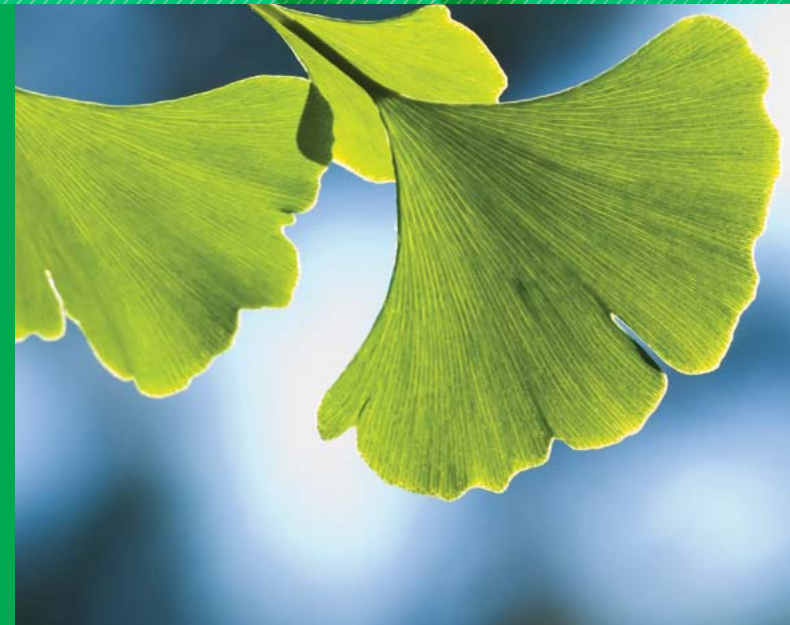




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Information booklet for people bereaved by suicide

Acknowledgements

As Commissioner for Victims' Rights I would like to thank the following persons who contributed to the production of this booklet:

Lynette Burbidge, Centrelink

Karen Zola, Centrelink

Peter Munn, Centacare Catholic Family Services Catholic Diocese of Port Pirie

Aaron Stuart, Centacare Catholic Family Services Catholic Diocese of Port Pirie

Lynne James, Office of the Chief Psychiatrist

Jill Chapman, MOSH (Minimisation of Suicide Harm)

Elizabeth Todd, Mental Health Services, Glenside Campus

Ann Sampson, Adelaide Metro Mental Health Directorate, Glenside Campus

Katherine O'Neill, Attorney-General's Department

Staff of the Living Beyond Suicide program

In addition I would like to thank the South Australia Police, Victim Contact Officers for their input during the development of this booklet.

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Introduction

As the Commissioner for Victims' Rights, I am often helping people suffering as the result of a traumatic incident. People bereaved by a sudden, often unexpected death, are frequently shocked and confused, and can feel a sense of chaos. Other common reactions to bereavement include bewilderment, disbelief, guilt and anger.

People's grief should not be ignored. Some people feel they are being ignored by those they expect to understand, to provide emotional support and practical assistance. Alas, family, friends and others have no intention to diminish that grief.

People bereaved by suicide require particular sensitivity. Suicide is a difficult and distressing incident.

If you are reading this booklet, it is likely that you are bereaved by the suicide or you know some one who is bereaved by suicide.

The information is in places impersonal but it is written to guide your ideas and thoughts as you process what has happened. There is no intent to lessen your grief or minimise the depth of your experience. Your feelings are important.

Some of the information might seem irrelevant now; however, its relevance might be evident later. Some of the information is written for Aboriginal people. Although there are common elements of grieving there are also differences in grieving patterns.

There is a list of services; some of these are available 24-hours, 7-days because you might feel alone and isolated.

Bereavement by suicide hurts. I am deeply sorry if you are affected by suicide. I hope that this booklet will assist you and that it will give you some advice on what happens now that suicide has left its mark. I also hope that this booklet helps you personally to regain stability and deal wisely with your grief.



Michael O'Connell

Commissioner for Victims' Rights

The grieving process

When someone you love ends their own life, your life will be changed forever.

How may I feel?

Nothing can truly prepare you for the news that someone you love or care for has died. The emotions that you experience may be powerful; you may feel frightened and overwhelmed. While grief is the natural reaction to loss, the grief process associated with a suicide is often very different to that associated with an expected or anticipated death. For example, there is little or no opportunity to prepare for the loss or say good-bye. You may have regrets for things said or not said before the person died. You are suddenly forced to face the loss of a loved one without warning.

