

At Your Side

Suicide Bereavement UK Guide for Serving Personnel

When someone may have died by
suicide during their military service

“Being bereaved by suicide is a tough subject. But at the same time, I’m not going to shy away from it. If [talking about my loss] helps others and makes it easier, or makes sure that others can get access, or know where to go, then something good can come out of it.”

Paul, lost a family member





KENSINGTON PALACE

At times of national and international crisis we look to our Armed Forces to provide help, support and stability. Members of our Armed Forces never shy away from a challenge - harnessing their skills and working together to help others. But in times of great challenge, it can be tempting to hide one's own needs.

Few of us will go through our lives without experiencing the loss of someone we love. Thankfully suicide is rare within the Armed Forces community, but for those bereaved by suicide, this loss can be a complex and long-term experience. Often the stigma surrounding suicide can prevent those affected from speaking out and seeking help.

I hope this guide will act as a vital source of guidance and support, helping those who are impacted by suicide to process their loss, during what can be dark days of grief.

Thank you to everyone whose experience has informed this guide and to the team who produced such a meaningful and helpful series. It is essential that the voices of those bereaved by suicide are heard.

There is no time limit to processing grief, but Catherine and I have met many bereaved families over the years and know the power that comes from sharing experiences, even in the most tragic of circumstances.

I hope you find this resource helpful. Please know that you are not alone.

A handwritten signature in blue ink, appearing to be 'Lily'.

The At Your Side Suicide Bereavement UK guides

This is not a Ministry of Defence (MoD) document, it has been independently produced by Suicide Bereavement UK. The At Your Side guide for serving personnel is one of three guides written for the bereaved by the bereaved of the Armed Forces community.

The guides offer guidance when someone may have died by suicide during their military service. Each guide in the At Your Side series is written and produced by Suicide Bereavement UK for different users bereaved by suicide:



**At Your Side
Suicide Bereavement UK
guide for serving personnel**



**At Your Side
Suicide Bereavement UK
guide for veterans**



**At Your Side
Suicide Bereavement UK
guide for families**

Explaining suicide to children and young people

If you are responsible for or supporting children or young people who might be impacted when a person has died by suicide, the **At Your Side guide for families**, has detailed advice and guidance on explaining suicide to children and young people.

Where can I access the guides?

The At Your Side guides are available from the Suicide Bereavement UK website: suicidebereavementuk.com/armedforces.

Suicide Bereavement UK is an internationally recognised organisation specialising in suicide bereavement research and the development of evidence-informed support materials for people bereaved by suicide. Contents of the guides have been informed by the experiences of people bereaved by suicide from the Armed Forces community and high-quality research and practice.

Why do we need a suicide bereavement guide for serving personnel?

This Suicide Bereavement UK At Your Side guide has been designed for serving personnel affected by the suicide of someone who has died during their military service. The guide is also relevant to anyone who supports serving personnel.

First-line help is available to serving personnel internally via your chain of command and the single services which offer a wide range of professional welfare, pastoral and clinical support through their specialist staff and externally through their service charities.

This At Your Side guide complements the internal resources available to serving personnel, listing a wide range of organisations with the knowledge, skills, and desire to provide support (see **Section 4** for details). It demonstrates that no serving person need feel alone when someone dies by suicide.

You are not alone. If you are experiencing thoughts of suicide and would like to speak to someone you can contact:

- **Samaritans support service (available 24 hours a day, 365 days a year)**
Tel (UK): **116 123** (free)
Tel (outside of the UK): **+44(0)330 094 5717** (local charges apply)
Email (worldwide): jo@samaritans.org
Website: www.samaritans.org
- **MoD's mental health line (available 24/7)**
Tel: **0800 323 4444** (free)
- **NHS mental health support (available 24/7)**
Tel: **111 - Option 2** (free)

If you feel unable to keep yourself safe please attend the nearest A&E department or call 999

Who informed this guide?

This Suicide Bereavement UK guide has been co-produced with bereaved serving personnel of the UK Armed Forces and those who have formerly served. As part of the Armed Forces Suicide Bereavement study (suicidebereavementuk.com/the-development-of-an-armed-forces-suicide-bereavement-pack/), they shared their experiences of being bereaved by the suicide of a friend, colleague or family member during the person's military service.

Quotations in this guide are from study participants bereaved by the suicide of serving family, friends and/or colleagues and who were serving or had served in the Armed Forces at the time of their bereavement.

Names and some identifying features associated with quotations have been changed to protect participants' identities.

Service personnel who have lost a family member may also find the [At Your Side guide for families](#) helpful.

Wording used in this guide

In this guide we use the wording 'died by suicide' rather than the term 'committed suicide'. Although both terms are widely used, the older 'committed' term originated from a time when someone who died in this way was viewed to have committed a crime. As suicide is no longer a criminal offence in the UK, we use the newer, more accurate terminology. Suicide also has a specific legal definition and the advice in this guide may also be helpful where 'open verdicts' have been reached.

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Dedication

This guide is dedicated to serving personnel of the Armed Forces bereaved by the suicide of someone who has died during their military service, and to those they have lost.

This guide is endorsed by the Forcer Protocol CIC



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Section 1: Suicide and its impact



“If I can pass on my experience and it saves just one more life, then wow, what an amazing thing to do.”

Sam, lost colleagues



The people on this page are all bereaved by suicide



With the help of serving personnel bereaved by suicide, we have put together information that we think you will find helpful during this difficult time. This section of *At Your Side* explains some of the facts about suicide, who might be affected when someone dies, and where to seek help if you or someone you know is feeling suicidal.

The main messages about suicide and its impact are listed in Box 1.

Box 1. Main messages: suicide and its impact

- There is no single reason why someone dies by suicide. Rather, it is often that the person experiences a build-up of stressors that create a sense of hopelessness and despair.
- Suicide bereavement is more common than many of us realise.
- The suicide of a friend, colleague, family member or acquaintance can be a devastating experience for many service men and women.
- A wide range of people can be impacted when someone dies by suicide during their military service.
- The impact of suicide and feelings of loss can differ depending on your relationship with the person who has died.
- Asking someone directly if they are feeling suicidal will not put the idea in their head or increase their risk of dying by suicide. It is much more likely to generate a meaningful conversation that has the potential to save their life.
- If a person feels suicidal, it does not mean they will always feel this way; suicidal thoughts and behaviours may vary in intensity over time.

- If you or someone you know may be feeling suicidal there are sources of support that can help. See **Section 4**, page 44 of this guide for details.

When someone dies by suicide

When someone dies by suicide during their military service there are particular challenges faced by anyone who is bereaved and the people around them. A suicide is an individual tragedy and a loss to the person's family, the Armed Forces community and society. The impact can be devastating. Those left behind can experience intense emotions with many unanswered questions.

“Suicide doesn't take away the pain... it just spreads it out to other people, doesn't it?”

Brad, lost colleagues

When someone dies by suicide it can be of interest to journalists, especially at the time of the inquest into the person's death, and this can be distressing for anyone who is bereaved.

Suicide has no boundaries and can affect anyone at any time, regardless of age, rank, gender, social or educational background or perceived standing in society. At any one time, one in five people in the UK experiences suicidal thoughts¹. These types of thoughts are common when you are bereaved by suicide. Most people bereaved by suicide never act on these thoughts but looking after your mental fitness and those you care about is important. If you are feeling suicidal, or know someone who is, please see **Section 4** of this guide for contact details of organisations you can talk to now.

¹ McManus S, Bebbington P, Jenkins R, Brugha T (2016) Mental health and wellbeing in England: Adult psychiatric morbidity survey 2014 <https://openaccess.city.ac.uk/id/eprint/23646/>

The complexity of suicide

Suicide is complex. There is no single reason why someone dies by suicide. Rather, it is often that the person experiences a build-up of stressors that create a sense of hopelessness and despair.

“It was the circumstances as well – aye, the suicide was a bolt out of the blue like.”

Jerry, lost friends

They may have made previous suicide attempts or may have been behaving unpredictably or in a challenging way. You may have been supporting your friend or colleague for a long time. If you were unaware that they were at risk of dying by suicide, their loss can come as a great shock.

“It’s trying to destroy that myth that anyone who dies by suicide is not selfish, by any stretch of the imagination, but they’re in such mental turmoil they don’t know what’s right, what’s wrong, they don’t know the impact ... what they’re going to leave behind.”

Jez, lost a friend

Being made aware that someone has died

Being made aware that someone has died by suicide can be extremely difficult but any feelings you experience are understandable. There are many organisations that can help guide you and others affected, and these are noted in **Section 4**.

Finding someone who has died

Finding someone you know who has died by suicide can be a deeply traumatic experience and may create undeserved feelings of guilt. The shock and disbelief can be overwhelming, and the pain and grief that follow can be intense and long-lasting. You may find yourself struggling to make sense of what you have witnessed. It is important to remember that these feelings are normal and to seek support as needed.

Most people who find someone they know after they have ended their life discover the person unexpectedly and the impact of this experience should not be underestimated.

Seeking help after experiencing this type of loss is a sign of strength and not weakness. Immediate help is available to you via your chain of command, pastoral support, single service specialist welfare support and/or medical officer. However, seek additional help if needed (see **Section 4** for details of other organisations that offer support).

It may be that you were in the same vicinity when the person ended their life. This is rare but if it does happen can be extremely traumatic; the impact can be significant and long-lasting. If you have experienced this, it can further complicate the grieving process.

