

Support for Fire and Rescue Personnel and Their Families After Suicide



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Suicide Prevention Guidance



Suicide Postvention Guidance





Fire Fighters Charity

- Founded in 1943
- Funding through voluntary income streams and some trading activity
- Health and wellbeing support to the Fire and Rescue Service Community
- Digital, residential and community-based services
- Reactive and proactive support
- Person centred support – tailored to meet individual need
- Beneficiary base circa 300,000

Health and Wellbeing within the Fire & Rescue Service (FRS)

2023 Research Project – Key Findings

- Mental wellbeing was improved by work engagement, social support, resilient coping, and by both job and life satisfaction.
- Mental wellbeing is negatively impacted by occupational stress, burnout, anxiety, depression, and stress.
- Alcohol consumption was associated to low work engagement.
- Exercise was positively associated to work engagement, job satisfaction, perceived social support, life satisfaction, and resilient coping. It was also associated to lower levels of burnout, anxiety, stress, and depression.
- Increased length of career was associated to experiencing more mental wellbeing challenges
- Increased sleep disruption was associated to poorer mental wellbeing.
- There is a strong bias towards operational staff and traumatic stressors in FRS-specific literature, with strong gaps surrounding the non-operational roles.
- Reciprocal relationship between general life stressors and work stressors; increase in one makes the other more difficult to cope with.
- There is a need for a wide range of support offerings, particularly focused on prevention and health promotion, to address the different needs of all FRS staff.



PREVALENCE OF SUICIDE IN THE FRS COMMUNITY

- Increase in the number of people seeking psychological support from the Charity
- Increasing complexity of need
- Notification to the Charity of deaths by suicide
- Office for National Statistics data
- Norfolk cluster / FRS Independent Reports
- FRS personnel exposure to suicide / suicidal behaviour



Experience or exposure to suicide by the Fire and Rescue Services

There are 53 Fire and Rescue Services (FRS) in the UK, each with different organisational structures, cultures, systems, responsibilities, and experiences.

- People who work in the FRS, especially front-line and call centre staff, will experience high exposure to suicidal behaviour, with over 3000 incidents a year attended related to suicidality (Home Office, 2024).
- There is a general recognition of the impact of exposure and witnessing suicide on personal and professional life, mental health, and emotional distress (Lyra et al., 2021) and emerging evidence that appropriate response and support can prevent adverse outcomes (Abbate et al, 2022; Slade et al., 2019).
- A need for differential postvention guidance for those bereaved by suicide from those who may have experienced the traumatic death or suicidal behaviour of an unknown person.



Fire Fighters Charity Commissioned Suicide Prevention and Postvention

NTU team

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The Fire Fighters Charity commissioned NTU to develop good practice guidance on suicide prevention and postvention [response after a suicide] for their beneficiaries.

- First, we completed a literature and evidence review on good practice in suicide prevention and postvention – with a reflection on the experience of the Fire and Rescue Services.
- We aimed to develop good and practical guidance – available online - for a range of audiences to support and inform work on suicide prevention and postvention





Suicide prevention and postvention guidance: Our approach to development

Collaborative approach: Steering group membership across NTU and the Fire Fighters Charity

