved child or teen, skylight recommends you also read the other skylight information articles available, and check out related resources skylight makes available.

We hope our kids never have to experience tragic events, but if a tragedy does occur, they'll come through the experience in a healthier way if they've been given the truth, and included in the family grief process - including the funeral, tangi and/or memorial services.

Adults often want to shield and protect young people from hearing a difficult truth, but lying to 'protect' them—by avoidance or half-truth—most often has damaging consequences. Children and teens will learn the truth from someone else one day—probably a warped or unhelpful version of it—and trust in you can be broken, along with your future credibility. Worse, they may feel they have to now 'honour the lie' themselves, bottling up any questions, thoughts or feelings they have about the suicide, preventing them from dealing with its reality in a healthy way. Unacknowledged and unresolved grief often has long-term negative effects on a person's life, outlook and relationships.

When I didn't get answers to my questions I came up with my own, which were wrong and also scary. And I got told things by other kids too, which were half-truths. I ended up a mess inside for a long time, afraid of lots of things and not able to trust my father. I wasn't told the straight truth for ten years. Telling me properly at the time would have saved me years of confusion and fear.

The age and stage of a child or teen, their personality and how close they've been to the person who has died are the kinds of key considerations to take into account when you speak with them.

KEY THINGS TO KEEP IN MIND

- ◆ Tell all your children—even younger ones.
- ◆ Keep it short and simple—Don't over-explain.
- ◆ Keep it truthful and consistent—It might be hard to say, but say it. Give correct information in a loving, direct and compassionate way.
- ◆ Use common sense—Avoid unnecessary details.
- ◆ Use words and phrases they know. Don't use terms like *asleep*, *passed on*, *passed over* and *gone on a journey* to describe death. Children can take such words literally and get confused about what's actually happened.
- ◆ Be aware of the shock factor. Repeat key information later. Check on understanding.
- ◆ Realise early reactions, though often difficult to witness, allow a child or teen to begin to process what's happened. They may range from acute distress to complete

numbness, withdrawal or even seeming disinterest. Be understanding. Many children and teens in fact experience delayed reactions that can often be triggered by the simplest things. Try not to over-react to their reactions.

- ◆ Encourage them to talk about it and ask questions whenever they need to. And if they do—pay attention well.
- ◆ Expect them to process what's happened over a very long period. As they grow and mature they are likely to understand what's happened in new ways. They may want to ask questions days, weeks and even years later.
- ◆ Reassure. Reassure. Reassure.

When I look back at my childhood, it wasn't so much what was said to me that I remember. It's how I was made to feel during that time of such sadness.

SOME SUGGESTED ANSWERS WHEN CHILDREN ASK... WHAT IS SUICIDE?

- ◆ Suicide is when a person is so very ill and so deeply sad that she chooses to make her body stop working.
- ◆ He had a very serious sickness in his brain that made him very confused and sad so that he didn't want to live any more.
- ◆ People die in lots of ways. They might get sick or have a bad accident, or they might die because they're old and their body stops working. Suicide means that someone got so sick that they made their own body stop working on purpose.
- ◆ Brains can get sick, just like other important parts of our body do, like our heart or lungs or liver. Her brain got very sick with an illness called depression. This illness got so bad it muddled up the way she thought and felt, and caused her to do something that would make her body die. (Although most people with depression do get better.)
- ◆ When someone gets sick with an illness called depression it can cause their brains to get so mixed up and confused that they feel very bad inside. They can't even think clearly. Some people get so sick that they can't think how to stop the terrible hurt and pain inside. They can get so ill they don't even realise they can get help to feel better again. To make their pain stop they make themselves die on purpose. That's what suicide is.
- ◆ When someone dies by suicide they choose to end their life because—in their mind—living is too hard for them. They don't know how to get help or don't choose to get help. It isn't a wise choice because they can get help so they don't have to keep on feeling such hurt and pain all the time.
- ◆ The only person who really knew why this happened is XX. There are lots of things we don't know. But we do know that XX loved us, and we loved XX. He/she will always be important in our lives and we can always remember lots of the good times we had together.
- ◆ Daddy had something like a heart attack, except it was a 'brain attack.' His brain got really sick and he wasn't able to think properly. He made his body stop working because he got so overwhelmed by the pain in his brain.

