

Early grief and mourning

Shock

The death of someone close to you comes as a tremendous shock. When someone dies unexpectedly this shock is intensified and when someone takes their own life, or dies in a violent way, the shock can be particularly acute. Shock is common during the days and weeks immediately following a death. Some experience it more severely and for longer than others.

Numbness

Your mind only allows you to feel your loss slowly and following the death of someone you have been close to you may experience feelings of numbness. What has happened may seem unreal or dreamlike. The thought 'this can't really be happening' may recur. The numbness of early bereavement may itself be a source of distress and misunderstanding if one wonders, for example, why one cannot cry at the funeral. In fact, this numbness is only delaying emotional reactions and may be a help in getting through the practical arrangements. The 'protection' provided by shock gradually wears off and emotional pain begins.

Disbelief

It is natural to have difficulty believing what has happened. Where a death was untimely and sudden it is even harder to grasp that the loss is permanent and real. On one level it is possible to 'know' that a loved one has died. But on another, deeper level it may seem impossible to 'accept'. A large part of you will resist the knowledge that the person who has died is not going to be around any more. Confusion, panic and fear are common during this struggle between 'knowing' they have died and disbelief.

Searching

Numbness and shock tend to give way to an overwhelming sense of loss. Many bereaved people find themselves instinctively 'searching' for their loved one, even though they know that they are dead. This may involve calling their name, talking to their photographs, dreaming they are back or looking out for them amongst people in the street. This denial of a painful reality is a natural part of mourning. Realising that a death has really happened and is irreversible takes some time.

Denial is meeting your son on the street, seeing him from behind, the same shaped head, the identical droop of the shoulders, the swinging gait. Your leaping heart cries, "Oh, it's Mitch!". Some days, you'll walk into the house and 'feel' his presence in a room. You can 'see' that smile, 'hear' that laugh. A part of my denial was setting the table for him. Time and again, I'd set his place with all the others and then gasp with the realisation that he would never be coming home to dinner. 1.

Anguish and pining

The understanding that a loved one is really dead brings with it tremendous misery and sadness. As the loss begins to make itself felt, pining for the person who has died is common. Powerful and desperate longings – to see and touch them, to talk and be with them – may be felt. The intensity of emotions is often frightening and may leave the bereaved feeling devastated. Emotional pain is often accompanied by physical pain. It is common to go over and over what has happened, replaying things in your head or talking them through. The need to talk about a loved one, following their death, is part of the natural struggle to counteract their loss.

Physical and emotional stress

Losing someone close to you is a major source of stress. This stress may show itself in both physical and mental ways. Restlessness, sleeplessness and fatigue are common. You may also have bad dreams. Loss of memory and concentration are common. You may experience dizziness, palpitations, shakes, difficulty breathing, choking in the throat and chest. Intense emotional pain may be accompanied by physical pain. Sadness may feel like a pain within. Muscular tension may lead to headaches, neck and backaches. Loss of appetite, nausea and diarrhoea are also common and women's menstruation may be upset. Sexual interest may also be affected. The physical effects of shock usually pass with time.

The most common phrase heard from the newly bereaved is, "I feel like I'm going crazy". The pain and the accompanying emotions are so intense that it doesn't seem possible that a normal human being can experience them and still live. You may believe that you are going insane or at least on the verge of it but you are not. You are experiencing the normal physical and psychological reactions to deep loss. 2

1. **My Son, My Son. A guide to healing after death, loss or suicide.** Iris Bolton (1987). Atlanta: Bolton Press.
2. **The grief of the newly bereaved.** Margaret Gerner (1991). The Compassionate Friends Newsletter, summer edition..

Emotions during bereavement

Anger

Anger is a natural and common response to loss. It is rare to experience no anger during bereavement and, for some people, feelings of rage can be very intense. The protest 'Why me?' reflects a general sense of helplessness at the unfairness of life, as does anger at others for carrying on their lives as if nothing has happened. Anger may also have a more specific focus. Intense feelings of blame may be directed towards other people – relatives, friends, doctors – who did not seem to help the person enough before their death. It is common to feel anger at oneself for 'failing' to prevent their death, blaming oneself for not doing more. Feelings of anger towards the person who has died are often particularly distressing and confusing. The bereaved may feel abandoned by them. Feelings of anger are at their most intense shortly after a death and tend to grow less with time.

