

2023 POSTVENTION POLICY AND SUICIDE PREVENTION GUIDE

"When someone dies by suicide, the effect on those touched by it – families, friends, workers – can be immediate and traumatic. Research shows that planning ahead can ease grieving, promote a smoother adjustment, and prevent contagion." ¹

(Cerel & Campbell, 2008).

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ABOUT THIS POSTVENTION POLICY

The 2023 Postvention Policy and Suicide Prevention Guide was developed by the Torrington Area Health District (TAHD) in collaboration with McCall Behavioral Health Network. It was supported by a Comprehensive Suicide Prevention Grant awarded by the Center for Disease Control and Prevention (CDC). The TAHD modeled this Policy on *After Rural Suicide: A Guide for Coordinated Community Postvention Response* by the California Mental Health Service Authority². 2023 Postvention Policy and Suicide Prevention Guide is free of charge and can be used as a template by any entity interested in having a Postvention Policy at their disposal in the TAHD jurisdiction and beyond.

INTRODUCTION AND BACKGROUND

Definitions

It is pertinent to clearly understand the terminology related to suicide.

- *Suicide* is an act of an individual intentionally ending their own life³.
- Suicidal attempt (SA) is a nonfatal self-directed injurious behavior with any intent to die as a result of the behavior⁴.
- Suicidal ideations (SI), often called suicidal thoughts or ideas, is a broad term used to describe a range of contemplations, wishes, and preoccupations with death and suicide⁵.
- *Postvention* refers to an organized response in the wake of suicide to accomplish any one or more of the following:
 - To facilitate the healing of individuals from the grief and distress of suicide loss.
 - To mitigate other harmful effects of exposure to suicide.
 - To prevent suicide among people at high risk after exposure to suicide⁶.

Mission

The 2023 Postvention Policy and Suicide Prevention Guide provides a guideline for assisting with the aftermath of a suicide and subsequent follow-up procedures to prevent the development of suicide clusters and assist those who require it.

Objectives

The main objective is to reduce trauma and provide support for loss survivors.

The secondary objectives are:

1. Establish a postvention plan after a suspected case of suicide.
2. Support healing of those affected by suicide.
3. Help organizations respond appropriately and timely to suicide by offering resources for messaging and educating the community about suicide prevention.
4. Enable various departments to collaborate to reduce suicides and the chance of developing clusters.
5. Recommend relevant training and support services.

Scope

The scope of this policy is broad and includes prevention strategies, intervention plans, postvention responses, and a multitude of resources that are beneficial for various agencies.

CRISIS RESPONSE CORE TEAM

Establish a Crisis Response Core Team and keep it updated with correct names and contact information.

ROLE	NAME AND CONTACT INFORMATION	REVISED
Crisis Response Team Coordinator		
Assistant Coordinator		
Back-up Coordinator		
Member		

POSTVENTION

Postvention consists of structured, systematic activities that follow a suicide attempt or death that promote recovery and healing among those affected. Postvention efforts enhance suicide prevention by providing those affected with behavioral health, spiritual, and community-level support.

There are three phases to postvention: **Stabilize**, **Grieve**, and **Grow**.

Stabilize: Due to loss and the trauma that follows; several issues need to be assessed and stabilized.

Grieve: This involves integrating grief into one's life in a healthy way.

Grow: Assist those affected to have a positive psychological change following grief.

POSTVENTION RESPONSE

The steps outlined in this section comprise a plan with specific tasks to be completed by designated individuals as you respond during the first 24 hours, first few days, and weeks, and as needed.

It is recommended that in all suicide deaths, the following steps be taken:

1. When the **Crisis Response**

Team Coordinator learns about suicide, other team members are notified and coordinate a response.