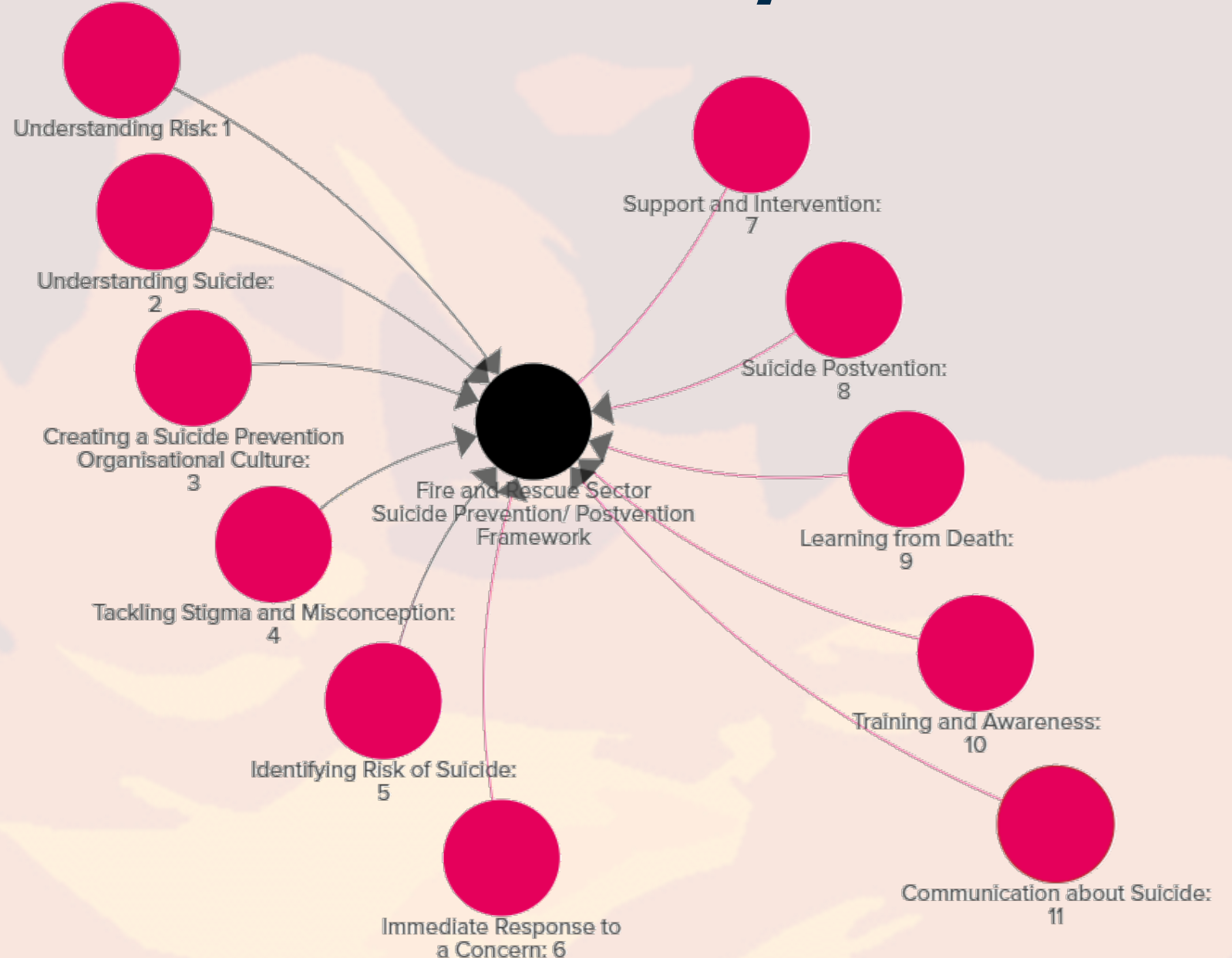
Advisory Group: Academic and practice expertise reviewing all stages of the project

Evidence review: Over 400 pieces of literature cited (more reviewed) in the full report capturing both research and current good practice around suicide prevention, postvention and the experience of the fire and rescue services

Stakeholder engagement: Workshops with strategic, operational and therapeutic lead and feedback sessions with people with lived experience

The research & practice review we conducted concluded that these 11 elements are key to good practice

11 key elements





The culture of the FRS



- A notable challenge in developing evidence-based guidance is that in contrast to fire personnel in other countries, e.g. USA, there is limited research on suicide or exposure to suicide among UK FRS personnel (ONS, 2022; Aldrich & Cerel, 2022; Brunsden et al., 2012).
- The organisational culture has been described as closed and tight-knit, with members of the FRS tending to form close bonds with their colleagues (Hawker et al., 2011; Hill & Brunsden, 2003; Hill & Brunsden, 2009; Brunsden, 2012).
- However, within any hierarchical and predominately male organisation, a culture that perpetuates the firefighter ‘rescuer’ identity can happen. This culture, in principle, values emotional resilience and control but would not encourage emotional vulnerability and help-seeking (Brunsden and Hill, 2009; Brunsden et al., 2012).