A suicide will affect different people in different ways; you may even feel differently from day to day. Some reactions may persist for extended periods of time while others may subside. It is important to remember that everyone grieves differently, although there are a number of common reactions that are discussed in this booklet. You might recognise some of them, or you might find that your reactions are totally different.

Shock/denial

Initially you may feel total shock and have difficulty believing what has happened. You may think 'this isn't real', 'it can't be true' or 'I'll wake up in the morning and everything will be normal again'. You may feel disconnected from your environment or those around you; you may even feel like an observer watching this happen to someone else.

It is common to have difficulty comprehending that your loss is real and permanent. Some people may have conversations with their loved one as if they were still alive others may refer to the person as if they are still alive.

Shock and denial are normal initial responses to the news that someone you love has died suddenly. They provide time for you to process what has happened. It is normal to need time to deal with this.

Numbness

Shock is often accompanied by a feeling of numbness – not being able to feel anything. For example you may wonder why you cannot cry. This too is a common and normal grief experience. It is the body's way of protecting us from the full physical and emotional pain, although only temporarily. Numbness will recede slowly.

Searching

You may find yourself searching for your loved one, even though you know they are dead. You may look for them in a crowd, you may think you can hear their key in the door or you may dream they are back. Realising that a death has really happened and is irreversible takes time. When you do begin to accept that your loss is real you may experience a desperate longing to see, touch or even smell your loved one, to talk and be with him/her.

Anger

Perhaps, most difficult to deal with are feelings of anger towards your loved one. You may feel angry with your loved one for abandoning you, for choosing to die and for not letting you know they were at risk. Again this is a natural response. You have a right to be angry, even if others are uncomfortable with this. It may help you to acknowledge that you can be angry with them for the action they have taken while still loving them.

Most people experience some form of anger following a suicide. You may feel angry at an agency, a doctor, family members or friends who did not seem to help your loved one enough before their death. You may be angry at yourself.

For many people anger can feel like a forbidden or unhealthy emotion. This is often because they have, as children, been taught to suppress their anger. However, anger is a completely normal and necessary human emotion. Feeling anger is different from expressing anger, and it is the inappropriate expression of anger that makes it unhealthy.

Give yourself permission to express and release your anger. Listed below are some ideas for releasing anger in a healthy way. Remember not to hurt yourself or others when you release your anger. You may choose to release your anger when you are alone, if not surround yourself with supportive people.

- Punch a pillow
- Hit the sofa with a plastic bat
- Yell and scream
- Tear sheets of paper
- Beat a drum
- Get back to nature – Go to your local forest or wildlife park. Walk or run on the trails. Use what nature has to offer such as a rock for throwing (be sure nobody is in its path!), dead branches for beating on the ground
- Exercise

Guilt

Guilt is often closely linked to feelings of anger and for some survivors is an overriding emotion. People who experience feelings of guilt may believe that they are in some way responsible for the death of their loved one.

You may question whether you could have prevented the tragedy or whether you could have done something differently. You may blame yourself for not 'seeing the signs' or perhaps your loved one tried to contact you prior to their death but was unable to do so. It is extremely painful to accept that we were not able to protect our loved one or prevent their death. But you are not responsible for your loved one's suicide. It may help to write this down or say it to yourself over and over again (even when it feels false) because this is the truth.

It may help to remember that it is very difficult to 'see the signs' when those contemplating suicide do not want you to see them. At times the signs may be so subtle that even the most skilled professional may miss them.

As well as self-blame there is often a tendency to blame others, often those closest to us. Blaming is a way of dealing with intense grief but it will only provide temporary relief and may ultimately damage relationships with family and friends at a time when their support may be valuable. No-one is responsible for another person's decisions or actions.

You may feel guilty because you feel relieved. If the period prior to the death of your loved one was particularly unhappy, traumatic and emotionally draining you may in fact feel relieved that their suffering is over. You may also experience a sense of freedom from ongoing worry for your loved one.

Despair

When you realise the enormity of your loss you may experience feelings of powerlessness and hopelessness. Life may no longer make sense to you or it may hold little meaning for you. You may feel exhausted and disinterested in others. The grief and despair may be so overwhelming that you may even have suicidal thoughts yourself. In these circumstances you should seek support and/or professional help as soon as possible.

Shame

Until relatively recently suicide was a taboo subject that was not widely discussed, well understood or adequately dealt with. More recently, suicide has been recognised as an issue that deserves attention and requires the education of the community, however for many people suicide is still accompanied by stigma and misconception.