One woman said after her son's death that she felt great anger at him for what he had done to her, her sister, her mother and family. She had often felt overwhelmed with murderous rage, rage at the world, at life, that it could be so unfair sometimes, and finally rage at her friends who she once loved and cared for...that they could not be there for her.

Guilt

Guilt or self-blame is also common during grief. Guilt may be felt about the death itself. It is extremely painful to accept that we were not able to prevent the death of a loved one or protect them. Feelings of responsibility are common and bereaved people often judge themselves harshly under these circumstances. Our relationships before the death are another common source of remorse. Sudden death interrupts close relationships without warning. Since our lives are not usually conducted as if every day might be our last, we assume there will always be the future to sort out tensions and arguments or to say the things that have been left unsaid. Regrets often take the form of 'If only's': 'If only I had done this' or 'If only I hadn't said that'. Guilt may also be aroused by what one feels or does not feel during bereavement (e.g. anger towards a dead person, inability to cry or show grief openly). Occasionally a death may bring with it a sense of relief for those left behind, particularly if there had been a lot of unhappiness and suffering for everyone beforehand. This feeling may also cause intense guilt. Lastly, guilt may be felt for surviving – for being alive when they are dead.

Another woman described her terrible feelings of guilt following her brother's death. Not one day had passed that she hadn't asked herself 'Why?'. Not one day had passed that she hadn't experienced the guilt, tidal waves of guilt that just seem to drag her under deeper and deeper. She agonised over whether they as a family could have done something that might have turned him around, that might have made him want to stay with them. Why she wondered did they say all those terrible things to each other while they were growing up? Or worse, why didn't she say all the things to him that she now wished she could?.

Despair

Feelings of despair are common during bereavement, once it is realised that despite all the pining and longing, a loved one will not be coming back. Relationships often suffer because despair is draining and saps interest in others. The bereaved may be left feeling both powerless and hopeless. Life may no longer seem to make sense or have meaning. Feelings of 'not giving a damn' about anything or anyone are common, as is indifference as to what happens to you. In the aftermath of a death suicidal feelings are not uncommon.

Fear

Fear is common in grief. Violent and confusing emotions, panic and nightmares may make grief a frightening experience. You may fear a similar event happening again. You may fear for yourself and those you love. You may fear 'losing control' or 'breaking down'.

No-one ever told me that grief felt so like fear. C. S. Lewis 1

Grief and depression

The feelings of the newly bereaved have a lot in common with those of people suffering from depression. Like depression, grief can bring profound sadness and despair. Feelings of unreality are common. It may be hard to see a way forward. Grief interferes with sleep, concentration and appetite. For a bereaved person, these feelings are part of a natural response to a terrible loss. People who have been bereaved are likely to be more prone to sadness and depression for a number of years. For some, these feelings may be particularly severe and prolonged. When grief gives way to a longer lasting depression, further help may be needed.

1. **A Grief Observed.** C. S. Lewis (1961). London: Faber and Faber.

Bereavement through suicide

The loss of someone you have been close to from any cause brings about intense grief and mourning. But the responses and emotions experienced by the bereaved following a suicide often differ from those felt after other types of death. The fact that a loved one's death appeared to involve an element of choice raises painful questions which deaths from natural or accidental causes do not. Bereavement by suicide is prolonged. Research suggests that the shock, social isolation and guilt are often greater than for other causes of death. The grieving process is characterised by agonising questioning and a search for some explanation for what has happened. Some people bereaved in this way feel a strong sense of abandonment and rejection. Whilst some of the special aspects of bereavement by suicide are described below, not all will be relevant to your own experience of grief.

Intense shock

The sense of shock and disbelief following a death of this kind may be very intense. A common and disturbing aspect of grief after suicide is recurring images of the death, even if this was not witnessed. The finding of the body may be another traumatic and indelible event. Going over and over the very frightening and painful images of the death, and the feelings these create, is a natural need at such a time.

Why?