Appeal to
Camaraderie

Real examples
& reflect
context

Language –
conversational and
‘their words’

Stepping stones
to action



Suicide prevention and postvention: Resources

Available resources

- A series of webpages with detailed step-by-step guidance, including four films or animations covering a range of scenarios.
- Managers Guide (including people professionals)
- Senior Leaders guide in the event of a suicide [postvention]

We will now briefly take you through those resources

keep someone **safe**

right support

Suicide prevention

Suicide can affect anyone, and anyone might have thoughts about taking their own life. This means it can appear unpredictable and difficult to understand - it isn't caused by any one thing, and there's no 'one size fits all' approach to prevention. But there are things you can do to help.



HAVING THOUGHTS OF SUICIDE?



Fire Fighters Charity Crisis Line

Call our Crisis Line on...

0300 373 0896

24/7 support - confidential and independent
www.firefighterscharity.org.uk/crisis

Open 24 hours a day, seven days a week. Immediate and ongoing suicide and mental health crisis care for past and present UK fire services personnel.

[CALL NOW](#)



Everyone can help to prevent suicide

Many people will have been affected by suicide. This may be through knowing someone who has died by suicide or had thoughts about it, having thoughts about it themselves, or having experiences through work. This guidance will help you to know what to look for and how to respond to help prevent suicide. Remember: **Everyone can help to prevent suicide.**

Have a look at the questions and answers below to see what you can do...

<https://www.firefighterscharity.org.uk/how-we-can-help/suicide-prevention>



Next steps

If you've seen something that concerns you, or if you're worried about yourself or someone else, please click one of these tiles for more detailed guidance:

**I'm concerned
about myself**

**I'm concerned
about someone else**

**I'm a child
concerned about
someone else**

**I'm a child
concerned about
myself**

Managers' Guides

We also have a guide for workplace managers and people professionals. Click the tile below to read more.

**Managers'
Guide**

**Senior Leaders'
Guide**



Postvention after a suicide

What is postvention?

Suicide postvention refers to actions taken after a suspected death by suicide to support people who've been affected and to help prevent further deaths by suicide.

In the workplace, its aims are:

- To provide appropriate information about the death of a colleague and avoid misinformation or rumours.
- To offer support to employees who are bereaved by suicide and help them deal with grief and any difficult emotions and trauma they may experience.
- To address the stigma that is associated with a death by suicide.
- To stabilise the environment, restore some semblance of order and routine and support employees to return to a state of normality.



Postvention: Responding after a suspected suicide

Suicide postvention refers to actions taken after a suspected death by suicide to support people who've been affected and to help prevent further deaths by suicide.



After a suspected suicide, it's important that we consider specific actions and support. This is because suicide can be associated with stigmas and emotions that complicate the process of grieving and coping, and it can be difficult for people who've been affected to know how best to respond. A single death can impact up to 135 people, and good postvention can reduce the negative effects for everyone.

Although suicide postvention typically refers to the actions taken after a death by suicide, some of the advice on this page can be used in the event of an attempted suicide.

Click to expand the headings below for more information about postvention.

- ▶ What are the effects of suicide?
- ▶ What does postvention involve?
- ▶ What's an inquest, and how can people be supported?

Gordon and John's story



Further guidance

We understand that people's experiences will vary hugely, and there's no one way to grieve or cope. We have further guidance available to help you understand more about what you can do and the range of possible support options. Please click on an appropriate tile to find out more:

I've lost someone I
knew to suicide

I've experienced or
witnessed the
death of someone I
did not know

I need to talk
to a child
about suicide

I'm a manager or people
professional wanting
further details about
suicide postvention in
the workplace

Witnessing or being present at a suicide

Some people, in the course of their lives or job roles, may encounter suicide in action – known as witnessing a suicide. This might involve being present during the suicide, being the first person on the scene after it's happened, or taking a call from someone who's about to attempt suicide.