Finding a stranger who has died by suicide can also be traumatic. The shock and confusion of accidentally discovering someone who has died by suicide can leave a lasting impact on your mental fitness. **Section 4**, page 47 has details of the **First Hand** booklet, which offers guidance if you or someone you know has found a stranger who has died by suicide.

What happens if the person left a final message?

Many people who die by suicide do not leave a suicide note or final message and this can be upsetting for those left behind. If a note is left it can take different forms. For example, it might be a handwritten note or an online message such as a text, voice note, or video. Final messages can often be left impulsively and reflect the person’s mindset at the time of writing. Notes rarely give all the answers or explain all the circumstances of a person’s death.

Final messages can sometimes be addressed to a specific person. Some people who receive a note find it comforting while others can be deeply distressed, especially if the note has been written in anger. If you receive a note, it will be included as part of any investigation into how the person died. However, it is possible to request a copy and the original note can be returned after the inquest. Inquests are conducted by a coroner for any sudden unexpected death not from natural causes. The purpose of an inquest is to establish the cause of the person’s death. It seeks to establish the facts i.e., the identity of the person who has died, what happened and when, how and where it happened. It does not seek to establish why the person died or to apportion blame. It is a civil matter, and not a trial. It is independent from MoD.

How many people are affected when someone dies by suicide during their military service?

Research tells us that approximately 135 people are impacted by each suicide². Serving Armed Forces personnel often have intense friendship circles that have a wider geographical spread than in civilian life, with extremely close bonds. Many consider their fellow service personnel and close friends to be their chosen family.

“Your family’s the military and... that’s all you know, but you’ve lost a close friend.”

Matthew, lost a friend

“When someone dies by suicide you’ve got to look at the ripple effect, haven’t you?”

Daniel, lost a colleague and a civilian family member

Who might be impacted when someone dies by suicide during their military service?

When someone dies by suicide it can affect many people including but not limited to:

- spouse, partner, parent, children, siblings, girlfriend or boyfriend, wider family, and other loved ones
- friends
- Colleagues and anyone connected to where the person served
- anyone connected to where the person lived or socialised
- emergency services personnel
- anyone responsible for the person’s health or welfare
- anyone informing or supporting the bereaved family or reviewing the circumstances of the death or gathering information for the coroner
- strangers

The impact of suicide and feelings of loss can differ depending on your relationship with the person who has died.

² Cerel J, Brown MM, Maple M, Singleton M, van den Venne J, Moore M & Flaherty C (2019) How many people are exposed to suicide? Not six. *Suicide and Life-Threatening Behavior* 49(2) 529-534 <https://doi.org/10.1111/sltb.12450>

If you have lost a serving family member, or you are supporting someone who has lost a serving family member, the **At Your Side guide for families** may also be helpful.

The **At Your Side guide for families** could also be of help if you are responsible for or supporting children or young people impacted by suicide. The guide has detailed advice and guidance on explaining suicide to children and young people.

If you have lost a civilian family member, the suicide bereavement booklet for civilians **Help Is at Hand** may be helpful.

Close relationships to the person that may not be acknowledged

There are occasions when a relationship with the person who has died is neither recognised nor acknowledged. In these situations, bereaved people can feel excluded, isolated and sometimes blamed for the person dying including on social media and in press reports.

This can lead to 'disenfranchised' grief, which complicates the grieving process because the loss is not, or cannot, be openly acknowledged, publicly mourned, or socially supported. For example, this kind of grief might be experienced by:

- a spouse or partner who had recently separated from the person who died
- someone who was having or had in the past an undisclosed relationship with the person who died
- someone who was in a same sex or LGBTQ+ relationship with the person and who was unable to be open about their sexuality
- a person who may be unable to attend the funeral

The person's friends and/or colleagues

The impact of losing a close friend who has died by suicide cannot be underestimated. The same applies to the impact on the friendship group of the person who has died, some of whom may no longer be serving.

"It makes no odds whether he was serving, or he wasn't – he was a good man and someone that I looked up to."

Matthew, lost a friend

If you lose a friend or colleague, it is common to feel the need to suppress grief reactions. This can sometimes happen in circumstances that require you to maintain a focus on tasks and/or the safety of your colleagues. Help is available to you via your chain of command, pastoral support, single service specialist welfare support and/or your medical officer. These can be vital first-line sources of help at this time. To access pastoral support, it is not necessary to have religious beliefs.

"When you lose someone there are all sorts of different emotions. It's not uniform and it's not singular. It's a complex web of emotions that are taking place."

Tom, Chaplain, lost colleagues

If the person who has died (whether of senior rank, a peer or junior rank), is held in high esteem and considered to have been resilient or able to cope with adversity, it can complicate things further. It may lead anyone bereaved to question their own ability to cope. This can be especially relevant for personnel who might be feeling suicidal before or at the time of the death. If you are feeling suicidal and feel you are unable to keep yourself safe, please see **Section 4**, page 44 for contact details of organisations you can talk to now.

"Some people might not understand the feelings they are feeling, and then if it's highlighted to them that this is a possibility, that it's an effect of how you're feeling, then it might alert them that – oh, hang on, maybe I am suicidal – and then they can reach out and do something before it grows too deep."

Steve, lost colleagues

Health professionals who lose a patient who has died by suicide

As a health professional, you may be deeply affected when a patient in your care dies by suicide and experience grief reactions like those of the bereaved family which can be complex and include guilt, shame, fear of being blamed, anger, intense sadness and worry about being judged by others. Single services health professionals and other specialist staff can access and receive similar support and counselling via their specific service.

"We all express distress in different ways... I became very angry."

William, lost patients

Multiple losses: when more than one suicide occurs in a short timeframe

A suicide during military service is devastating and the impact is widespread across the Armed Forces community. The impact is increased if there is more than one suicide in a short period of time. This is a rare event, and the single services have specific processes in place to support you if this happens.

Experiencing more than one suicide in a short period of time can bring up a whole range of painful thoughts and feelings that are difficult to manage and ways of coping that may be unhelpful.

What if I am feeling suicidal?

Some people bereaved by suicide may experience suicidal thoughts and feelings themselves. However, it does not mean they will act on these thoughts. There is specific single service specialist welfare, pastoral and clinical support alongside many organisations that understand how you might be feeling and are able to support you.

You are not alone. If you are experiencing thoughts of suicide and would like to speak to someone you can contact:

- **Samaritans support service (available 24 hours a day, 365 days a year)**
Tel (UK): **116 123** (free)
Tel (outside of the UK): **+44(0)330 094 5717** (local charges apply)
Email (worldwide): jo@samaritans.org
Website: www.samaritans.org
- **MoD's mental health line (available 24/7)**
Tel: **0800 323 4444** (free)
- **NHS mental health support (available 24/7)**
Tel: **111 - Option 2** (free)

If you feel unable to keep yourself safe please attend the nearest A&E department or call 999

“You know, I must have absorbed all that grief, never let it out, and at some point, it comes out. I’m not saying I understand suicide... but I do think that whatever it is that takes hold of people and grows and grows and grows is because they don’t effectively talk about it.”

Tony, lost a friend who was also a colleague

“I’m very open about my past experience regarding mental health and suicidal thoughts, and planning it and all the rest of it, I’m open about it. And that lent itself to others opening up to me.”

Jerry, lost friends

“I used to have suicidal thoughts... and there was times I’ve planned it and all sorts, but I managed to get myself out of the hole. When my friend sadly passed... I was down and depressed... I tried not to let it show, I was trying to get on with life. And... that could’ve been me at one point. It was a bit scary because also at the time I was going through a few mental health issues again... the death of my friend kind of helped me go and seek support.”

Dan, lost a friend who was also a colleague

If I am concerned that someone else may be suicidal, how should I respond?

If you are concerned that someone else who is bereaved by suicide may be feeling suicidal:

- let the person know you are concerned about their wellbeing
- ask them directly but calmly whether they have been thinking about suicide
- if possible, don’t leave them alone
- start a conversation. Tell them they matter. Talking about suicide may give them a chance to get the help they need
- if possible, guide the person to appropriate support. See **Section 4** to help you identify relevant support
- get support for yourself to cope with the situation – tell someone official and don’t keep it to yourself

Practical guidance on how to respond to someone who may be suicidal

Free, online, MoD-endorsed, practical guidance on how to respond to someone who is suicidal is available from Zero Suicide Alliance for all serving personnel to access:

- 30-minute veteran suicide awareness training (also relevant to serving personnel). Developed with Help for Heroes, the aim of the training is to provide you with practice in handling situations where a person may be at risk of suicide www.zerosuicidealliance.com/suicide-awareness-training-veteran-edition
- 20-minute suicide prevention training aims to give you the skills and confidence to respond to someone if they are feeling suicidal (relevant to anyone bereaved by suicide) www.zerosuicidealliance.com/suicide-awareness-training

“Individuals may feel at points suicidal themselves in which case, for the serving military we always teach... ask the question, ‘are you feeling suicidal?’ If the person answers affirmatively, intervene, and then disclose – it’s not a secret to be kept. Now we always add another ‘A’ so it’s ‘Ask and Acknowledge’. So, when somebody says, ‘yes, I am feeling suicidal’, we have to acknowledge – ‘thank you for telling me that, thank you for being so upfront’”

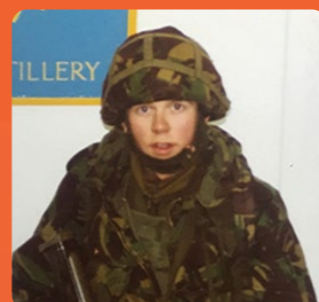
Tom, Chaplain, lost colleagues



Section 2: How you might respond to your loss when you are bereaved by suicide

“The moment you experience grief, it consumes your life. You can’t see around it. But then as time goes on, that grief becomes less and your life goes on around the grief as opposed to being consumed by it.”

