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We are all aware of the power of words and the images that words can so accurately portray within individual's minds, descriptive words that can conjure up a 'realistic' picture within the imagination. So, too, the use of words can cause additional hurt and further traumatise those already bereaved by suicide. These guidelines will help you communicate effectively with those who have lost a loved one to suicide.

These guidelines relate to the people who have lost a loved one to suicide, whether that person is a close family member, a close friend or a school mate. It must be understood that people grieve in different ways, yet they all need to be comforted either by touch or by word.

We hope that these guidelines will enable you to better deal with communicating with the bereaved by suicide. We wish to change the perceptions that prevail toward the bereaved by suicide:

From	To
being on the outer fringe of society	being accepted as an individual in grief
unreal expectations that the grieving should get over it, as if it were a common cold	an understanding that grief has no time limits
sympathy fear and avoidance	sincere warmth and empathy
stereotyping	individualising
impatience with the bereaved for indecisiveness	understanding that due to trauma and grief, at times, the bereaved cannot cope with decision-making
focussing conversation on inconsequential and petty matters	accepting that the recently bereaved by suicide sees this as trivial compared to the loss of a loved one

It is time that the experiences of the bereaved by suicide be accepted and acknowledged as another facet within the fabric of our community

For the Media

In writing about the issues concerning the bereaved by suicide or how they may be portrayed through the media, the following points need to be borne in mind:

- respect the rights of the bereaved by suicide, it is not important to know the details for the sake of sensationalism
- grief affects different people in different ways
- it may be viewed differently by people from other cultural backgrounds, religions etc;

- recognise that you may be able to help others by accurate reporting and by focusing on what others may be able to do to alleviate the suffering of the bereaved by suicide;
- if it is within your ambit, record services that may be available for the bereaved by suicide.

Words matter

Language is a powerful tool — the pen is mightier than the sword! It is a critical force in shaping our thoughts, beliefs, feelings, perceptions and concepts. For instance, if you think about a descriptive paragraph such as:

As I sat on the bank of the harbour and watched the voluminous mists of fog rolling in from the sea to engulf the Golden Gate Bridge, encompassing all that lay in its path, including the starkness of Alcatraz, I began to shiver at the sudden coldness that enveloped me.

To each individual this short paragraph may conjure up different pictures in the mind's eye; and so it is critical that the descriptive words used to portray the bereaved by suicide are accurate, yet individual! It is, therefore, crucial to avoid stereotyping the bereaved by suicide. It may take one individual only a relatively short time to appear to be 'normal'; it may take another months; and it may take yet another some years to regain 'normalcy' — yet, it may also be a tenuous 'normalcy' for all who are bereaved by suicide; as they all have to learn to live 'without' — that is, without the loved one lost to suicide.

To summarise:

- Avoid words that can hurt and further traumatise those bereaved by suicide.
- Avoid stereotyping or stigmatising people who are bereaved by suicide.
- Accurately portray people who are bereaved by suicide and remember each case is unique.
- Remember that they, like you, have feelings and should be treated with due care and consideration.
- If you are aware of services that may benefit the bereaved by suicide, let them know.

Language and the bereaved

In the general community, as well as in government, there is a considerable lack of interest in the 'forgotten people' — the bereaved by suicide. Even those who would like to make a difference in the lives of these grieving people, do not know how to talk to them, how to comfort them, how to empathise with them.

There are so many misconceptions about the suicide victims themselves. Words describing them can be seriously misleading and offensive. In the majority of cases, this is the great untruth. Yet the language reinforces negative assumptions and stereotypes about them and those left behind. This language used can leave them feeling as they are being held to blame by our society for the death of their loved one.

Even family and close friends of the bereaved sometimes do not feel free to broach the subject of suicide, after all it is not a gentle word. So what as a community do we do? Bury our heads in the sand, hoping that 'the problem' will somehow go away? Or act positively and learn to communicate with them within a social perspective that will be inoffensive and acceptable, and of great comfort to them. Just stop and think: 'If I were in their shoes, how would I like to be treated? What comfort could I gain from my family and friends?'

Pointers

The following are a few pointers to think about and to use when you approach a person who is bereaved by suicide.

Do's	Don'ts
Do ask, 'How are you REALLY doing?'	Don't ask them how they feel if you aren't willing to listen.
Do remember that you can't take away their pain, but you can share it and help them feel less alone.	Don't change the subject when they mention the person who died.
Do accept their moods whatever they may be, you are not there to judge. Be sensitive to shifting moods.	Don't tell them what they should feel, act or do.
Do allow them to talk about the person that has died as much and as often as they want.	Don't be afraid to ask about the deceased person and to share memories.
Do extend invitations to them. But understand if they decline. Above all continue to call and visit.	Don't think that death puts a ban on laughter. There is much enjoyment in the memory of the time they had together.
Do put on your calendar the birth and death date of the person and remember the family the following year(s). Remembering the person who died is very supportive.	Don't push them through the grieving process, it takes a long time to heal and they never forget. Don't encourage the use of drugs or alcohol. Don't say you know how they feel.
Do get literature about suicide and the grief process to help you understand.	Don't avoid them because you feel helpless or uncomfortable, or don't know what to say.
Do use the words 'suicided' or 'completed suicide'.	Don't say or write 'commit suicide' as it reinforces the belief that suicide is a crime

Stereotyping/Discrimination

Stereotyping of the bereaved by suicide may lead to discrimination and thereby remove their individuality or over-simplify their predicament.

They are discriminated against in several different ways:

- Friends, work colleagues, acquaintances shun them.
- Some churches will refuse to conduct funeral or memorial services for the suicide victim on the grounds that they consider it a sin.

In some instances the bereaved by suicide are portrayed as negligent in their duty of care, especially in the case of youth suicide. Some may think that they are persons to fear; that somehow their tragedy is catching; that it is better to ignore them; that they are a burden and bear a great shame. The bereaved by suicide are normal people that have undergone a monumental tragedy and are trying in the best way they know how to cope with everyday living and surviving.

Stereotyping or discriminating against the bereaved by suicide devalues the person and implies that they be deemed unworthy and undeserving of society's consideration.

Words, as well as actions, can certainly demean and dehumanise the bereaved by suicide and demoralise their already battered self-esteem. Often, it is not only what is said, but how it is said and the body language that attends the words. Body language is a powerful form of non-verbal communication which can be very comforting or very hurtful.

QLD Helplines

Standby Brisbane 07 3250 1856
 Standby Response Service 0438 150 180
 (24 hour mobile crisis response to suicide bereavement)
 Sunshine and Cooloola Coasts 0407 766 961

National Helplines

LifeLine: 13 11 14 (24 hour)
 Mensline: 1300 789 978 (24 hour)
 Suicide Callback Line: 1300 659 467 (24 hour)
 National Hope Line: 1300 467 354 (24 hour bereavement support)
 Beyond Blue: 1300 22 4636
 Kids Help Line: 1800 55 1800 (24 hour)
 SANE Helpline: 1800 18 SANE (M-F 9am-5pm)

Photo by Pia Koskelainen