Witnessing a suicide might involve being present during the suicide, being the first person on the scene after it's happened, or taking a call from someone who's about to attempt suicide.

While anyone could potentially witness suicide, firefighters are more likely than others. These experiences can be traumatic and profound, even if you don't know the person who attempted or died by suicide.

What to do after an experience: postvention

As outlined on the [postvention page](#), there are many things that can help after any experience of suicide, and we recommend reading this guidance. There's also an excellent guide to understanding the experience of the suicide of someone you don't know, including practical advice, available [here](#).

Witnessing suicide as a trauma event

Trauma is the result of experiencing a stressful, frightening or distressing event, such as witnessing a suicide. When we experience trauma, our brains try to process what's happened, and this can lead to physical and emotional changes. People respond to a suicide in many different ways, and there's no 'right' way to react. Feelings you might experience include:

- Raised blood pressure
 - Increased heart rate
 - Increased sweating
- These physical changes can reflect your body's attempt to respond to the trauma through fight, flight or freeze processes.
- Numbness
 - Dissociation
- These can reflect your brain trying to detach from what's happened.
- Crying
 - Nausea
 - Trembling
 - Sleep problems
 - Changes to appetite
 - Flashbacks
 - Avoiding similar situations
- These are physical indications of the range of emotions you're likely to feel after witnessing an attempt at, or death by, suicide.

Someone I know has died by suicide

Losing a friend, colleague or loved one to suicide can be difficult, and it can bring complicated emotions. This page may help you during this time. It explains what support is available to you or others who've experienced a loss by suicide.



Loss is a very personal experience, and it can differ significantly between people. How it's felt can depend on someone's relationship with the person who has died, and it often involves moving through a range of emotions.

There's no 'wrong' way to feel

Losing someone by suicide sometimes brings with it complicated and contradictory feelings and thoughts. This can include questioning whether more could have been done to prevent their death. It can also involve a sense of guilt and/or anger at the person who has died, or at yourself or others who knew them. Some people might also become more worried or anxious about the wellbeing of other people around them.

There isn't a 'normal' way to feel or behave following a death by suicide, and therefore different reactions are okay and common.

A [specific guide](#) is available to provide guidance and advice specifically to those who've lost someone to suicide. This provides information about grief and loss and the inquest process, and it gives specific advice for people who had close relationships to the person who died and for people of different faiths and cultures. It also contains information on how to support others who've been affected by a suicide.

If you think that you or someone else would benefit from extra help – e.g. if they've been withdrawn for a long time, or are feeling unable to talk about the person who died, making major life changes that seem unhelpful, drinking excessively etc. – then there are a range



Communicating with a child about a suicide

The death of a friend or loved one by suicide is a very difficult time for a child. This section contains advice on how to communicate with a child after a suicide.



Often, we try to protect children from difficult times and issues, but research suggests that it can help a child if they're involved in conversations around suicide, loss and grief.

When talking to a child about suicide, try to be honest, open, and understanding.

Top tips for communicating with a child about a suicide

- **Be honest** - keeping secrets or hiding information can cause problems later down the line.
- **Be consistent** - inconsistent information may make the child feel like they're being lied to.
- **Encourage questions** - answer them honestly, including telling them if you don't know the answer.
- **Tell them as soon as possible** - withholding information leaves room for them to find out from another source or for rumours to develop.
- **Use age-appropriate language** - matching your language to their comprehension level can really help them process and understand what's happening.

Talking to and being honest with a child builds

Wide range of Sources of Support

Sources of Support

You can find support for mental wellbeing and suicide-related issues from the organisations listed below.



Bear in mind that the services listed here offer support both for people who are struggling and for those who are supporting them. They can talk to you about your worries, offer support or advice on how to cope, as well as ideas on how to help someone else.

Health Service

Seeing your GP

Your GP will provide the best way to access a range of health and mental health options available. They can discuss the best options for you, including:

Medication - which can help to stabilise your mood so that you can focus on other aspects of your life including addressing practical concerns or be able to engage in counselling.