Depending on your own circumstances you may experience a sense of shame. Sometimes, shame may be self-imposed, resulting from your own knowledge, values and assumptions. In other cases shame may result following the reactions of others. Instead of receiving the compassion you deserve, you may find yourself alienated from your family and/or social networks. You may feel that your loved one is being judged or that your own behaviour is under scrutiny. These judgments may be overt and obvious or implied and subtle.

The insensitive reactions of others may leave you feeling isolated with little opportunity to speak of your loved one. If this is the case you may find it helpful to share your experiences with other people who have lost a loved one through suicide, or you might want to seek counselling.

Anxiety/panic

At first you may feel anxious about being alone. You may worry about the future and how you will cope without your loved one. You may be afraid that something else will happen to another loved one. You may feel so anxious that you feel like you are losing control. You may even panic at the prospect of always feeling this way. You may feel that you should be coping better and panic when you don't. Remember these are all normal reactions to your loss. Sometimes simple things such as talking about your feelings, sobbing, slowing down your breathing, meditation or exercise may help to release feelings of anxiety/panic. However, if your anxiety/panic seems

intolerable you may need to seek some professional help from your GP or a counsellor.

Grief

Undoubtedly you will experience profound sadness and despair that may seem to pervade your life. You may feel inconsolable, distressed, dejected and heartbroken. The pain may be so incredible that you just don't care about anything; you may find it difficult to get out of bed, go to the shop or prepare a simple meal. Grief interferes with sleep, concentration and appetite among other things.

However, talking to others, whether a friend, a professional or a support group, may prevent your grief from becoming particularly severe and prolonged or resulting in long lasting depression.

Depression

Most people at some time or another have felt depressed however, depression becomes a serious illness when the mood state is severe, lasts for two weeks or more and interferes with your ability to function at home or at work. If you are concerned that you are experiencing depression you should consult your local doctor. Depression is a serious illness but one that can be treated.

The beyondblue website at www.beyondblue.org.au provides comprehensive information about depression. The website provides information about the symptoms of depression; how to recognise it and how to get help. Alternatively you can call the information line on 1300 22 4636.

Physical symptoms

Grief can deplete us both emotionally and physically. Listed below are some common physical responses you may experience.

- Sleeplessness
- Fatigue
- Loss of memory and concentration
- Dizziness
- Palpitations
- Difficulty or rapid breathing
- Over sensitivity to noise
- Tremors
- Muscular tension, headaches, neck and backaches
- Loss of appetite or over eating
- Nausea and diarrhoea
- High blood pressure
- Loss of sexual desire
- Exhaustion
- Chest tightness
- Dry mouth

It helps to understand these symptoms may be a part of grief and emerge anytime. However, it is advisable to talk to your doctor should you notice any physical changes to ensure there is not another cause for the symptom.

You may also notice changes in your thoughts and behaviours following the death of your loved one.

Behavioural responses can include:

- Can't stay home or can't stay away from home
- Crying/sobbing
- Restlessness
- Avoiding reminders

- Dreams of your loved one
- Social withdrawal
- Searching, calling out
- Taking on the mannerisms or behaviours of your loved one
- Treasuring objects
- Visiting places, carrying reminders
- Waiting for your loved one to come home

Thought responses can include:

- Disbelief
- Crisis of faith
- Confusion
- Inability to concentrate
- Sense of going crazy
- Slowed thinking
- Difficulty in problem solving
- Disorientation
- Poor attention span
- Hallucinations

Recovery

Sometimes during the grieving process you might find yourself thinking that it would be wrong to recover from your grief. Recovery might seem disloyal to the person who has died, as if they were no longer important or were being forgotten. There may be a sense of guilt if your mind stops thinking about the person for a time or if you start to feel better. In fact, the mind, like the body, does its best to heal from an injury, this is natural. There is no need to blame yourself for this recovery or to fear that you will forget the person who has died.

What do I tell people?

Only you can decide what to tell people. You may wish to tell only the people closest to you, and others who need to know.

You may be faced with uncomfortable questions from outsiders. It may help you to anticipate some of these questions and write yourself a “script” of answers that you can mentally keep at the ready. The more you fear these kinds of inquiries, the more useful you will find a prepared “script” of answers.

Although you will probably find that most people will be supportive, you may be disappointed by the way that others react. Some people may be afraid or feel helpless; they might not know what to say to you or be worried that they will upset you, or they might avoid talking about it at all. Try to accept that this might happen and focus on coping with your own feelings without dwelling on what others think or say.

Understanding differences in grief responses

As previously stated, grief and loss affect people in different ways and while there may be similarities in the way people express grief there are also considerable differences from one person to the next.