Most newly bereaved people will ask 'why?'. However bereavement through suicide often involves a prolonged search for a reason or explanation for the tragedy. Many people bereaved by suicide eventually come to accept that they will never really know the reason why a loved one did what they did. During this search for explanations, different members of the same family may have very different ideas as to why a death happened. This may strain family relationships, particularly where an element of blame is involved.

Could it have been prevented?

It is common to go over and over how the death might have been prevented. Reliving what might have been done to save a loved one from suicide is a common experience of the bereaved. Everything can seem painfully obvious in retrospect. The 'what ifs' may seem endless: 'what if I had picked up on that warning comment or sign? What if I had not been away that weekend?'. Rewinding events, in one's mind or conversation, is a natural and necessary way of coping with what has happened. Research suggests those who have lost someone through suicide tend to suffer greater guilt, self-blame and self-questioning during bereavement than those who have been bereaved in some other way. While this is certainly not true for everyone, for some bereaved people feelings of guilt may be very difficult.

Rejection and abandonment

Those bereaved by suicide may experience a sense of rejection. It is common to feel abandoned by someone who 'chose' to die. As one sister whose brother took his life recalled: "I was upset that he hadn't come to talk to us. I think we all went through anger at some point. You think : 'How could you do this to us?' ".

Suicidal fears and feelings

Despair is a natural part of the grieving process, but after the suicide of a loved one hopelessness may be combined with fear for one's own safety. Identification with someone who has taken their life can be deeply threatening to one's own sense of security. Those bereaved through suicide may suffer more anxiety than those bereaved in other ways and be more vulnerable to suicidal feelings of their own. The bereaved need extra reassurance after a suicide, which may also have been preceded by mental health problems.

Although I had never in my life contemplated suicide, one of my biggest fears after Ros's death was that I'd kill myself too. Only a few weeks after Ros died a colleague at work also hanged himself. That made things even worse. The world began to feel very unsafe. Two people in two months? I remember lying in bed after John's suicide looking at the curtain rail and thinking it would be quite easy to copy them. Ros died when she was thirty-six and I heaved a sigh of relief when I reached my thirty-seventh birthday and found I was still alive. These feelings have almost completely disappeared now but at the time I kept them to myself, and there was no one to tell me that this is a common reaction to suicide.¹

Media Attention

For most bereaved people grief is a private matter. However when a loved one has died through suicide or other unexpected causes, it may attract public interest. The inquest that is demanded by law draws attention to the person who has died and to their close relatives and friends. The death and its circumstances may be reported by the media. Attention of this kind can be very stressful for bereaved relatives and friends, particularly where a death is reported in an insensitive or inaccurate manner.

Stigma and isolation

A mother writing about her son's death pointed out that we've never been told what to say to someone who has had a suicide in the family. What she needed to hear was the same thing that might be said to anyone else who had experienced the death of someone close – "I'm truly sorry for your pain, and is there anything I can do? If you need to talk about it I'm a good listener. I've got a good shoulder to cry on." And she needed to know it was really meant. Everyone, she said, believes no one wants to talk about suicide, that it's best left undiscussed, that if you don't talk about it, it will be forgotten and will go away. For her nothing could be further from the truth.

Although social attitudes to suicide are changing, they may still limit the support that is available to the bereaved. The silence of others may reinforce feelings of stigma, shame and 'being different'. If others are embarrassed, uneasy and evasive about the way in which a loved one died, the bereaved may be left feeling intensely isolated. Opportunities to talk, remember and celebrate all aspects of a loved one's life and personality may be denied. A strong need to protect a loved one, and oneself, from the judgement of others may also be felt following suicide.

Needs of those bereaved through suicide

When a group of Canadian people bereaved by suicide were consulted about their needs, they felt they needed help and support to:

- get the suicide in perspective
- deal with family problems caused by the suicide
- feel better about themselves
- talk about the suicide
- obtain factual information about suicide and its effects
- have a safe place to express their feelings
- understand and deal with other people's reactions to suicide
- get advice on practical/social concerns. 2

1. **A Special Scar: The Experiences of People Bereaved by Suicide.** Alison Wertheimer (1991). London: Routledge.