Counselling or mental health services - where you can talk openly, in a safe space, and learn new skills to help you cope with your feelings and thoughts.

Health Service Mental Health crisis services

If your query is urgent, public health care provider's website can help you find 24/7 support and advice specific to your local area. To find local services, click on your country of residence: [England](#), [Scotland](#), [Wales](#), or [Northern Ireland](#).

Suicide crisis and support with 24/7 availability

Fire Fighters



suicide

Support After Suicide Partnership

Survivors of Bereavement by Suicide

Offers support to the community after someone has died by suicide: Call 0300 111 5065 on Mondays and Tuesdays from 9am-5pm.

Cruse Bereavement Support

Offers face-to-face, online and telephone support for people who are **grieving** after a death. You can find a **local support** service, get one-to-one support or **chat online** to a volunteer. Alternatively, you can call them on 0808 808 1677.

Facing the Future

Meeting others bereaved by suicide can help some people to feel less isolated in their situation. Facing the Future is a support group for people who've lost someone through suicide. Support after a bereavement by suicide.

Winston's Wish

If you're a **child**, or if you would like to support a bereaved child, **Winston's Wish** provides support and guidance to bereaved families, including children.

Supporting the Supporters: Looking after yourself

If you've had a difficult conversation, situation or are providing support to someone else, this can be a worrying time and your focus might be on them - however don't forget that it's also important to look after yourself and practice some self-care.

Self-care

Here are some simple things you can do to look after yourself.

- **Do things you enjoy** - it's important you remember to keep doing the things you enjoy, like listening to music, playing sports or watching TV. This will help you to stay grounded.
- **Spend time with friends and family** - maintaining social



Managers Guide



Fighters
Charity

**Suicide prevention
and postvention guidance**

Checklists for managers and
people professionals



Nottingham Trent
University

About this guide

This guide, which has been developed by The Fire Fighters Charity in conjunction with Nottingham Trent University, is designed for managers and people professionals. It is designed to provide an overview of good practice in regard to suicide prevention in the workplace, as well as information on how to respond and work to both suicide risk and events after a suicide (known as postvention).

It is aimed at anyone with supervisory or leadership responsibilities, and it reflects, where evidence is available, on the fire and rescue service (FRS) context. This guide begins by setting the context and importance of these roles in managing suicide prevention and postvention within your organisation.

Would you know how to develop suicide prevention and postvention in the workplace? An essential list of *General Questions for your Organisation* will guide you in shaping the workplace and facilitate appropriate courses of action.

Two detailed checklists for prevention and postvention follow, outlining what to look out for and how to ensure that there is effective leadership and procedures in place. Additional resources for accessing immediate and longer-term support are provided, and reference to additional information, including through The Fire Fighters Charity, to suit your needs.

The Guide's purpose is to provide both managers and people professionals with quick and easy access to information about:

- understanding suicidal thoughts and suicide;
- identifying suicide risk factors and warning signs;
- strengthening protective factors;
- talking about suicide, responding and signposting support;
- building healthy and constructive organisational cultures;
- eliminating stigma;
- using language surrounding suicide responsibly;
- managing after a suicide (postvention); and
- recognising the importance of self-care when supporting others.

This guidance may also be helpful after an attempted suicide.

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Managers Guide: Six questions

1. Am I cultivating a compassionate culture in which people feel safe to talk about their personal experiences and concerns?
2. Do I understand experiences of suicide?
3. How am I facilitating staff engagement in appropriate training and awareness opportunities?
4. Where can I refer people to access support?
5. How am I supporting the development of a suicide prevention organisational culture?
6. Do I understand how to respond after a death by suicide (postvention)?



Section B2: Suicide postvention checklist

Postvention refers to actions that are taken after a death by suicide. It is a critical aspect of responding to all of those who are affected by a suicide, as it can help the recovery process for these individuals and the workplace community, and it can reduce the likelihood of clusters.

Postvention, to a greater or lesser extent, covers all people who are aware of a suicide, including those who knew the individual, witnessed the suicide or became aware of it from reports. There is a raised risk of displaying signs of trauma or future suicide behaviour when affected by suicide.