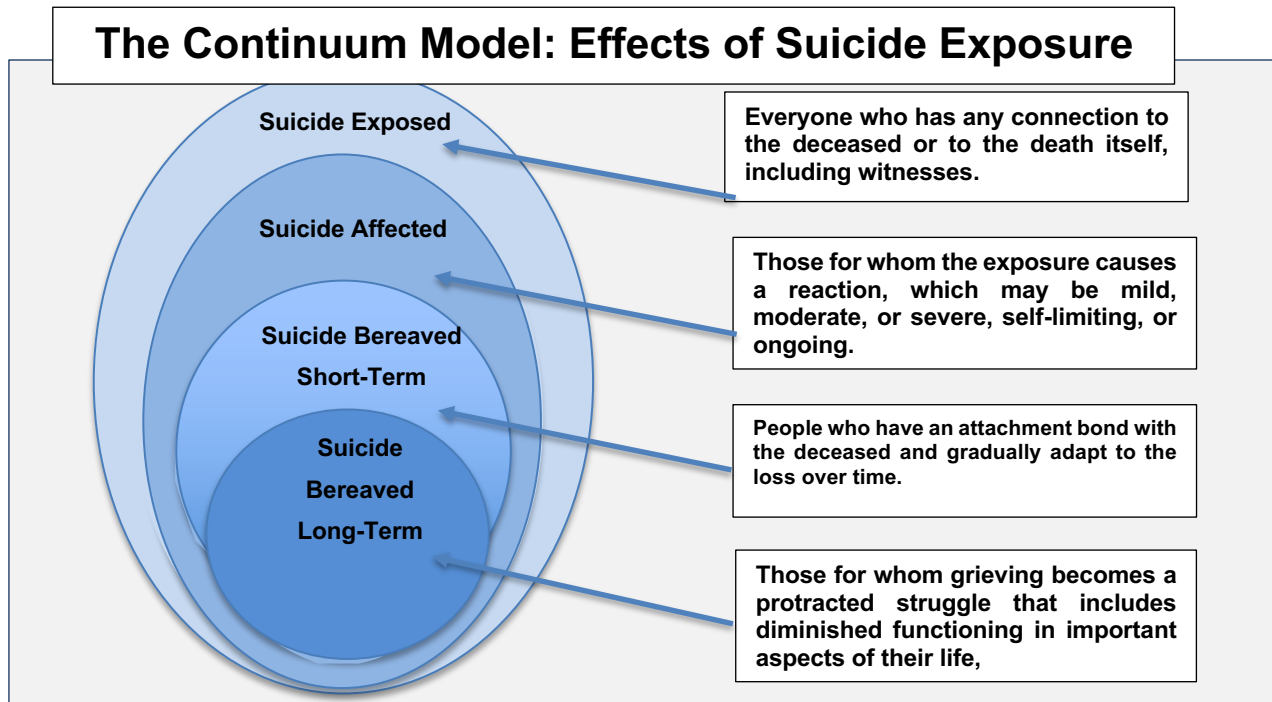
2. The Team holds debrief meetings daily for the duration of the incident's impact to outline the following steps, assign tasks, and support one another.

3. Next begin to mobilize support for those directly affected. If the survivors/witnesses agree to be contacted, reach out to them immediately to offer your condolences and to make sure they know the available support and services. If the survivors are not ready, offer support again in the future.



Supporting Loss Survivors

Grief after a suicide loss is complex, often including guilt and shame in those left behind. A suicide death is traumatic for those closest to the deceased and can have a devastating ripple effect on communities. The Continuum Model illustrates how a suicide exposure influences community.



Based on: Cereal, J. McIntosh, J.L., Neimeyer, R.A, Maple, M., & Marshal, D., (2014). The Continuum of Survivorship: Definitional Issues in the Aftermath of Suicide, Suicide, and Life-Threatening Behavior, 44, 591-600

Support for those affected by a suicide death must account for successive waves of impact. Information about support options should be offered several times during the weeks or even months following a death. In the immediate aftermath, survivors may be in shock or denial and typically are consumed by attending to the details of funeral arrangements, notifying others, and adjusting to the day-to-day reality of life without the deceased. They may not be ready to accept and act on support offers for some time. The Master Checklist, included in the Tools and Resource section, is valuable for tracking multiple episodes of outreach to loss survivors over time.

Working with Media

Research has consistently found that certain types of news coverage can increase the likelihood of suicide in vulnerable individuals. Graphic, sensationalized, or romanticized descriptions of suicide deaths can contribute to suicide contagion ("copycat" suicides), particularly among youth. In addition, coverage influences how the public perceives suicide and may reinforce myths or inhibit help-seeking behavior.

Many news outlets only report on suicides that occur in public places or of well-known individuals. Reach out to local news media to discuss their policies about how and when they report suicide. Create key talking points and provide those to all members of the Core Team and anyone else likely to encounter news media so that your messages are consistent with each other and follow best practices.