Ben, lost a colleague and a civilian family member



*The people on
this page are
all bereaved
by suicide*



This section of the At Your Side guide focuses on how we grieve when we are bereaved. It also explains that when the person we’ve lost may have died by suicide, our thoughts, feelings, physical reactions, and ways of behaving can be much more intense.

The main messages about grief responses are listed in Box 2.

Box 2. Main messages: grief responses

- Grief is as individual as your fingerprint. We all grieve in different ways. This means that although we may have lost the same person, the way we grieve can vary.
- If you are bereaved by the suicide of a friend or colleague your grief reactions may be intense.
- You may find yourself experiencing a mix of powerful thoughts, emotions, physical reactions and/or ways of behaving.
- There is no set pattern for these reactions. All the ones you experience, in whatever order, are understandable.
- Grieving for someone who has died by suicide is a painful and tiring experience and you may find that you need some extra help to cope with your loss. You might want to ask for help if you are, for example:
 - Feeling overwhelmed by shock, numbness, guilt and/or anger
 - Unable to sleep or having nightmares
 - Feeling anxious or having panic attacks

- Feeling alone and isolated with no one to talk to
- Using unhelpful ways of coping (such as drinking alcohol to excess, or gambling)
- Experiencing confusion about why the person has died and your emotional reactions to their loss
- Fearing that you may harm yourself or act on suicidal thoughts
- Fearing that others may harm themselves or act on suicidal thoughts
- Sources of help and support are listed in **Section 4**.

How we grieve

We all grieve in different ways. This means that although we may have lost the same person, the way we grieve or cope can vary.

Bereaved people experience a wide range of grief reactions at different times. These are all understandable ways of experiencing grief.

“Nothing should be forced, because people deal with grief differently.”

Brad, lost colleagues

“Not one shoe fits all.”

Dave, lost colleagues and a civilian family member

“It’s the extremity of emotion, particularly around shame and guilt... is an extreme response – but it’s not an abnormal response to whatever the stresses are.”

Andy, lost a close friend

Sometimes we are confused by our own or others’ responses to the loss. If you are bereaved by suicide, your grief reactions may be much more intense.

Below are some common reactions to losing someone who has died by suicide. However, you may react to your loss in other ways. Some days these reactions can be more intense than others.

Thoughts (beliefs about your loss)

We can be consumed by a whole range of confusing thoughts. Common thoughts include:

- denying the person has died
- believing the person has rejected you
- thinking that you might be responsible for the person’s death
 - remember the choice was theirs, not yours. No one has that much influence on another person’s life
- believing that you don’t deserve to be cared for by others
- thinking life has lost all meaning
- doubting your judgement in other important aspects of your life
- believing that others are judging and blaming you
- thinking your Armed Forces experience and/or seniority means you should be unaffected by the person’s death

- having suicidal thoughts yourself
 - remember, having suicidal thoughts does not mean you will act on the thoughts. Ask for help if you are having these thoughts or thinking of acting on them. Contact someone you trust – welfare support, a mental health professional, your medical officer or a suicide bereavement organisation. See **Section 4**, page 44 for organisations you can contact for support
- wanting to be with the person who has died. This is a common response and does not necessarily mean you are suicidal.

Emotions (feelings associated with the loss)

Emotional reactions to someone dying by suicide can be extremely intense. Experiencing mood swings or conflicting emotions at the same time is entirely normal. Common feelings that may arise for you include:

- shock and ‘numbness’

“One of the things maybe we don’t realise, is numbness but, I’m starting to understand my things, right? What we mean with numbness, it’s about our feelings, our emotions. So, I think with a lot of us, we don’t realise that we have that numbness, and that we’re not in touch with our feelings.”

Jake, lost friends

- intense sadness
- confusion about why the person has died and your emotional reactions to their loss
- helplessness
- anger towards:
 - yourself

- the person who has died
- the Armed Forces
- professionals that had been responsible for the person’s care
- the world
- your faith/religious belief

“I used to be very calm – or shutters up and I’m raging... and there’s no, you know, in-between... it’s like a fire alarm, you know? It’s there, you’re calm and then you can go from nought to a hundred extremely quickly.”

Jake, lost friends

“They’re human and it is difficult to navigate your way through suicide bereavement. And sometimes they will be very angry.”

Tom, Chaplain, lost colleagues

Remember, it’s OK to express anger in a way that is not harmful to yourself or others.

- becoming mentally unwell yourself with, for example, anxiety, depression

“It’s normal to feel low. It’s normal to go through these emotions. In the Army we don’t say that very often; we don’t say that it’s normal. We train people to feel and do certain things. And I think sometimes it’s really important for us to say, ‘you’re going to feel bad; you’re going to feel low; you’re going to feel depressed and that’s perfectly normal.’”

Matthew, lost a friend

- feelings of helplessness and/or hopelessness
- feelings of loneliness, isolation, or rejection
- fear that:
 - you or others will die by suicide
 - you are losing your sanity
 - you are being harshly judged by others
 - you may experience stigma (feel judged, left out and/or isolated)
 - you may have to attend the person’s inquest and/or service inquiry
 - you will be bombarded by the media

“A lot of it will be breaking down the stigma, and ‘listen, yeah, just because you’ve got mental health issues it doesn’t mean that you get sent to Broadmoor’ right?”

Jake, lost friends

- guilt, including feeling guilty for what you think you did or did not do
- feelings of blame (towards yourself or others for the person's death). This can be particularly difficult if there is a delay in a coroner's inquest or service inquiry
- regrets and questioning: 'Why?' 'What if?' 'If only?'

“I think this guide will prevent people feeling isolated ‘cause that’s half of it. It’s not only you. It’s not only me. It’s happened around the community, whether that’s knowing a friend that’s done it and wondering, why has my friend done that? Why didn’t he talk to me? What happened? Why did it happen? What could I have done to prevent it? Have I missed something?”

Ben, lost a colleague and a civilian family member

“The human factor kicks in, and you kind of go, ‘why’s he done that? Does he know what he has left behind?’”

Jez, lost a friend

- feelings of shame about the way the person died (this can be intensified if your culture or religion considers suicide to be a sin)
- feelings of relief because you no longer feel under pressure to support the person or deal with their suicidal thoughts, urges or attempts. These feelings can be extremely difficult to recognise and talk about as they are mixed with guilt about having them. However, they can be common feelings when you are bereaved by suicide.

“The first thing to tell bereaved people is that... the death of this individual by suicide should be treated no differently from anyone else’s death (when it comes to acknowledging them). At the beginning of a service the padre said, ‘we’re having the same service that we’re having for all the others that we had for them.’ Then he went through the normal service about their background and their life and their family and all that kind of thing.”

Alf, lost colleagues

Physical reactions (body sensations)

We often react to a loss in a physical way. This is the body's way of expressing distress. It is completely normal to experience a range of body sensations that are directly associated with your grief. Common physical reactions you might experience include:

- lack of energy and extreme fatigue
- inability to sleep
- vivid dreams about the person who died and/or bad dreams or nightmares
- increased or reduced appetite
- upset stomach or nausea
- anxiety and/or panic attacks
- forgetfulness, brain fog or difficulty concentrating
- breathing difficulties or tightness and choking sensations in the throat or chest
- pain including headaches, back ache, neck ache or muscular tension
- dizziness
- palpitations (feelings of having a fast beating, fluttering or pounding heart)

Ways of behaving (things you do/actions you might take)

Sometimes, the way we behave after someone dies by suicide can be out of character or surprising to ourselves and others who know us. Again, these ways of behaving are understandable responses to a deeply upsetting experience. Common ways that you might behave include:

- having difficulty trusting others
- rejecting offers of support when you want to accept them
- hiding your emotions to protect yourself and others by pretending you're OK. (You might also worry about looking vulnerable or feeling that you need to be strong for others.)

“Going through loss is very difficult, it’s a very difficult time, and you think ‘I’ve got to be strong for other people’ and stuff. Especially as a soldier, you really, really want to be like ‘I’m OK.’”

Brad, lost colleagues

“We’ve still got a long way to go for dealing with emotions. We are still this bravado, male testosterone dominated environment in the Armed Forces and we shy away from emotions and feelings.”

Matthew, lost a friend

- using humour inappropriately
- crying (remember, this is a basic physical expression of grief and a natural way to grieve)
- needing to repeatedly talk about aspects of the person or the way they died
- refusing to talk about the person or the way they died
- constant longing or searching for the person who died (e.g., in crowded places)
- keeping yourself to yourself (socially isolating)
- being argumentative with others (at home, with friends and in the workplace)
- being aggressive and putting yourself in danger (e.g., wanting to fight with others and/or driving dangerously)
- turning to alcohol as a way of coping
- hurting yourself

Understand that processing this type of loss takes time and if you are struggling, please see **Section 4** page 38 of this guide for contact details of organisations you can talk to.

Will I experience these grief reactions straightaway?

You may have many of these grief reactions during the early stages of your loss. However, you may experience these and others months or even years later. There is no set pattern for these reactions. All the ones you experience, in whatever order, are understandable.