2. **Rogers, J., Sheldon, A., Barwick, C., et al** (1982) Help for families of suicide: survivors' support program. *Canadian Journal of Psychiatry*, 27, 444–449.

Sources of support during bereavement

Each person's story will be different, and help must be offered in ways which recognise and support the uniqueness of each person's grieving.¹

Not all those bereaved by suicide will want to seek support outside their close family and social network. Family and friends may provide all the support that is needed or a neighbour, teacher, priest or minister may step into a supportive role, listening and 'being there' whenever needed. But for others the death of a loved one will mean there is less support around. At a time when relatives and friends become absorbed in their own grief, usual sources of comfort and support may be diminished. For many the stress and trauma of grief means that additional help is needed. A range of professionals and non-professionals provide help for the bereaved. Possible sources of support are described below.

Bereavement organisations

Bereavement organisations offer support for the bereaved in the UK, both nationally and locally. Cruse provides help to the bereaved through its local branches, which offer individual counselling, social meetings and practical advice. This organisation publishes a newsletter for members and has an extensive list of books and leaflets (see *Reading List*). The Compassionate Friends is a self-help charity for parents who have suffered the loss of a child. Through local meetings and contacts it puts bereaved parents in touch with others in their area and promotes mutual support. As well as literature on bereavement, The Compassionate Friends publish newsletters for bereaved parents and one for siblings. Other bereavement services may well exist in your area. The National Association of Bereavement Services will help you find them. Details of all these organisations are included in the *Useful Contacts* section.

Self-help groups for the bereaved

Self-help groups for people bereaved through suicide provide the chance to meet and talk with others who have suffered a similar loss. This may be consoling in itself, given the feelings of those bereaved in this way that they are 'different'. Sharing feelings and experiences with others through group meetings can provide valuable reassurance. Unfortunately the existence of such groups is not widespread in the UK. Some local suicide bereavement groups do exist (see *Useful Contacts* section). The charity for bereaved parents, The Compassionate Friends, has a network for parents who have lost a child through Suicide called Shadow of Suicide (SOS). Courses run by Cruse also bring together people with similar experiences.

General practitioners

Your general practitioner may be able to help you in a number of ways during bereavement: (i) by listening, talking and offering emotional support, (ii) by helping you with problems such as sleeplessness, anxiety or depression, prescribing drugs if necessary, (iii) by advising you on other sources of help and referring you to others e.g. counsellor, bereavement organisation, psychiatrist. Some GPs working in large group practices have counsellors at their surgeries.

The degree of emotional support offered by GPs during bereavement will vary from doctor to doctor. Some are more at ease talking about emotional issues with their patients than others. The bereaved tend to visit their doctor more often than usual in the months following a death. However, during a short appointment, it may not always be easy to start talking about all that has happened. One way around this may be to write to your doctor before your appointment, telling him or her of your loss and explaining a little of how you are feeling. Those bereaved through suicide report mixed responses from their GPs. The prescribing of drugs during bereavement, for sleeplessness, anxiety or depression, is a particularly sensitive issue. Some people struggling with loss feel strongly that there are 'no pills for grief'. Others are relieved by medication which helps them to sleep or feel calmer. What seems clear is that the prescribing of pills should never be a 'substitute' for emotional support.

Counselling

If you wish for more time to talk things through, or longer term support, a counsellor may be able to help you. Counselling provides an opportunity to talk, in confidence, to someone experienced in listening to people in distress, who will not be shocked by your emotions. It may be a relief to talk to someone who is a stranger and who can provide a safe environment in which you may vent and explore your feelings. Counselling needs to be distinguished from the kind of talking therapy that lasts for a long time and looks at the roots of present difficulties in past experiences (psychotherapy or psychoanalysis). Counselling will not force you to delve into the past. Instead it offers help with the emotional crisis and life changes you may currently be facing.

Church and religion

If you hold religious beliefs these may be a source of strength and support as you try to cope with your loss. Many people bereaved by suicide and other types of death find their local religious leader an invaluable source of help and often one through which they can obtain counselling as well as support. This source of support is usually open to everyone, not just people who have been religious throughout their lives.