Engaging the Community

Community contribution is essential to any suicide prevention strategy. Communities can reduce risk and reinforce protective factors by providing social support to vulnerable individuals, engaging in follow-up care, raising awareness, fighting stigma, and supporting those bereaved by suicide. There are no hard and fast rules for when an expanded or more public response might be called for,

Community-wide responses might include holding a public meeting or forum to provide education or training about warning signs and how to help. The meeting might also provide a way to promote healing, discuss concerns or facilitate a community discussion around suicide and suicide prevention. Other community-wide responses include issuing a public statement or a public health alert; monitoring news and/or social media and responding to those as needed; disseminating materials and identifying and filling training needs.

PREVENTION

Postvention is integrally linked to prevention. Enhancing healing and supporting the community can help reduce distress and suicide risk among people who have been affected. Offering education—particularly the messages that help is available and how to find it—can reduce suicide risk. The Master Checklist is a tool to track actions taken during each incident. Reviewing the postvention plan using the Master Checklist informs prevention efforts. It also allows us to evaluate and assess the plan, suggesting how it might be modified and improved over time as personnel and circumstances change.

An integral part of the prevention effort is reviewing available data. Several types of data are helpful for prevention planning. Unfortunately, suicide death data is typically 2-3 years "behind" the current year, which includes nonfatal data such as suicide attempts and self-injuries. Reviewing data allows learning who is most at risk, where and how suicides occur locally, and what happens after death can inform your prevention strategy. This knowledge can sharpen the focus of outreach and education efforts to reach better at-risk people and their "natural helpers"—such as family, friends, and co-workers, who can recognize and intervene. It is crucial to fully understand the warning signs as they may mean someone is at risk of suicide. Risk is greater if a behavior is new or has recently increased in frequency or intensity and seems related to a painful event, loss, or change. Always know the warning signs below.

- Talking about wanting to die.
- Looking for ways to end one's life.
- Talking about feeling hopeless or having no reason to live.
- Talking about feeling trapped or in unbearable pain.
- Talking about being a burden to others.
- Increasing the use of alcohol or drugs.
- Acting anxious or agitated or behaving recklessly.
- Sleeping too little or too much.
- Withdrawing or feeling isolated.
- Showing rage or talking about seeking revenge.
- Displaying extreme mood swings.

If you are concerned about someone, take action. Please do not leave the person by themselves. Help is available. For more information, visit the Torrington Area Health District's website: [TAHD Suicide Prevention -TAHD](#)

If You are Feeling Suicidal or You are Concerned About Someone Who May Be Contemplating Suicide:

Inside Connecticut: Dial 2-1-1 (or 1-800-203-1234) to speak to a trained crisis worker. This line is open 24 hours a day, seven days a week.

Within the Rest of the United States: Call National Suicide Prevention Lifeline: at 1-800-273-8255 (800-273-TALK) to be connected to a certified crisis center near you. This line is open 24 hours a day, seven days a week.

TOOLS AND RESOURCES

Sample Confidentiality Agreement

**CONFIDENTIALITY STATEMENT FOR THE _____ SUICIDE
COMMUNITY RESPONSE CORE TEAM:**

The purpose of the Suicide Community Response Core Team is to provide immediate and ongoing support to those affected by a suicide death and ensure that accurate information is available only to agencies where necessary. In order to ensure a swift and coordinated response, the Core Team may have access to sensitive information, including autopsy reports, mental health records, hospital and or medical-related data. This information must be kept confidential as it may have a negative effect on supporting loss survivors, witnesses, first responders, and other affected community members.

With this purpose in mind, the undersigned, as a representative of _____, agree that all materials and information, whether oral or written, received by this Team shall remain confidential and shall not be used for any other purpose or be disclosed to any person or entity except as authorized by law.

PRINT NAME: _____

SIGNATURE: _____

DATE: _____

Sample Public Statement

The sample public statement can be customized as needed to maintain confidentiality and alert the community of what has happened.

If the cause of death has been **confirmed**, use the following statement:

Recently we learned the sad news that a [disclose only minimal details, e.g., a 45-year-old male] in our community has died. The cause of death was suicide.