There are some circumstances in which you may feel that you must delay or suppress your grief. For example, if you:

- do not feel safe to tell others about your loss
- have separated from the person who died and your sense of loss is not acknowledged
- are concerned about how others will react or worried about the impact on your career if you seek support
- are deployed, posted or on exercise overseas
- Feel the need to suppress emotions until after any practical aspects have been dealt with

“Delayed grief is a really important thing to acknowledge, because... in the military, it’s a common part of bereavement that for one reason or another you are not in a situation whereby you can grieve, and therefore you have to set it aside... and it may be that you’re mourning the loss of a team member and you’re on exercise in a particular country. The exercise is carrying on, you’re still there, you’re going to have to carry on being there.”

Tom, Chaplain, lost colleagues

“It’s like a delayed reaction sort of thing... and you know, you put it all behind you, you put it in a little bag and keep it to the back and then eventually that bag bursts.”

Daniel, lost a colleague and a family member

“I think I just went into function mode... I’ll deal with it later – function as opposed to emotion.”

Ben, lost a colleague and a civilian family member

What can complicate grief?

Several factors can complicate grief and lead to us getting ‘stuck’ and unable to move forward. These include:

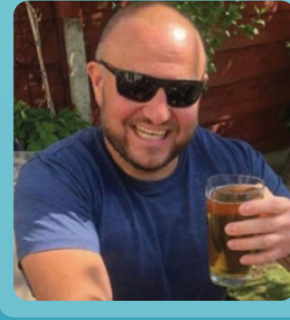
- the circumstances of the person’s death, particularly if you were there when they died or found them
- shared history with the person you were serving with
- other losses happening to you at the time the person died (e.g., financial losses, or loss of relationships and/or friendships)
- having a complex relationship with the person who died
- having been personally bereaved or affected by suicide before
- being aware of more than one suicide in an area, even if you did not know the individuals involved (this is sometimes called a ‘cluster’ because more suicides than expected occur in terms of time, place, or both)
- having no opportunity to express your grief openly (e.g., if your loss is not acknowledged or accepted by others or you’re in a position of responsibility)
- having difficulty expressing your emotions
- using unhelpful ways of coping (e.g., excessive drinking of alcohol, fighting)
- lacking a support network or being unable to connect with your usual support network because of significant distance
- experiencing traumatic symptoms associated with the loss (e.g., flashbacks, nightmares, repetitive images or feeling constantly on edge)
- feeling suicidal yourself

When is it time to get help?

Grieving for someone who has died by suicide is a painful experience, and you may find that you need some extra help to cope with your loss. If you are experiencing any of the following difficulties, it is a good idea to ask for help:

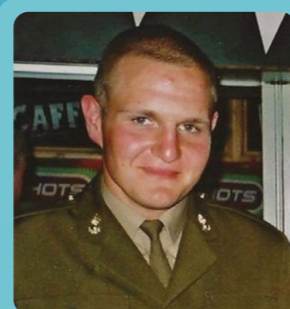
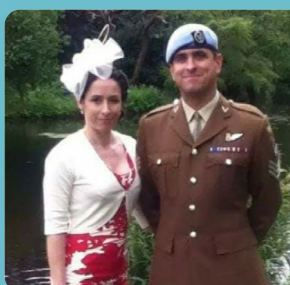
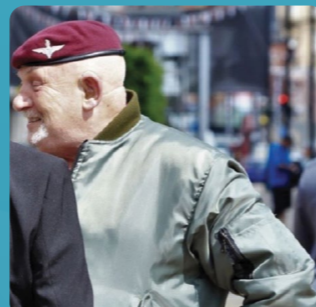
- being overwhelmed by intense feelings associated with the person having died (for example, shock, numbness, long-lasting guilt and/or anger)
- having strong physical reactions (such as inability to sleep, panic attacks, or recurring nightmares)
- feeling alone and/or isolated with no one to talk to
- using unhelpful ways of coping (such as excessive drinking or gambling)
- fearing that you may harm yourself or others or act on suicidal thoughts
- fearing that others may harm themselves or act on suicidal thoughts

Section 3: Coping after suicide – what has helped others?



“It’s not just about you reaching out for help, it’s also about looking out for your muckers. So, be the one that does that initial WhatsApp of, ‘You alright fella? How you doing?’”

Jez, lost a friend



The people on this page are all bereaved by suicide

This section of the *At Your Side* guide focuses on coping with your grief after the suicide of someone during their military service. It aims to help you prepare for what might lie ahead.

The main messages about coping after suicide are listed in Box 3.

Box 3. Main messages: coping after suicide

- When you are bereaved by suicide, your grief journey can be more complicated compared to other types of loss. Just as you would prepare for going on exercise or on tour, preparing to navigate your grief journey is essential.
- Self-care is like your first aid kit; it’s there as an immediate response when needed.
- Look after your physical fitness (get regular physical activity, sleep, food, water/hydration, and time outdoors if you can).
- Look after your mental fitness (if you can, create a routine; take one day at a time; balance time for/ having a break from grieving; rest; set boundaries and don’t allow anyone to tell you what you should and should not feel; ask for help if you need it).
- Navigate setbacks; these are inevitable (e.g., going over unanswered questions, emotions when approaching significant dates, feelings of blame and anger, experiencing rejection or stigma).
- Recognise and move away from unhelpful coping strategies (e.g., excessive alcohol, being aggressive with others).
- Connect with others you trust (family, serving and civilian friends).

- Seek other sources of support if you need them, for example:
 - Military sources (medical officer, chain of command, pastoral support, welfare)
 - Peer support (groups or online/ telephone support for suicide bereavement, suicide prevention and/or mental health)
 - Professional support (to talk through/make sense of your loss)
 - Support from charities (military or non-military)
 - NHS support and/or other professional support to help you make sense of your loss
- **Section 4** lists helpful sources of support.
- The diagram ‘Your Grief Journey: Bergen Essentials’ on pages 36 and 37 provides guidance on the most important ways to look after yourself when you are grieving.

Coping with your grief journey

Grief, regardless of the cause of death, is often described as a journey. It can sometimes take a long time to process the loss and come to terms with living in a new reality without the person who died. Grief reactions will come and go, like waves. Most of the waves are manageable, but some are stronger than others. Sometimes, you will be hit unexpectedly by a wave that you don’t feel prepared for, and this is entirely normal.

When you are bereaved by suicide, your journey through grief can be even more complicated. Just as you would prepare for going on exercise or on tour, preparing to navigate your grief journey is essential, so that you can cope as well as possible.

Ways of coping

Coping after suicide includes all the things we do, as much as is realistically possible, to make sense of what has happened and get ourselves back on a level footing.

Just as we all grieve differently, each of us has different ways of coping, and you will need to do different things to cope at different times. Generally, we cope with difficulties in two main ways:

- problem-solving and/or
- managing our thoughts and feelings

To cope through problem-solving, you might seek out relevant information from a reliable source that will help you navigate the situation.

To cope through managing your thoughts and feelings, you might talk to someone you trust about what has happened.

“For me I’d rather show people that I’m stressed and get that stress out than build it on, build it up.”

Matthew, lost a friend

We do best when we combine problem-solving and managing our strong thoughts and feelings. Both types of coping are equally important along the way and help us adjust to life without the person who has died.

“It’s not just about practical advice – go to here, go to there – but also ‘you may feel this, you may feel that you may want to do this, you may want to do that.’”

Tony, lost a friend who was also a colleague

Looking after your physical and mental fitness: some basics of self-care

Navigating your way through grief after a suicide starts and continues with ‘self-care’ – or looking after yourself. Self-care is like your first aid kit. Just as a physical wound needs care and attention to heal, your grief does too.

“The majority – I’m talking 95 per cent – aren’t wounds that you can see, they’re hidden wounds.”

Jerry, lost friends

Although it may be difficult to prioritise your own needs when someone has died by suicide, it is important to focus on your physical and mental fitness.

“Mental fitness is like physical fitness – it can go up or down. You can do things to improve it.”

Tom, Chaplain, lost colleagues

Consider some of the self-care suggestions in Boxes 4 and 5 to support yourself in challenging times:

Box 4. Physical fitness

- Listen to what your body needs.
- Eat regularly; your body needs fuel to function.
- Keep hydrated; it will help you think more clearly.
- Get rest where and how you can, to preserve your energy.
- Spend some time outdoors each day; getting regular daylight can lift your mood.

- Be as active as you can in whatever way is manageable – take a walk, go for a run, lift some weights, do some stretches. Any physical activity can help reduce feelings of anxiety, aggression, and tension, as well as helping to improve your sleep and energy levels.
- Avoid doing things that might make you feel worse in the long run, such as drinking too much alcohol.

“One of my coping mechanisms is – get to the gym, go climbing.”

Jake, lost friends

Box 5. Mental fitness

- Give yourself time to heal and space to think; this will help you process your loss. Be patient with yourself. Understand that you might experience setbacks and that it takes time to heal.
 - Try to take one day at a time rather than fast-forwarding into the future. Do things in your own time when you feel ready.
 - Create a structure and routine in your day – this might help to steady you.
 - Find ways to relax or unwind that allow you to think about something else and allow you a break from grieving; don’t feel guilty – it is necessary to take time out.
 - Find some quiet space each day, but try not to be on your own for too long.
- Avoid making any major decisions during the early stages of your loss.
 - Acknowledge and accept your thoughts and feelings.
 - Find ways to express your grief, rather than keeping it bottled up; some people find writing thoughts and feelings on paper helps get things out of their system.
 - You don’t have to cope alone. Connect with others you feel positive towards and who you trust.
 - If you can, be clear with others about what you need and don’t need.
 - Keep in touch with family and friends; they are important, especially in difficult times.
 - When you feel you want to, it might help to express your feelings openly to those who care for you.
 - It may help just to be with others, even if you can’t or don’t want to talk.
 - You may find it easier to chat via email or text anonymously to support services who understand (see **Section 4** for details).
 - Be kind to yourself and others but set healthy boundaries and don’t allow people to tell you what you should and should not feel.
 - Access the MoD-endorsed wellbeing resources such as HeadFit and Headspace (see page 46 of **Section 4**).
 - Don’t be afraid to ask for help. Remember that help is available if you need it – there are many organisations that understand and will support you.