Just like adults, young people bereaved by suicide are likely to feel a range of the following thoughts, feelings and reactions. Let them know these are normal and okay. Let them find

ways to express them, but be ready to allow them to keep them inside for a while too, if that's helpful. Everyone is different in how they respond to loss—whatever their age. Never tell them HOW to feel or think or discourage them from expressing difficult emotions. These are a natural part of the grief process—though they can be hard to see and hear. After being bereaved by suicide, children and teens can feel and think:

- ◆ That it's their fault—something they did, or didn't do or say
- ◆ Guilty—because they did something mean to the person, or thought something about them, even perhaps wanting them to die or go away
- ◆ Rejected—abandoned
- ◆ Afraid—will they or others die also? Who will take care of them now?
- ◆ Denial—refusing to believe it has happened
- ◆ Numb—unable to take it in or feel anything
- ◆ Sad—intense emotional pain
- ◆ Embarrassed, ashamed, awkward—that others know
- ◆ Confused
- ◆ Angry—mad at the person and at others they may want to blame, God, everyone
- ◆ Very alone
- ◆ Overwhelmed—Wanting it all to just stop
- ◆ Relieved—if attempts or threats have already been experienced

SO WHAT'S MOST IMPORTANT FOR THEM TO KNOW?

- ◆ You are loved—and will be taken care of and supported.
- ◆ You are safe.
- ◆ It's not your fault in any way at all—nothing you did or didn't say or do caused this. (This message needs to be repeated over and over again.)
- ◆ It's okay to talk about him/her with me/us and to ask questions.
- ◆ You will not always feel the way you do now. Things will get better, and a bit less painful, a little every day. (They need to have a sense of hope.)
- ◆ You're feeling grief and sadness because you loved/cared about XX. Everyone's different so we all grieve in different ways. There are no rules or right or wrong ways to feel or think after someone dies. You can do it your way.
- ◆ XX wasn't a bad person. XX was a very ill person who wasn't able to make a good choice.
- ◆ Not everyone who feels very sad or gets ill with depression will die by suicide. There are doctors and others who help, and mostly people get well again and are helped to manage their strong feelings and thoughts. Suicide is not common.

AND WHAT ELSE IS IMPORTANT?

- ◆ Keep up normal routines as much as possible—this helps a sense of security
- ◆ Be aware many children and teens bereaved by suicide are very sensitive to being left, and may be more clingy, more fearful, more tearful, less confident etc. Be patient with anxiety around separation and plan for good care, with trusted adults.

- ◆ Avoid speaking negatively of the person who has died, however angry you may be feeling yourself.
- ◆ Younger children may not understand that death is permanent and so may think they can visit the person who's died. Teach them about death. **skylight** suggests using the excellent picture book *LIFETIMES* by Ingpen and Mellonie, available through **skylight**, bookshops or libraries. It explains death in a very clear, down-to-earth way, as part of life.
- ◆ It is helpful to let them know that some people may want to say some mean things to them about what's happened. Help them deal with these comments by planning to just ignore them, tell an adult right away or by having something ready to say, like: "She was really ill and very sad. I don't want you to talk meanly about her. It's not okay."
- ◆ Let them know they always get to decide how much information to share with others. It might help to have something to say, like "My Mum got really sick and died suddenly," or "My Dad died by suicide. It's been really sad." It's a personal choice. Let them know they don't have to share any more details and can stop conversations if they get uncomfortable. E.g. "Thanks, but I don't want to talk about this any more."
- ◆ Role-model that it's okay to talk often with close friends and family/whānau about the person who died. Don't avoid saying their name. Mention them at family occasions. This helps them be able to enjoy a continuing link with them without any sense of shame or stigma.
- ◆ Show them lots of affection. Tell them how much you love them. Praise and encourage them.
- ◆ Stay connected with them—check in with them and how they're doing. Don't make it intense. Perhaps the odd snatch of conversation as you walk or drive, or do an activity together is enough. Keep the door open to them.
- ◆ Remember suicide happens when a person's intense emotional and mental pain becomes far greater than their ability to cope with it. Instead of placing value judgements on suicide, talking with children and teens about good ways to get help if we get overwhelmed by things is a constructive and potentially life-saving approach to take. It gives them empowering tools at a time when they feel powerless about so much else that's going on.
- ◆ If the child or teen becomes very sad and depressed and does not improve over many weeks, get them professional help. See a GP, mental health professional or counsellor. In extreme cases, don't hesitate to call your hospital's emergency department or emergency services for support and assistance.

FOR FURTHER INFORMATION AND RESOURCES

See **skylight** www.skylight.org.nz or call 0800 299 100 for **skylight**'s latest catalogue which offers a wide range of excellent books about supporting children and teens after a bereavement, including these suicide support resources.