

TALKING WITH CHILDREN AND TEENS ABOUT SUICIDE AND VIOLENT DEATHS

3-6 YEAR OLDS

Be In A Neutral, Safe Setting

Have Some Of Their Favorite Adults Present

Use Age Appropriate Language

Deliver Information in Bite-Size Pieces

Be Prepared for Mixed Emotions

Give Physical And Creative Outlets

It's Ok To Talk About The Person Who Died



Suicide: They made their body stop working.

Homicide: Someone hurt his body so bad that his body stopped working and he died.

How To Help: Play, physical activity, creative outlets, maintain routines and structure, reassure them that they are safe and loved

Normal Grief Responses: Regressive behaviors, repetitive questions/play, crying, clinginess, increase in fears, acting out behaviors, unclear about finality of death

7-11 YEAR OLDS



Suicide: Your person ended their life. This is called suicide.

Homicide: Someone killed your dad. He is no longer living.

How To Help: Play, physical activity, creative outlets, maintain routines and structure, answer questions truthfully, address issues around fears and safety, validate their experience without judgement

Normal Grief Responses: Crying, shocked, confused, scared, angry, sad, acting out, regression, isolation, declining grades, curious, can feel stigma, is clear about finality of death

12-17 YEAR OLDS



Suicide: They died from suicide.

Homicide: She was murdered.

How To Help: Give them space, connect them with peers who have experienced a death, maintain routines, disclose details when asked, be a good role model, ask them what they need

Normal Grief Responses: Angry, confused, scared, acting out, promiscuous behaviors, isolation, tearful, declining grades, can feel stigma, depressive like symptoms, changes in sleeping, eating and moods



If possible, have child's favorite adults present.

Favorite adults

Disseminate information with minimal details. Answer questions as they arise; be clear and concise. If you do not know the answer, it is ok to say, "I don't know, but I will tell you when I do know."

Bite-size pieces

Make sure to give time for physical activity and creative outlets. Play is a child's language and will allow them to process the heavy news.

Provide outlets



Neutral, safe setting

Deliver information in a quiet, familiar setting such as a living room or kitchen.

Age appropriate language

Avoid euphemisms such as "passed away," "went to sleep," or "went away." These terms are confusing to a young child. Instead, use words like "died," "dead" or "killed." Keep verbiage simple and easy to understand.

Mixed emotions

Be prepared for a variety of responses such as, shocked, confused, indifferent, angry, sad, anxious, stoic, withdrawn, and isolative. Children may wish to return to regular activities right away (i.e., school, sports, social engagement, peer interaction) while others will want a respite; allow them to decide.

Talk about them

It's ok to talk about the person who died. Share memories but be respectful of child's desire to share/receive memories or stories. Make sure you aren't using your child as your sounding board for your grief work. Share truthfully, as a child is ready to hear more.

EXPLAINING SUICIDE TO CHILDREN

"It is difficult to understand why someone would want to end his or her life on purpose. But what we know is that just like people can get sick in their bodies, such as pain in their stomach, people can also get sick in their brain. This can cause them to feel very sad and lonely for a long time.

When people feel like this, they sometimes think about hurting themselves or even killing themselves. That is what your mom did. This is called suicide. Do you have any questions?"



EXPLAINING HOMICIDE TO CHILDREN

"There are people in this world who might make a decision to hurt someone else on purpose. Someone killed your dad and he is no longer alive. It can be difficult to understand why someone would want to cause others harm like this. This is called homicide. Do you have any questions?"



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