“It’s alright to feel upset, but if you do get anxious then seek help.”

Alf, lost colleagues

“If you sit back and go – do you know what? Yeah – you’re going through something bad in life, you’re having one of life’s events. Help you through it and then you’ll be [in] a better place to then carry on when that’s right.”

Paul, lost a family member

Facing difficulties along the way

If, as best you can, you take steps to look after your physical and mental fitness, you are already doing a lot to support yourself through your grief journey. At points along the way you may find yourself on unfamiliar ground with unexpected obstacles, twists, and turns. This can take its toll. The key is being aware that setbacks might arise and planning ahead for these times.

When you meet a particularly difficult point in the road:

Consider what worked before

Try to recall the things that have helped you cope when you have had challenging times before.

Understand that setbacks are normal and be patient with yourself

Setbacks can come and go without warning. Try to be patient and give yourself time. Here are some common setbacks that you might experience when you are bereaved by suicide and ways that you might handle them:

Going over unanswered questions

Be patient if you find yourself repeatedly questioning why the person died or what you could have done differently. When someone dies by suicide, there are so many questions and thoughts that come up again and again. The most common questions are: ‘why?’ and ‘what if...?’. One of the most common thoughts is: ‘if only...’.

The reality is, nobody really knows why someone ends their life, except the person who has died. Despite this, many of us bereaved by suicide will spend a considerable amount of time (weeks, months, or sometimes years), asking these questions and searching for answers. Give yourself permission to keep questioning until you no longer feel the need to think about these questions, or you only visit the thoughts from time to time.

“You can randomly at any time of the day just think to yourself, ‘what didn’t I do or what could I have done better? What was it that was so bad that...?’ And then you just don’t have the answers. Because... when someone dies like that, and they didn’t need to die, you just can’t comprehend and you’re always thinking ‘what if’? For me it’s a massive, long list of ‘what ifs?’”

Debra, lost her partner

Navigating significant dates

Anniversaries, birthdays and other significant events or occasions can be especially difficult. Some of us find the anxiety leading up to the date to be the most difficult; others find the date itself to be the most challenging. Allow yourself to acknowledge that the important date is coming up. This can help you take charge from a safe distance by thinking about how you might feel and making decisions about what you might do on that day. You might do something specific to remember the person or you may decide to do nothing, and this is OK; that is a decision you have thought about in advance, rather than regretting what you haven’t done on the day.

“The anniversary consumes you initially and then as life goes on, it becomes less. Then after the first-year anniversary, it may consume you again for a period of time, but then it becomes less again.”

Ben, lost a colleague and a civilian family member

“What I do is on Remembrance Sunday, I lay a wreath at our local cenotaph... and that is the one day of the year that I get sad. I deliberately save it all up for that day and I allow myself to be unbelievably sad.”

Sam, lost colleagues

Experiencing blame and anger

When we are trying to make sense of why someone has died by suicide, we might blame ourselves or others. When feelings of blame and/or anger come to the surface, remind yourself that in reality:

- there is no single reason why someone dies by suicide. Rather, it is a build-up of stressors that create a sense of hopelessness and despair.
- you are human and make mistakes like everyone else, but you are doing your best.

Feeling rejected

Feeling rejected and isolated are common and completely understandable when you are bereaved by suicide. Many of us can feel rejected by the person who died. We can also feel rejected by our friends or community, who may avoid us. Their negative responses do not mean they do not care, rather it is more likely that they do not know how to respond. You could share with others the booklet Finding the Words ([suicidebereavementuk.com/wp-content/uploads/2020/06/Finding-the-words.pdf](https://www.suicidebereavementuk.com/wp-content/uploads/2020/06/Finding-the-words.pdf)). It offers useful guidance on ways to reach out and speak to someone bereaved by suicide and may help others to support you.

Feeling stigmatised, ashamed, or judged

When we are bereaved by suicide and people are uncertain how to respond, we can feel judged, left out and/or isolated, which is sometimes called feeling stigmatised. It can be helpful to practise what you might say to people about your bereavement. You may wish to give those closest to you more information, but it’s still helpful to decide what you may want to say. For example, to people you don’t know so well you could say something like:

‘My friend took her own life/died by suicide. It’s hard for me to talk about it but I really appreciate your support.’

For those you feel closer to you could say something like:

‘Sarah took her own life/died by suicide. It’s really hard for me to think about why she might have done it, and I don’t know all the details, but I’ll tell you more when I can.’

If you are able to talk to those closest to about your loss, it's an important step in helping to open up supportive conversations and reduce stigma.

Feeling suicidal

If you are bereaved by suicide, you may at times think about suicide or feel suicidal yourself. It does not mean you will act on these thoughts and feelings. Most people who have lost someone who has died by suicide never do. You may have been feeling suicidal before the person died and find that you are struggling. If you are feeling suicidal and feel unable to keep yourself safe, please see **Section 4**, page 44 for contact details of organisations you can talk to now.

With substances in our system, the emotions that we were attempting to push away (painful feelings such as distress and anger), can rush to the surface, lowering our ability to control our actions. This increases the risk of behaving in ways that could harm ourselves or others. Alcohol can also lead to depression or make it worse if we are already feeling low.

“It’s easy to just go back to your house, to your home, to your room, whatever, during bereavement and then... alcohol is a depressant in itself, isn’t it?”

Jerry, lost friends

Sometimes people will struggle to express the feelings associated with bereavement. It can feel that the only way of relieving distress is to become argumentative or physically aggressive with family, friends, colleagues, and even strangers. Putting yourself at risk of harming yourself or being harmed by others in this way could negatively impact on relationships and even your career.

“When the suicide happened, I was trying to get beaten up myself. In reality, I used to attack groups of two, three, four people, hoping that it would go wrong... that went on for years... and I would antagonise people so it would happen.”

Dave, lost colleagues and a civilian family member

“While you may think about suicide, the most important thing is to recognise those feelings and elect to do something about it rather than... think they’ll just go away.”

Tony, lost a friend who was also a colleague

Recognise and move away from using unhelpful coping strategies

Everyone struggles to cope at times, and it is normal to want to block out or numb the painful thoughts and memories associated with suicide. At these times, watch out for unhelpful ways of coping which can hinder rather than help you.

For example, using alcohol more than usual is one way that some people bereaved by suicide attempt to cope. While these strategies may provide temporary relief, they often increase rather than lower anxiety and stress levels. Excessive alcohol use can also impair our judgement, reduce our sleep quality, and affect the way we think, feel, and behave.

“I was struggling myself and the way that I was struggling wasn’t crying or breaking down, it was becoming overly confrontational... I think I would probably be described as difficult and inappropriate by some people higher than me.”

William, lost patients

These unhelpful ways of coping can complicate the grieving process and mean that we push people away, leading to increased isolation at a time when we may need friends and colleagues around us.

Be flexible in how you cope. It's OK to drop strategies that are not helping.

The importance of connecting with others

People often feel overwhelmed and confused by the way they react to the loss and want to avoid contact with others. You may have had a special bond with the person who died.

“You’re like a band of brothers really.”

Matthew, lost a friend

Staying connected with people you trust will help you in difficult times. Practical and emotional support from others is protective because it helps to strengthen our physical and mental fitness.

Reaching out and asking for help is a strength not a weakness.

“It’s about learning to cope with these things... we’ve all got our hurts, we’ve all got our barriers, we’ve all had our struggles, no one is bigger than the other, but if we don’t talk about these things, we never move forward.”

Jake, lost friends

Family, close friends and immediate social network

Some people prefer to be supported by family members, close friends, and their immediate social network. If you are away, however, you may not be able to easily access this type of support; the most important thing is to have trusting relationships with the people from whom you get support.

“I feel like I’m doing really well. My partner’s my biggest support and he’s managed to help me out massively.”

Steve, lost colleagues

Armed Forces connections

In the military, your friends can be like family. They understand you, and the bonds between you go deep. In times of difficulty, friends can support you and step up when needed. This goes both ways, as you will be able to look out for them in times of need.

“Everyone somewhere in the Army has someone that is their wingman.”

Jez, lost a friend

“One of the lads, when I was... going through dramas... he was, ‘what the hell are you doing, like?’. It absolutely was great of him. He took me to get some new clothes... tried taking me out... he talked to me quite a lot when he saw me. He was making sure I was OK, which was useful.”

Brad, lost colleagues

If you lose a serving friend, you as well as a wider circle of friends and colleagues might be affected. It can feel like losing a family member and hit everybody hard. Using dark humour to cope even when really struggling is common. This is an understandable coping mechanism, but it can mask deep feelings of distress, especially for those close to the person who has died.

“Service personnel have a very dark humour, which is the typical coping strategy that is adopted... to say wildly inappropriate things.”