The Samaritans

The Samaritans provide a national 24 hour confidential telephone service. They offer befriending and a listening ear to anyone who is feeling desperate or suicidal or is going through any sort of personal crisis including bereavement. They are available at all hours, every day of the year. The Samaritans have over 200 branches around the UK and during the day it is also possible to visit these branches to talk to someone in person. Your local branch of The Samaritans will be listed on the Emergency pages and under 'S' in the local telephone directory.

When is it time to get help?

Grief is painful and exhausting. It is not always easy to decide at what point it would be helpful to receive some outside support. Some reasons you might decide to seek extra help during bereavement are when you:

- continue to feel numb and empty some months after the death
- cannot sleep or suffer nightmares
- feel you cannot handle intense feelings or physical sensations such as exhaustion, confusion, anxiety or panic, chronic tension
- feel overwhelmed by the thoughts and feelings brought about by a loved one's death e.g. guilt, anger, rejection
- have no-one with whom to share your grief and feel the need to do so
- keep constantly active in order not to feel (e.g. working all the time)
- find you have been drinking or taking drugs to excess
- find you are worrying and thinking about suicide yourself
- feel afraid that those around you are vulnerable and not coping.

Use of alcohol and drugs

Some people bereaved by suicide or another form of death use harmful amounts of alcohol or take illicit drugs to relieve their feelings of sadness. While these may provide short term relief from painful feelings, they hinder the process of grieving and can themselves cause depression. They can also have other negative consequences for health. If you find yourself using alcohol or drugs in this way you are strongly encouraged to seek help. In the first instance it will usually be best to approach your GP. If the use of alcohol really gets out of hand you might consider approaching Alcoholics Anonymous for help. If one of your relatives gets into such difficulty Al-Anon is a very helpful source of advice and support.

A personal tragedy of this kind inevitably involves tremendous suffering for you and those close to you. Do remember that help is available if you feel this suffering is becoming too much for you to bear alone

The future

The length of time people take to mourn the loss of someone they have been close to varies very much from person to person. Some things such as sadness at the death and missing the lost person will probably never go away completely but the pain gets much less with time. An important part of the process of rebuilding life again seems to be accepting that the death really has happened and the person is not coming back. This can take a long time but helps people to get some of their very difficult feelings, such as anger and guilt, into perspective. Gradually the things which were good about the person when they were alive can start to be important, as well as their death. Many people find that although life is never the same again there does come a time when they can pick up the threads of their own lives and begin to enjoy living again. Although the loss of a friend or relative through suicide is always a terrible tragedy, some people find that they have been changed in positive ways by the experience. They may appreciate life more and be more attentive to others' feelings. Small reminders and memories can bring all the feelings of grief flooding back; anniversaries and birthdays can be particularly difficult times. When things seem very bleak it is important to live from day-to-day but remember that things will change in the future and that help is available if needed.

*I had thought that your death
Was a waste and a destruction,
A pain of grief hardly to be endured.
I am only beginning to learn
That your life was a gift and a growing
And a loving left with me.
The desperation of death
Destroyed the existence of love,
But the fact of death
Cannot destroy what has been given.
I am learning to look at your life again
Instead of your death and your departing.*

Marjorie Pizer 1

1. **To You the Living, Poems of Bereavement and Loss.** Marjorie Pizer (1981). Sydney: Pinchgut Press.

Further reading

Your local bookshop or library should be able to help you obtain many of the books listed below. They may also be obtained from the major bereavement charities (see *Contact List*). Cruse and The Compassionate Friends (TCF) have publications lists available and sell articles and books through mail order. The Compassionate Friends charity for bereaved parents runs a postal lending library for members. Its Library List covers a range of books under titles such as *Books for the Newly Bereaved*, *Suicide*, *Books for Children* and *About Children's Grief* (under 5s through to 16+).