Many factors can influence the way we experience, interpret and express our grief including our gender, culture, age and life experiences to name just a few. All of these factors affect our needs and expectations in the face of grief. This is why it is important not to compare your grief reactions to others.

Understanding men's grief and women's grief

Men and women tend to grieve differently; these differences are very real and are linked to differing roles and expectations within any society. For example, in our society men are generally expected to be strong, active, rational and dependable. Traditionally these qualities are valued in men who are seen as the protectors and providers. In very subtle ways society has taught men that in order to be strong they should not display their grief openly. For example, young boys are often discouraged from crying when they are upset or hurt while young girls are shown affection and attention when upset. Naturally this will influence the way a man responds to grief and loss. While in more recent times men have been encouraged to express their feelings many still do not.

Women on the other hand are encouraged to talk about their feelings and share their experiences with others. These are attributes that are seen to be consistent with the roles of nurturer and carer that are assigned to women in our society. For example, young girls are often given toys that reflect these roles such as baby dolls, tea sets and toy ironing boards. Women who do not fulfil these social expectations may be labelled as cold and selfish.

A man who is experiencing grief and loss:

- May not cry or express his grief openly. This does not mean that he is not deeply affected or that his grief is any less intense
- May not want to describe his feelings
- May need privacy and a sense of emotional safety before he can express his emotions. Hence, he may prefer to grieve alone
- May deal with his grief by doing something productive
- May use anger as a means to express his grief; however it is important that he finds a safe way to release his anger

A woman who is experiencing grief and loss:

- May cry a lot, this is natural and normal
- May want to share her feelings and communicate about the loss. This is not necessarily a search for answers
- May feel the need for social support from friends and professionals even if her family are supporting her
- May need to focus on the past, feeling that it is a way to hold onto connections with the person who has died

Remember these are just some examples of the way men and women may grieve differently and will not necessarily apply to all men and women. These examples are intended to assist you in understanding some of the possible differences and help you to avoid misunderstandings or conflict in relationships with your partner, family members and/or friends.

Parent's grief

Strong emotions are aroused whenever a loved one dies. However, parental grief can be particularly overwhelming, long-lasting and complex regardless of the age of the child. Normal grief reactions such as disbelief, shock, anguish, guilt, anger, fear, jealousy and regret may be intensified when a child has died.

When we first become parents our lives, priorities and our identities change as we focus on keeping our children well, happy and safe. We tend to do whatever is necessary to protect our children.

So it is understandable that losing a child to suicide would raise painful questions, doubts and fears. Parents often feel a deeper sense of guilt and failure than those whose child died in other ways.

You may experience a sense of failure as you realise you could not keep your child safe or that your love was not enough to save them. You may feel that you should have known how your child was feeling; that you missed vital clues or that you are somehow responsible for not preventing your child's suicide.

You may blame yourself and look for mistakes you made in raising your child. It may help to remember that children - even young children - are not entirely of their parents' making. Children are also shaped by their peers, school, the media and the world at large.

If your child was an adult when he/she died you may also face an additional factor that compounds your grief. You might find that some people assume that, because your 'child' was an adult, the pain of losing them is less. In this way you may feel that your grief is discounted or minimised. Whenever a life has not run its anticipated span there is immense grief and parents often find themselves questioning their own purpose in life. Most bereaved parents also experience guilt for having outlived their child.

For all parents, guilt and "what ifs" go hand in hand with grief. The guilt after the suicide of a child can be all-consuming for months or even years. You may find yourself recalling every cross word you ever said, you may question every decision you made and replay events that you think you could have altered.

The first few weeks and months will be tremendously difficult and your emotions may be in turmoil for a long time. You will never really "get over" your loss, but eventually you will learn to live with it. You will come to realise that you did your best and you will learn to forgive yourself and your child.

You may find it helpful to speak to other parents who have lost a child. The Compassionate Friends (TCF), South Australia (SA) Inc. is part of a world-wide organisation offering friendship and understanding to families following

the death of a son or daughter, brother or sister. TCF offers support in the grief and trauma which follows the death of a child at any age and from any cause. For contact details see page 50. The Compassionate Friends at www.compassionatefriends.org.au also has a range of useful resources for bereaved parents.

How long will I feel this way?

The intensity of these feelings and physical reactions usually lessens over time. Remember, there are no timeframes for grief and no right or wrong way for you to grieve. However, it is worth remembering that grief is unpredictable and may surface without notice when you least expect it. For example, you may be in the midst of a normal, pleasant activity when suddenly you notice your grief again. This is quite normal.