Tom, Chaplain, lost colleagues

People bereaved by suicide often feel under pressure to look like they are coping. You may be reluctant to ask for help yourself or be uncertain how to reach out to help someone else. Sometimes, it just takes one person in the group to take the first step and initiate a conversation, to enable you all to support each other.

Connecting with friends can steady you and help you feel less isolated.

It's not just about talking. Sometimes, actions speak louder than words, especially for those who struggle to open up. A sense of belonging, feeling cared for and friends stepping up without being asked counts for a lot. Sharing a meal or a brew can all help to show support.

“If I'm working with someone that isn't married, I'll cook extra and I'll bring a meal in, or you know, I'll get them round. I've had people round for Sunday lunch or they'll come round for a brew or a meal... so yeah, I think those little things.”

Jez, lost a friend

First-line sources of Armed Forces help include:

- your chain of command
- single service welfare support including specialist, confidential welfare support
- pastoral care which is confidential and available to serving personnel and families regardless of faith/belief. Pastoral support teams are available wherever you are based including when you are actively engaged in operational duties. They work alongside welfare and medical staff as well as a range of other support agencies
- your medical officer

“I got a large amount of support. I didn't get a choice on this, but I was put on the station's welfare register so that people would be aware that I'm dealing with bereavement. And there have been occasions when I have said to someone, ‘look I think you need to go on the welfare register, not because you're a fruit loop or you're going to do something daft, but just so people are aware that, you know what, if you phone up on Monday morning saying I just can't come in at the moment, I've got to sort out X, we know why.”

Paul, lost a family member

“You could always go and sit with the padre any time. We had a little chapel on the camp... he was a very open chap. You could always go and talk to him... because like all the other padres we had, he liked to get out and about on the ground, speaking to the lads.”

Alf, lost colleagues

“The first thing the boss did when I walked into the office... he just got up and gave us a hug... and he said, ‘mate, I don't know what to say’. And I sat and looked at him and I went, ‘good, ‘cause I don't either.”

Paul, lost a family member

Peer support

Peer support offers the chance to talk about your loss with others who have experienced a similar event. Peer suicide bereavement groups are generally run and attended by people who understand what you are going through.

*“It's far more effective to have someone's story, someone who's been through it, who can say, ‘yeah, do you know what? It will always be s**t, but it isn't always s**t!’ And getting to the point of being able to understand that weird subtlety... and that person, that lived experience, the testimony, whatever you want to call it. Because it is being able to say, ‘do you know what? There might be a million and one things that we've got nothing in common, but there's one piece we do.”*

Paul, lost a family member

There are peer support groups for suicide prevention and mental health too. Even though you are serving in the military, civilian peer support is still available to you.

*“So, I go to... a suicide prevention charity. I go to that because I struggle with my mental health every now and again. Basically, the mantra of our group is ‘if you can help one guy then it’s bloody well worth it’. They don’t judge you; they’re there to listen if need be. We’ve got a group chat and s**t going and it’s really, really helped me and they’re a brilliant group of lads.”*

Brad, lost colleagues

You can generally join a group directly. They are usually free to attend and held in a confidential, supportive, and non-judgemental setting.

Peer support can enable you to understand and normalise your reactions and see how other people cope. Strong bonds are often created, which can support you as you move through the grieving process.

“I’d want to see things about – like these external numbers outside the military. Civilian numbers that you can speak to, like a 24-hour line sort of thing.”

Dan, lost a friend who was also a colleague

Getting professional support for mental fitness

There can be a common misconception that expressing feelings and asking for support is a weakness and frowned upon³. However, your mental fitness is crucially important to the Armed Forces. By looking after your mental fitness, you will be able to support yourself and your fellow service personnel and do your job to the best of your ability.

“If you don’t look after your mental fitness, you won’t be able to do your job.”

Tom, Chaplain, lost colleagues

“I went to counselling, and do you know what? I’m going to own this, yeah. I’m actually now with a psychiatrist and all that. And you know, with the psychiatrist I’ve got trust in him.”

Jake, lost friends

When you are bereaved by suicide, professional support to talk through and make sense of what has happened can help you cope much better. It can be common to think that professional support is not for you. Not everyone will need it, but remember, being mentally and emotionally fit will not only serve you but enable you to be the best service person you can be.

³Jamieson SK, Cerel J, Maple M (2022) Social and cultural dimensions of loss of a military colleague by suicide or traumatic death: A retrospective veteran study. Social Science and Medicine Qualitative Research in Health (2) 100160 <https://doi.org/10.1016/j.ssmqr.2022.100160>

“I don’t think talking support is pink and fluffy anymore... it’s giving people the ability to keep going. Because fundamentally we’ve all got a job to do. We’ve all got something to deliver. If you’re having one of life’s events – help you through it and then you’ll be in a better place to carry on when that’s right.”

Paul, lost a family member

“Everybody’s different and it’s about finding somebody who can help somebody with a range of feelings.”

Tony, lost a friend who was also a colleague

How do I ask for professional support?

MoD has protocols and procedures in place when serving personnel die by suicide and support will be offered. It can be difficult initially to accept offers of professional support and/or ask for it if you are bereaved by suicide. The first step is to acknowledge that you need some help and give yourself permission to ask for and accept it. In addition to your chain of command, the single services offer a wide range of professional welfare, pastoral and clinical support through their own specialist staff and externally through their service charities.

“My advice would be don’t be afraid if you’ve got mental health issues, don’t be afraid if you need to speak to someone.”

Dave, lost colleagues and a civilian family member

“It comes to the macho element I think, the fearfulness about if you have a mental health issue, if you go for counselling, people are fearful of it being on your record and a reason to be got rid of. And that’s why I’m really open about having therapy for [my loss] on a couple of occasions and yeah – it’s in my medical records. But there is no reason for getting rid of me. I’m still here.”

Ben, lost a colleague and a civilian family member

Organisations that you can contact for help are listed in **Section 4**.

“It’s taken me that long to kind of now be more, I suppose, fair to myself, that actually to discuss these things does help. That’s another message people need to understand, especially within the military that... a problem shared is a problem halved, and never truer is that phrase.”

Jez, lost a friend

Your grief journey: bergen essentials



LPhoto Kevin Walton
UK MOD © Crown copyright 2021

Your grief journey is like preparing for exercise. Think about what you need in your bergen and why, travel light and balance your load so you can respond to new terrain.

Everyone has their limits so it's important to pack well, prioritise, know your boundaries and connect with others.

1. First aid kit – Like a medical first aid kit, a basic 'self-care' first aid kit is there as an immediate response when you need it. It could be an app, or a 24/7 helpline number stored on your phone.

2. Connection – Keep in touch with people you trust. Spending time alone can be healthy, but it's also important to stay connected.

3. Boundaries – Establish healthy boundaries and priorities. Looking after yourself first will enable you to support others.

4. Exercise – Grief can have a physical effect on your body. Regular exercise will support your physical and mental fitness, including helping your mood.

5. Sleep – Good sleep can help to process grief. Unwinding, and avoiding caffeine or alcohol before you want to sleep can help you rest and repair.

6. Food – The food we eat can have a direct impact on our mood. Eat regularly; your body needs energy to perform. Eating with others can help you stay connected.

7. Hydration – Drink water to stay hydrated. While alcohol can be part of socialising, it is a depressant and can lead to low mood.

8. Outdoors – Spending time outdoors improves physical and mental fitness.

9. Navigation – The grief journey can be challenging. Adapt and evolve according to the situation. Seek support if you need direction or guidance.

10. Routine – A daily routine gives structure and balance.





Section 4: Useful contacts and resources

“People are affected by suicide every single day and it’s devastating. And there is a lot of help out there for people – it’s just finding the help.”

Brad, lost colleagues



The people on this page are all bereaved by suicide



This section of the *At Your Side* guide lists some of the organisations that offer advice and support to servicemen and women bereaved by suicide. It complements the first-line support that is available to you internally via your chain of command and the single services. These services offer a wide range of professional, welfare, pastoral and clinical support through their specialist staff and externally through their service charities.

We have gathered a selection of resources that others bereaved by suicide have found helpful, and which may also be helpful to you (see Box 6).

The details of each resource are accurate at the time of publishing.

Box 6. Resources listed in this section

- Key contacts for service personnel
- Military charities and benevolent funds
- Peer and group support
- Civilian bereavement support charities
- 24-hour helplines
- LGBTQ+ support
- Information about drugs and alcohol
- Legal and financial advice
- Inquest information and support
- Suicide prevention support
- Apps and online resources
- Online directories of support

- Books and leaflets
- Documentaries
- Practical guidance on how to respond to someone experiencing suicidal thoughts

A full list of these and more can be found on the Suicide Bereavement UK website www.suicidebereavementuk.com/key-resources.

Key contacts for service personnel

Each single service has their own internal welfare and wellbeing share points which provide specific single service information, signposting, and support to serving personnel. If you do not already have access to the share points, contact your chain of command or welfare service for information.



The MOD **Purple Pack** bereavement guide provides practical guidance, information and signposting for families of service personnel who are bereaved.

Website: www.gov.uk/government/publications/purple-pack-bereavement-guide-for-families-of-service-personnel

The Joint Casualty and Compassionate Centre (JCCC) oversees the management of British Armed Forces casualties and compassionate cases and may also be a source of guidance and support.

Website: www.gov.uk/guidance/joint-casualty-and-compassionate-centre-jccc

The **Defence Gateway** is a dedicated site that can only be accessed by MOD personnel. To access a number of useful websites and applications users are required to set up an account and log in.