Key to availability :

* These publications may be purchased by mail order through Cruse

† Copies of these books are in the Compassionate Friends Library

General

The Early Days of Grieving. Derek Nuttall (1991). Beaconsfield: Beaconsfield Publishers. ISBN 0 906 584 299

Offers simple and direct support, explanation and information for the bereaved.*†

Healing Grief: A Guide to Loss and Recovery. Barbara Ward (1995). London: Hutchinson. ISBN 0 091 778 395

A self-help approach to loss, grieving and bereavement. A clear and compassionate book to help bereaved people work through their grief.*

Through Grief: The Bereavement Journey. Elizabeth Collick (1986). London: Darton, Longman and Todd. ISBN 0 232 516 820

A book about grief and recovery.*

Facing Grief: Bereavement and the Young Adult. Susan Wallbank (1991). Cambridge: Lutterworth Press. ISBN 0 718 828 070

Written for those aged 18–28 this book deals with specific losses, such as parent, brother, partner, friend.*

When Parents Die. Rebecca Abrams (1995). London: Harper Collins. ISBN 0 722 531 311

A book for young people grieving for a parent. The author offers support based on her personal experience and that of other bereaved young people.*†

So I Will Comfort You. Jenny Kander (1990). Leominster: Gracewing. ISBN 0 852 441 991

Practical help for those bereaved by the death of a child of any age.*†

The Bereaved Parent. Harriet Sarnoff Schiff (1979). London: Souvenir Press. ISBN 0 285 648 918†

Beyond Grief: A Guide for Recovering from the Death of a Loved One. Carol Staudacher (1988). London: Souvenir Press. ISBN 0 285 650 696

An overview of grief with a close look at specific situations including the death of a spouse, parent, child and bereavement by suicide. Suggests ways of helping oneself and others.*†

Bereavement through suicide

A Special Scar: The Experiences of People Bereaved By Suicide. Alison Wertheimer (1991). London: Routledge. ISBN 0 415 017 637

A Special Scar looks in detail at the experiences of people bereaved through suicide and offers practical suggestions for those trying to cope with such a loss. Alison Wertheimer's book draws on interviews with fifty people bereaved through suicide. The author lost her own sister through suicide.*†

Coping With Suicide. Donald Scott (1989). London: Sheldon Press. ISBN 0 859 695 859†

After Suicide: Help for the Bereaved. Dr Sheila Clark (1995). Melbourne: Hill of Content. ISBN 0 855 722 622

Personal accounts of loss through suicide

Dear Stephen. A letter diary written to Stephen by his mother. Anne Downey (1987). London: Arthur James. ISBN 0 853 052 816†

My Son, My Son. A guide to healing after death, loss or suicide. Iris Bolton (1987). Atlanta: The Bolton Press. Privately published USA – available from The Bolton Press, 1325 Belmore Way, NE, Atlanta, GA 30350, USA.†

Everything to Live For. Susan White-Bowden (1985). New York: Simon and Shuster. ISBN 0 671 635 875†

She Never Said Goodbye: One man's journey through loss. Robert Dykstra (1990). Crowborough: Highland Books. ISBN 0 946 616 68 X†

Leaflets and short publications (all available through Cruse)

After the death of someone very close. Caroline Morcom.

Coming through. Susan Le Poidevin. Understanding and ideas for selfhelp.

Coping with a major personal crisis. A leaflet for those affected by disaster, violent or sudden loss.

Living alone. Practical advice for those adjusting to living alone.

State benefits for widows. Cruse factsheet.

Where to go for what locally. Cruse factsheet on the statutory and voluntary help likely to be available in your area.

Early days in widowhood. Margaret Torrie. Practical advice and positive approach.

The first year. A young widow talks realistically about the first year of bereavement.

Household guide for widowers. Susan Wallbank. Practical tips for men faced with running a home.

If you have children – some practical advice to widowers. Susan Wallbank.

My father died / My mother died. Susan Wallback. Guides for teenagers who have lost a parent.

A range of leaflets for bereaved parents are also available from The Compassionate Friends. These consider different aspects of grief following the loss of a child, as well as bereavement through particular causes, including suicide.

Bereavement Newsletters

Cruse Chronicle. A newsletter for members of Cruse, a national bereavement charity for all bereaved people (available from Cruse, Cruse House, 126 Sheen Road, Richmond, Surrey TW9 1UR).