This section provides an overview of a response framework for managers that can be used to support good practice in postvention after a suicide. Preparation by the organisation will be necessary to ensure that the framework can be implemented when needed.

There are two good-quality resources available that can be suggested to anyone affected by suicide:

The [Help is at Hand booklet](#) is a resource for people who have been bereaved through suicide or other unexplained death, and for those helping them. The guide can be viewed online or downloaded.

[First Hand](#) is an organisation that is there for anyone affected by witnessing the suicide of a person they did not know. This may be because someone happened to be at a particular location or because their job involves responding to these incidents.

Communication is often a crucial element after any death, and [Box 1 \(page 23\)](#) provides additional, more detailed, guidance on how to communicate after a suicide.

There is a raised risk of displaying signs of trauma or future suicide behaviour when affected by suicide



**Suicide prevention
and postvention guidance**

Checklists for managers and
people professionals



General response framework for suicide postvention¹

The following steps are recommended as actions that managers and/or people professionals can take after a death by suicide. Some of these principles can also be applied to a suicide attempt.

Acute/immediate phase

Immediately after a death by suicide, common reactions include mixed emotions (e.g. sadness with anger), shock, grief and they may include someone questioning whether they could have prevented the suicide, leading to guilt or anxiety.

Coordinate

Contain the situation; preferably a senior manager should coordinate the response including engagement with the family, colleagues of the deceased and practical implications. *[Note that this is not a family liaison officer which is allocated by the police].* This should preferably be someone who did not know the individual well. Plan for a period of disruption and adjustment.

Further details on communication are provided in Box 1.

Notify with respect

Communicate news of the death while protecting the privacy of the deceased employee and their loved ones.

Communicate

Reduce the potential for contagion and misinformation by getting in front of the news and being proactive and measured in communication.

Support

Establish and provide appropriate immediate support, including work adjustments, a safe place and time for staff to talk. Sensitively promote the available support on offer including wellbeing services for affected staff including signposting helplines. Ensure support is provided to managers around having conversations with staff about the death. Compassionately review the wellbeing of each person affected by the death. Where appropriate, offer practical assistance to the family, e.g., regarding financial matters or funeral arrangements.

Opt-out instead of opt-in support provision (i.e. everyone is provided the support but may decline) may be beneficial due to the potential stigma regarding help-seeking after a suicide.

¹ Source (adapted): Carson J Spencer Foundation, Crisis Care Network, National Action Alliance for Suicide Prevention and American Association of Suicidology (2013). A manager's guide to suicide postvention in the workplace: 10 action steps for dealing with the aftermath of suicide. Denver, CO: Carson J Spencer Foundation.

Box 1: Good practice for communicating after a suicide

The style and content of communication after a suicide are important when informing employees and others of a suspected suicide and to support the postvention approach.

Good practice includes:

Who should communicate about the death?

- ✓ individuals should, where possible, be prepared (and if possible, trained) to communicate the news, with HR and line managers understanding how to communicate with the family.
- ✓ when the person is known, the news can be best received coming from a peer or team leader, or someone with similar lived experience.
- ✓ organisation-wide or external communications are best provided by a senior manager.
- ✓ those communicating should receive wellbeing support following difficult conversations.

Who should be communicated with?

- ✓ consult with the deceased's next of kin and, where possible, respect their wishes.
- ✓ broaden the circle first to inform those who would have known the individual e.g. their team and manager before the wider workplace.
- ✓ where possible, send out communication to the wider workforce at an early opportunity that an event has occurred (even if you can't share circumstances or details) to reduce unhelpful speculation, contacts, social media posts or pressure on team members or the deceased's family.
- ✓ ensure key stakeholders are informed prior to the media.
- ✓ if communicating with a child, do not delay too long. Communication should be honest, consistent, and appropriate to age and comprehension level.