Website: www.defencegateway.mod.uk

Military charities and benevolent funds



There are many charities dedicated to providing support, advice and aid for service personnel, veterans and their families on a range of issues. **Cobseo** has created a directory which lists military charities that support the Armed Forces community. The directory lists contact details of the charities and the type of support provided by each.

Cobseo Armed Forces directory: www.cobseo.org.uk/members/directory

Examples of charities you might find helpful are listed below. Some organisations are listed under a specific service but may offer information and support on a range of topics.



The Soldiers', Sailors', and Airmen's Families Association (SSAFA) provides practical, financial and emotional support to service personnel, veterans and their families.

Website: www.ssafa.org.uk/get-help

Live chat: www.ssafa.org.uk/get-help/forcesline

Advice line: **0800 260 6780**

Monday to Thursday 9am-5pm. Friday 9am-4pm



Defence Medical Welfare Service (DMWS) offers practical and emotional support to all serving personnel, veterans, reservists, and their dependent relatives through difficult times including bereavement.

Website: www.dmws.org.uk

Helpline: **0800 999 3697**



Royal Navy and Royal Marines Charity offers financial and emotional support to serving and former members of the Navy and their families. Their website also provides advice on a range of subjects including bereavement, the transition to civilian life, family, relationships and employment.

Website: www.rnrmc.org.uk

Email: theteam@rnrmc.org.uk

Telephone: **023 9387 1520**
Monday to Friday 8am – 4.30pm



The Royal Marines Charity provides support, advice and friendship to serving and retired Royal Marines and their families. The charity offers a range of services including mental health support, respite breaks and financial support. Completion of a free membership form is required.

Website: www.rma-trmc.org

Telephone membership: **023 9298 1922**

Telephone health & wellbeing support: **0800 468 1664**

Monday to Friday 8.30am – 4pm



Naval Families Federation offers information, advice, and guidance on a range of issues including bereavement, accommodation, education, finance, employment and relationships to naval families.

Website: www.nff.org.uk

Telephone: **02392 654 374** Monday to Thursday 9am – 5pm, Friday 9am – 1pm

Email: contactus@nff.org.uk



Army Families Federation is an independent charity for Army families around the world that offers confidential advice on bereavement, transition from serving to civilian life, housing, financial support and allowances, education and childcare.

Website: www.aff.org.uk

Email: contact@aff.org.uk

Telephone: **01264 554 004** Monday to Thursday 8.30am – 5pm, Friday 8.30am – 1pm



Royal Air Force Families Federation offers support to service personnel and the RAF family around the world on a range of issues including bereavement, education, healthcare, accommodation, benefits, and visa support.

Website: www.raf-ff.org.uk

Telephone: **01780 781 650**
Monday to Friday 10am – 3pm

Email: enquiries@raf-ff.org.uk



Royal Air Force Benevolent Fund provides support to RAF service personnel and their families including spouses, partners, dependent children, and carers. The Fund will consider any request for assistance, providing a bespoke approach to each situation. The Fund can provide practical funeral support, financial help, confidential counselling, and bereavement support.

Website: www.rafbf.org

Helpline: **0300 102 1919** Monday to Thursday 9.30am – 4.30pm, Friday 9.30am – 4pm

Peer and group support

For serving personnel there is specific peer and group support available through the specialist single service networks. Contact your chain of command or welfare support for information.



The Soldiers', Sailors', and Airmen's Families Association (SSAFA) offers a suicide bereavement support group to families (18+) who have been affected by the suicide of a serving or loved one.

Support Group Membership Form: www.ssafa.org.uk/get-help/support-groups-membership-form

Website: www.ssafa.org.uk

Advice line: **0800 260 6780**
Monday to Friday 9am – 5pm



Survivors of Bereavement by Suicide (SOBS)

is a national charity offering information, support group meetings and a helpline to those bereaved or affected by suicide.

Website: uksobs.org

Helpline: **0300 111 5065**

Every day 9am-7pm (call charges apply)

In-person and online support groups can be located by calling the national office.

Email support: email.support@uksobs.org

Online community forum free support accessible 24 hours a day. Users must register through the SOBS website.



Facing the Future is a Cruse and Samaritans partnership offering a series of free self-referral online support group sessions to those bereaved by suicide.

Registration: www.facingthefuturegroups.org/RegistrationPage



Togetherall is a free online community where service personnel, veterans and their family members over 16 years of age can access support. This free online forum is moderated by clinical professionals and people can give or receive mental health support anonymously. Users are required to register for a free account.

Website: togetherall.com/en-gb/

Civilian bereavement support charities



Amparo liaison teams provide free and confidential emotional and practical support to anyone who has felt the impact of suicide for as long as an individual may need support. A full updated list of UK areas covered by this service can be found on their website.

Website: amparo.org.uk

Tel: **0330 088 9255** *Weekdays 9am – 5pm*



Suicide & Co offers up to 12 sessions of free counselling, delivered online, by telephone or video call, for anyone over 18 years bereaved by suicide in England and Wales.

Website: www.suicideandco.org

Helpline: **0800 054 8400**

Monday to Friday 9am – 5pm



Cruse Bereavement Support has 80 branches across England, Wales and Northern Ireland that offer support. Cruse has specific resources available to anyone affected after a military death.

Website: www.cruse.org.uk

Armed Forces support: www.cruse.org.uk/organisations/grief-in-the-military

Helpline: **0808 808 1677** *answered by trained volunteers Monday, Wednesday, Thursday, Friday 9.30am – 5pm, Tuesday 1pm-8pm*

Email Service – Opening Hours: *You can contact us through our **webform** at any time. Response times may vary*



Cruse Scotland is an independent charity offering help and support to bereaved adults and children.

Website: www.crusescotland.org.uk

Email: support@crusescotland.org.uk

Helpline: **0808 802 6161** *Monday to Friday 9am – 8pm, weekends 10am – 2pm*



StrongMen offers bereavement support to bereaved men for any type of loss. For those who enjoy being outdoors, StrongMen offers free weekends away and the opportunity to talk directly to trained volunteers using the Man2Man phones service. StrongMen also has a podcast available.

Website: www.strongmen.org.uk

Email: hello@strongmen.org.uk

Freephone: **0800 915 0400**

24-Hour helplines



Samaritans offers an anonymous and confidential 24/7 helpline. They have worked with MOD and other charities to provide support for service personnel of the Armed Forces, veterans and their families.

Website: www.samaritans.org

Military support: www.samaritans.org/how-we-can-help/military/

Helpline: **116 123**, *24 hours every day*

Email: jo@samaritans.org



Shout offers 24/7 confidential crisis support via free text for times when you need immediate assistance. The Shout website offers resources and information about a range of subjects including bereavement support.

Website: www.giveusashout.org

Online resources: www.giveusashout.org/get-help/resources/

Text the word **'SHOUT'** to **85258**

If you are suicidal and feel unable to keep yourself safe – you are not alone:

- your first point of call should be your **chain of command, unit medical officer, welfare officer or pastoral support** if you are in the UK or overseas. They are there to help and offer the best advice. Contact numbers for medical out of hours support are available through your medical centre
- **in an emergency you should contact your local medical officer.** If your local medical officer is unavailable and you are in England, Scotland or Wales contact your local NHS accident and emergency (A&E) unit or ring 999. In Northern Ireland, Medical Reception Station Aldergrove operates 24/7 telephone manning with access to appropriate specialists

You can also contact:

Samaritans support service available 24 hours a day, 365 days a year.
Tel (UK): **116 123** (free)
Tel (outside of the UK): **+44(0)330 094 5717** (local charges apply)
Email (worldwide): **jo@samaritans.org**
Website: **www.samaritans.org**

- **MoD's mental health line available 24/7 on: 0800 323 4444**
- **NHS mental health support (available 24/7)**
Tel: **111 - Option 2** (free)
- **Combat Stress/Rethink at combatstress.org.uk** who offer a **24-hour freephone helpline** if you have concerns about your mental health. The number to call is **0800 138 1619**. They provide emotional support, a listening ear and signposting service

- **TogetherAll** who provide safe, anonymous support to anyone struggling with a range of common mental health issues, or who feels burdened by everyday worries and concerns. It is free for all serving personnel, veterans, and their families and is **available 24/7** at **togetherall.com/en-gb/** and via a smartphone app for iOS and Android

The above information incorporates official government advice for serving personnel which can be found at: **www.gov.uk/guidance/mental-health-support-for-the-uk-armed-forces**

LGBTQ+ Support



Switchboard provides a confidential helpline answered by trained volunteers who identify as lesbian, gay, bisexual or trans. The helpline is available to individuals, friends, parents, or family members of LGBTQ+ loved ones who are looking for some independent advice and support about any issues of concern.

Website: **www.switchboard.lgbt**

Email: **hello@switchboard.lgbt**

Freephone: **0800 0119 100**
10am – 10pm every day

Information about drugs and alcohol **withyou**

We Are With You offers free, confidential support to members of the Armed Forces community who are experiencing issues with drugs and alcohol as well as mental health and housing issues. Support can be offered online or face-to-face at a location near you. Details of a local service can be found on the website.

Website: **www.wearewithyou.org.uk/what-we-do/armed-forces/**

Webchat via website: *Monday to Friday 9am – 9pm, Saturday and Sunday 10am – 4pm*

FRANK

FRANK provides information about drugs and alcohol with links to local advice, treatment, and confidential support.