The Compassionate Friends Newsletter. A quarterly newsletter written by and for bereaved parents, including letters and articles on bereavement (available from TCF, 53 North Street, Bristol BS3 1EN).

Support In Bereavement for Brothers and Sisters (SIBBS). A quarterly newsletter written by and for siblings bereaved during adolescence and early adulthood, including letters and articles on bereavement (available from TCF, 53 North Street, Bristol BS3 1EN).

Useful contacts

Age Concern

<http://www.ace.org.uk/>
Central Office
1268 London Road
London SW16 4ER
0800 00 99 66

See phone directory for local branches

Age Concern can provide information on practical help for the older bereaved person. Some local branch offices offer bereavement support, others can help callers contact local bereavement services.

The Compassionate Friends - Shadow of Suicide Group (SOS)

<http://www.tcf.org.uk/>
53 North Street
Bristol BS3 1EN
08451 23 23 04 (helpline)
0117 966 5202 (administration)

The Compassionate Friends is a self-help organisation for parents whose child of any age has died of any cause. Local groups offer contact with other parents bereaved through suicide. The Shadow of Suicide (SOS) group can put parents in touch with other parents who have lost children through suicide. It offers a quarterly newsletter for bereaved parents, as well as an extensive range of leaflets and a postal lending library.

Cruse Bereavement Care

<http://www.crusebereavementcare.org.uk/>
Cruse House
126 Sheen Road
Richmond
Surrey TW9 1UR
020 8332 7227 (bereavement line)
020 8940 4818 (administration)

See phone directory for local branches

Cruse is a national organisation which offers help to all bereaved people. It has 160 local branches, offering counselling, support and advice.

London Bereavement Network

<http://www.bereavement.org.uk/>
Address: c/o 61 Philpot Street, E1 2JH Tel: 0207 247 1209 Fax: 0207 247 1209
info@bereavement.org.uk

The organisation can refer individuals to their nearest bereavement support service.

National Association for Mental Health (Mind)

<http://www.mind.org.uk/>
Granta House
15-19 Broadway
Stratford
London E15 4BQ
020 8522 1728 (calling within London)
0345 660163 (calling outside London)

Produces literature regarding bereavement and has a telephone information line.

National Association of Bereavement Services

20 Norton Folgate
London E1 6DB
020 7247 1080 (referral line)

The organisation can refer individuals to their nearest bereavement support service.

National Association of Widows

54-57 Allison Street
Digbeth
Birmingham B5 5TH
0121 643 8348

See phone directory for local branches

Offers telephone support and advice and may be able to put widows in contact with people in a similar situation in their area.

Samaritans

<http://www.samaritans.org/>
P.O. Box 90 90, Stirling, FK8 2SA
08457 909090 (national helpline)
See phone directory for local branches

Samaritans offer 24 hour telephone support to anyone who is feeling lonely or suicidal, or who is going through a crisis such as bereavement. The service is confidential. Samaritans also offer face-to-face befriending during the day at their local branches.

Support in Bereavement for Brothers and Sisters (SIBBS)

<http://www.tcf.org/>
The Compassionate Friends
53 North Street
Bristol BS3 1EN
08451 23 23 04 (helpline)
0117 966 5202 (administration)

Offers telephone support, advice, and workshops for bereaved siblings, as well as a quarterly newsletter and contact network.

SOBS - Survivors of Bereavement by Suicide

<http://sobs.admin.care4free.net/>
Volsolve House
14-18 West Bar House
Sheffield, S1 2DA
Tel 0114 272 5955
Email: sobs.admin@care4free.net

SOBS is a self-help voluntary organisation which promotes the needs of survivors of a suicide bereavement by group meetings, public awareness, and training programmes for professionals and volunteers. They aim to support those bereaved by suicide through telephone contact, home visits, group sessions, one-to-one prior to a group session, and through a bereavement pack.

The Terrence Higgins Trust

<http://www.tht.org.uk/>
52-54 Grays Inn Road
London
WC1X 8JU
020 7831 0330 (administration and advice centre)
0845 1221 200 (helpline)
020 7405 2381 (legal line)

Provides practical support, help, counselling and advice for anyone who has lost someone due to AIDS.