Suicide postvention for senior leadership

Things to know and do

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May 2024



Senior Leader postvention guide

NTU

Nottingham Trent University

significant responsibility and pressure when your service experiences a death by suicide. This guide has been produced for you as a group to gather the learning from our work with NTU so you have a guide on the key things to consider, do and reflect on when you need it. It should give you an overview of a response framework that can be used to support good practice in postvention after a suicide.

What is postvention?

Postvention refers to actions that are taken after a death by suicide. It is a critical aspect of responding to all of those who are affected by a suicide, as it can help the recovery process for these individuals and the workplace community, and it can reduce the likelihood of clusters.

What are the effects of suicide?

Suicide can affect people in many ways, and this will be personal to each individual. Everyone will have had a different relationship with the person who has died, and they will also be affected by what else is going on at the time, as well as what support is available.

Whenever someone dies, it can be overwhelming. There can be many different and intense feelings involved, including grief, disbelief and sadness, among others. However, the process of grieving and coming to terms with the death, as well as getting support after a suicide, can be complicated by feelings of guilt, rejection or anger. There are also often many questions that just can't be answered.

People who don't personally know the person can also be affected, especially if the person who died was a high-profile or if they recognise something about themselves in the person who died.

As with all grief, there will be a period of meaning-making after a suicide as people try and make sense of the death. After a suicide, it can be difficult to understand or make sense as suicide is complex and personal. It can also be difficult to talk about the loss or people may feel a sense of responsibility in not preventing the death, which make it more difficult to grieve or adapt to the loss. However, with the right support people

Sometimes, after a suicide, it can feel like you've got to just carry on with work, put others first, or not show that it has affected you. But this can impact how well you cope – now or in the future. It can also be helpful to others who have been affected if you share that the experience has had an emotional impact on you too.

There are two good-quality resources available that can be suggested to anyone affected by suicide that you should have available for yourself and your colleagues:

- The **Help is at Hand** booklet is a resource for people who have been bereaved through suicide or other unexplained death, and for those helping them.
- **First Hand** is an organisation that is there for anyone affected by being present at the suicide of a person they did not know.

This guidance draws from detailed guidance available online from The Fire Fighters Charity on **suicide postvention** including a **Managers and People Professionals Guide**.

Have you considered?

- ✓ visible leadership can make a difference – acknowledging that it's OK to be affected, reassuring others and admitting that you might not have all the answers.
- ✓ acknowledge your own feelings and if affected, show colleagues and staff that talking about suicide and accessing informal or formal support is a positive action.
- ✓ plan for support structures for senior or isolated managers e.g. a peer buddy system or with external services.
- ✓ work in partnership with the wider leadership team, as postvention after the death of a colleague as it impacts all levels of an organisation. Anyone may be affected by the death, including senior or other managers and/or those who did not know the person who died personally.
- ✓ it can be a difficult time when managing your own emotions whilst providing support to others and continuing services, so finding a balance will be important.
- ✓ ensure that there is a communication strategy regarding how information will be passed on and how to talk about suicide safely.

FIRE FIGHTERS CHARITY CRISIS LINE

- Launched 1st Nov 2023
- CAMS model
- 173 callers
- 60% operational personnel
- Ages range 18 – 65+ (67% of callers within the 30 – 59 age bracket)
- Key presenting Issues:
 - Relationship breakdown*
 - Health issues*
 - Drug / alcohol misuse*



Everyone who features in this film has been impacted
in some way by suicide or poor mental health

Further Information & Resources



[Suicide Postvention](#) pages & QR code:

- [Managers Guide](#)
- [Senior Leaders Guide](#)

Click on links below for further suicide prevention guidance:

- [Suicide prevention guidance pages](#) including further pages & videos on:
 - [Talking to someone about suicide](#)
 - [Keeping someone safe when they're having thoughts of suicide](#)
 - [How to tell someone when you're struggling](#)
 - [Making use of ongoing support](#)
 - [Safety planning](#)
 - [I'm a child concerned about someone else](#)
 - [I'm a child concerned about myself](#)



A 3D rendering of a field of dark grey question marks. In the center, one question mark is highlighted in a bright yellow color. The word "Questions" is written in white, sans-serif font across the yellow question mark.

Questions