Website: **www.talktofrank.com**

Advice line: **0300 123 6600** 24 hours every day

Text: **82111**

Legal and financial advice



Royal British Legion (RBL) offers service personnel of the Armed Forces, veterans and their families help with physical and mental wellbeing, financial and employment support including help with funeral costs and advice from experts on rights and pensions, housing and inquests.

Website: **www.britishlegion.org.uk**

Email: **info@britishlegion.org.uk**

Telephone advice line: **0808 802 8080**
every day 8am – 8pm

From overseas: **+44 (0)20 3376 8080**



Citizens Advice offers free and confidential advice to service personnel of the Armed Forces, veterans and their families/dependants. The service has an extensive website and can offer assistance on a wide range of issues including identifying what financial benefits individuals are entitled to in the UK and abroad, and offering legal advice and information about help with school fees, childcare costs and Forces' discounts. Use the Citizens Advice website to find a local branch.

Website: **www.citizensadvice.org.uk**



Turn2Us offers financial support, bereavement benefit advice, grants and other information, support and advice to service personnel, veterans and their families. Specific support can be found on the Turn2Us website using the 'Your Situation' tab. Face-to-face advice sessions can be arranged through the website.

Website: **www.turn2us.org.uk**

Inquest information and support

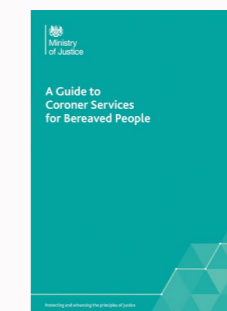


The Coroners' Courts Support Service is an independent voluntary organisation whose trained volunteers offer emotional support and practical help to bereaved families, witnesses and others attending an inquest at a coroner's court in various locations across England and Wales only.

Website: **www.coronerscourtsupportservice.org.uk**

Email: **info@ccsupport.org.uk**

National helpline: **0300 111 2141** Monday to Friday 9am – 7pm, Saturday 9am – 2pm



A Guide to Coroner Services for Bereaved People

is produced by the Ministry of Justice. This guide explores what an inquest is, what the role of the coroner is and how to access legal advice and support.

Website: **suicidebereavementuk.com/wp-content/uploads/2023/05/guide-to-coroner-services-bereaved-people-jan-2020-1.pdf**

Suicide prevention support



PAPYRUS is a suicide prevention charity which offers the free, confidential helpline HOPELINE247, for children and young people/young adults up to the age of 35 years who are experiencing thoughts of suicide or anyone who has concerns that a young person is thinking about suicide. The PAPYRUS website also provides a range of useful resources, advice and information.

Website: papyrus-uk.org

Email: pat@papyrus-uk.org

Helpline: **0800 068 41 41** 24 hours every day

Text: **88247** (charges may apply)

Apps and online resources



HeadFIT was designed for service personnel, veterans and other members of the defence community and developed in partnership with The Royal Foundation, MOD and King's College London. Users can access free self-help tools to enhance mood, drive, and confidence, and help manage the stress of everyday life.

Website: headfit.org/



Headspace offers a guide to mindfulness, sleep, focus, movement and more.

Website: www.headspace.com

Online directories of support



The Support After Suicide Partnership online directory holds the details of over 100 organisations and individuals offering support to those bereaved by suicide.

Website: www.supportaftersuicide.org.uk



AtaLoss offers resources and information as well as a directory of support services for bereaved people through a national signposting website of bereavement services and online bereavement support. Users can locate support in their area using their location.

Website: www.ataloss.org



The Hub of Hope app is free to download and brings over 15,000 local, national, peer, community, charity, private and NHS mental health support organisations and services together in one place. Users are invited to enter their postcode to locate resources in their geographical area. Crisis text and helpline support can also be accessed through the app.

Website: hubofhope.co.uk

Books and leaflets

The following books and leaflets are designed for the general public but may also be helpful for serving personnel.

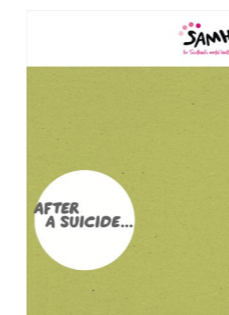


Help is at Hand is written by people bereaved by suicide for people bereaved by suicide and is a free resource with different versions for England, Wales and Northern Ireland. Scotland has the After A Suicide booklet which is also free.

England: www.suicidebereavementuk.com/key_document/help-is-at-hand/

Wales: www.suicidebereavementuk.com/wp-content/uploads/2020/06/Help-is-at-Hand-Wales.pdf

Northern Ireland: www.suicidebereavementuk.com/wp-content/uploads/2020/06/Help-is-at-Hand_NI.pdf

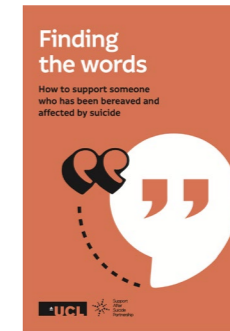


Scotland:
After A Suicide www.suicidebereavementuk.com/wp-content/uploads/2020/06/Scotland-After_a_suicide.pdf



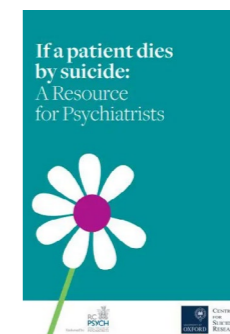
First Hand is a free downloadable guide written to help after the suicide of somebody you didn't know. It explores grief responses that may be experienced after an individual witnesses or attends the scene of a stranger's suicide.

Website: www.suicidebereavementuk.com/key_document/first-hand-booklet/



Finding the words is a free downloadable leaflet looking at how to support a person bereaved by suicide. It includes guidance on what to say and how to listen effectively.

Website: www.suicidebereavementuk.com/wp-content/uploads/2020/06/Finding-the-words.pdf



Originally designed by Oxford University for psychiatrists whose patient has died by suicide, this valuable resource has been helpful to other professionals who have also experienced the death of a patient/client by suicide. The booklet

describes the emotions professionals might experience and the formal process following a patient's death and signposts the reader to additional key resources.

Website: suicidebereavementuk.com/key_document/if-a-patient-dies-by-suicide/

Documentaries

The following BBC documentaries are relevant to anyone bereaved by suicide who wishes to learn about the experiences of others bereaved by suicide.

BBC Our Silent Emergency: Roman Kemp whose best friend died by suicide, takes a deeply personal and candid look at suicide and young men in the UK.

Website: www.bbc.co.uk/iplayer/episode/p098hsv6/roman-kemp-our-silent-emergency

BBC Life after Suicide: Angela Samata explores why some people take their own lives and how those who love them can come to terms with their loss.

Website: documentaryheaven.com/life-after-suicide/

Practical guidance on how to respond to someone experiencing suicidal thoughts



Zero Suicide Alliance provides free 30-minute online training for personnel 16 years and over about how to ask if someone is feeling suicidal. Developed with Help for Heroes, the training features videos of veterans discussing suicide bereavement and experiences of suicidal thoughts.

Website: zerosuicidealliance.com/suicide-awareness-training-veteran-edition

Additionally, there is free 20-minute suicide prevention training which aims to give you the skills and confidence to respond to someone if they are feeling suicidal (relevant to anyone bereaved by suicide)

Website: www.zerosuicidealliance.com/suicide-awareness-training

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We would also like to especially thank the service personnel of various ranks and veterans who took part in the Armed Forces Suicide Bereavement study. This guide could not have been written without them. Their involvement demonstrates care and commitment to share these experiences to benefit others. People bereaved by the suicide of a relative, friend or colleague contributed photographs for this guide, and we are extremely grateful to them.

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About this guide

This evidence-informed *At Your Side* guide is based on independent research carried out by Suicide Bereavement UK. It is for serving personnel and is one of three guides written for the bereaved by the bereaved of the Armed Forces community. The content reflects the views of the authors and people with lived experience who took part in the study and not those of the funders NHS England. It was not written or designed by MoD.

Approximately 80% of the UK Armed Forces community (serving, reservist, veterans and their families), are resident in England and most of the advice in this guide is England focused. Where possible the guide has sought to recognise the different circumstances for those who are elsewhere in the UK, but you may need to seek specific advice on your circumstances if you are outside England (including outside the UK).

Research User Group and Expert Panel

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Kevin Riches Ex-Royal Air Force (Corporal) and ex-Army Reservist. He lost his son Ben, a former soldier, to suicide

Shirley Simmons Founder and Chair of Bury Veterans Hub; Founder of Radcliffe Veterans Breakfast Club and Co-ordinator of Bury Armed Forces and Veterans Breakfast Club

Contact us

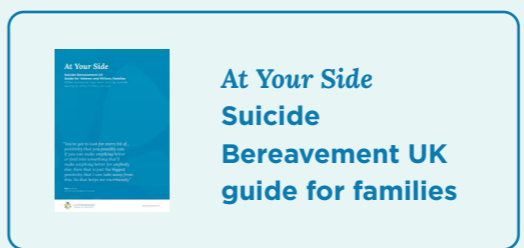
Suicide Bereavement UK
6-8 Taper St
Ramsbottom
Lancashire
BLO 9EX

Telephone: **01706 827 359**

Website: suicidebereavementuk.com

Support for Children and Young People Bereaved by Suicide

If you are responsible for or supporting children or young people who are bereaved by suicide you might find the *At Your Side* family guide helpful, as it provides detailed advice and guidance on explaining suicide to children and young people.



The children and young people on this page are all bereaved by suicide



At Your Side

Suicide Bereavement UK Guide for Serving Personnel

When someone may have died by
suicide during their military service