Use the following opening statement if the cause of death is not yet confirmed, or if the family has asked that it not be disclosed, if a family cannot be located, do not disclose information:

Recently we learned of the tragic death of a [disclose only minimal details, e.g., a 45-year-old male] in our community. The cause of death has not yet been determined. Until the cause of death is known, we ask the community to refrain from spreading rumors as they may be inaccurate and could hurt the deceased's family and friends. We'll do our best to provide accurate information as it becomes available. Our thoughts and support go out to [their] family and friends at this difficult time.

Insert information about specific activities and events that are in place to offer support after the death. For example:

Agency] will be hosting a community meeting at [date/time/location]. Members of the Crisis Response Team [or mental health professionals] will be present to provide information about common reactions following a suicide and how we can help our community cope. They will also provide information about suicide and mental illness, including risk factors and warning signs of suicide, and will address attendees' questions and concerns. (In school cases) A meeting announcement has been sent to parents, who can contact school administrators or counselors at [number] or [e-mail address] for more information. Trained crisis counselors will be available to meet with community members [dates/locations/times when these services will begin] and will continue over the next few weeks as needed.

Response Master Checklist

A *Master Checklist* presents the steps described in this section in a format that can be modified and used by all members of your Core Team as you implement your plan. The Master Checklist may guide and document the steps taken, noting details and updating information over time.

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Instructions: Use a fresh copy of the checklist at each incident. Use the Notes column to record details, actions, and next steps.

TASK	ACTIONS	WHO?	Comments and Notes
1	<p>Establish, confirm, and document facts and circumstances. Ideally, determine:</p> <p>Name, age, gender, method, location of death or where a body was found, and contact information for loss survivors and witnesses. Also useful are: race/ethnicity, marital status, family information, employment, veteran/military status, health, and mental health history.</p>		
2	Designated Core Team members contact the other member (s) of the Core Team to share information and coordinate responses.		
3	Core Team holds daily debriefs for the duration of the incident's impact to outline the following steps, assign tasks, and support one another.		
4	Mobilize support to those directly affected.		
5	Verify that loss survivors and witnesses are provided cards, brochures, or information packets.		
6	<p>If applicable, talk to first responders (and law enforcement chaplains) to determine if loss survivors and witnesses agreed to be contacted and to learn any other information about survivor needs.</p> <p>If yes, reach out to loss survivors and witnesses to offer condolences and navigate support options.</p>		
7	Identify agencies or organizations that should be prepared to support those directly impacted. Provide guidance about responding to loss		

	survivor needs		
8	Two weeks or more after the death, and if not already contacted, reach out to survivors and/or witnesses to offer condolences and support (2nd opportunity to offer support).		
9	Be prepared to offer support for writing obituaries and planning memorial services.		
10	If a broader community response is planned within a year of the death, reach out to immediate survivors and/or witnesses to inform them of the plan. Explain the rationale and address concerns.		
11	Offer support to affected entities (businesses, schools, workplaces, etc.) about planning for anniversaries or other events potentially affecting survivors.		
12	Identify if some agencies or organizations should be notified and prepared to provide support. Contact other agencies and organizations as needed.		
13	Monitor news and social media activity and respond as needed via public communications. <ul style="list-style-type: none"> ● Engage others who already monitor or interface with news media (e.g., Public Information Officers and social media contacts) ● Promote support resources. 		
14	Reach out to first responders to receive any updated information, discuss the response level, and offer support to them.		
15	Respond to requests for information and guidance from general or professional community members.		

16	Assess and monitor contagion risk (factors include location, method, publicity, extent, and type of social network).		
17	Identify and implement broader community response options as needed.		
18	Core Team convenes suicide prevention coalition, First Responders, and any other key stakeholders to discuss, identify appropriate actions, and assign tasks.		
19	Advise and/or issue public statements. Offer guidance to any other entity that is planning to issue a statement. Identify outlets such as 988, news media, social media, etc., and determine who will provide the statement/alert to the outlet.		
20	Host and participate in a community forum or meeting		
21	Meet with groups of potentially affected individuals to provide education, healing, and support.		
22	Identify training needs or requests—note needs and requests, how these were fulfilled, or what will be done to fulfill them.		
23	Provide support for obituaries, services, and memorials.		

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