Some people experience feelings and symptoms that persist unabated for an extended period of time. Whether your grief comes and goes or is with you constantly, it is important to look after yourself and get any support and treatment you need. See page 48 for more information about who may be able to assist you and provide you with support.

If you are concerned or overwhelmed by the way you are feeling or if the pain of loss is so constant and severe that it keeps you from resuming your life you should consult your doctor.

Why do friends/family keep telling me to get better?

After a while, it can happen that people close to you tell you they think it is time for you to start getting over the death or start moving on. This can sometimes be because they feel uncomfortable with your grief and don't know how to react to it, or they may be genuinely worried about you. This sort of advice is unrealistic and unhelpful. It may

make you feel guilty for not recovering faster, or it might just make you angry with your friend. In fact, telling you to get over your pain is like telling you to start running on a broken leg. You have a right to grieve in your own way and in your own time.

Why did this happen?

It is common to ask this question and attempt to make sense of what happened. You may try to reconstruct what happened in an attempt to understand, replaying events in your head. You may think about what was said or not said prior to the death of your loved one. You might imagine ways you could have prevented the death. You may ask yourself questions such as "Why couldn't they tell me or ask me for help?", "Why didn't someone do something?" or "Why couldn't they see that there were other solutions?"

Some people ask friends, family members and/or colleagues about what they knew or observed when searching for an explanation. Others may talk to a professional or a trusted person with knowledge and wisdom that enables them to help make sense of the death.

For some people it is important to obtain factual information following a sudden death. For some, knowing what happened is better than imagining what might have happened. Police and medical staff may be able to answer your questions, but be mindful that you may not get answers to all your questions or you may not get the answers you would like.

Some people do not want specific information and there is nothing wrong with this. This is simply their preference. You need to do what is right for you, not what you think is expected or what others tell you.

Even if you find some rational explanations you may find that your heart is not satisfied and continues to hold a 'why' question.

You may find that you continue to ask yourself these questions from time to time, perhaps for the rest of time. However, eventually these questions will arise less frequently and with less intensity.

With support you will gradually learn to live with unanswerable questions.

Some people find it useful to set aside some limited time to allow themselves to go over these unanswerable questions. For example, you could set aside five minutes at a time after which you set the questions aside.

Suicide notes

If you did not receive a note you may desperately wish you had, believing it would help you to understand. Even if your loved one left a note, it might not give you all the answers. You may dissect every sentence and give multiple meanings to nearly every word. You may imagine that your loved one intended to say something different. A note may provide you with some answers but still leave you feeling angry and frustrated knowing that there is nothing you can do now.

It may help you to remember that the note only represents your loved one's state of mind when the note was written. Commonly, when people are planning suicide they are not thinking clearly and have lost awareness of the effect of their actions on others.

Talking to someone about how it feels to be left without an answer or to be left with an unsatisfactory answer may help. Choose someone who will really listen to you.

If you actually saw your loved one commit suicide or discovered their body, then you face the additional pain and shock of that experience. You may be left with

persistent memories, images, smells or sounds that make it difficult to concentrate on anything else. It can be helpful to try to replace these persistent memories. A photo, a memory from happier times, or even a funeral viewing may help you to remember your loved one as they were before the suicide.

How will I cope with Christmas, birthdays, anniversaries and other significant days?

Inevitably you will have to deal with Christmas, birthdays, holidays, religious celebrations and other special occasions that you and your loved one shared together. These will obviously be difficult times that emphasise the absence of your loved one, as will the anniversary of the death of your loved one. You may find these occasions particularly difficult in the first year following the death of your loved one. The pain you feel on these occasions is a natural part of the grief process.

Some people find the anticipation is often more difficult than the actual date or occasion itself. You may find it helpful to make plans well in advance and discuss the occasion with family members or friends who may also be anticipating the event. It may also be helpful to explain the significance of the date to those who do not already know, so that they may support you at this time.

You may find it helps to develop a ritual or do something special to remember your loved one on these days. In this way you acknowledge his/her ongoing presence and importance in your life. You might choose to visit a place that your loved one enjoyed, prepare one of his/her favourite meals, plant a special tree, share memories of your loved one with others or light a candle. Alternatively you may decide to do nothing. Remember, there is no right or wrong way of doing things. It is entirely up to you and your decision should be based on what is best for you and your immediate family and/or closest friends.

Whatever plans you make, you may feel like changing your mind at the last minute. For example, you may suddenly decide you would like to be alone or vice versa. It is okay to change your mind; however, you may find it helpful to warn your family and friends that this may happen. It is good to listen to yourself and what you need to do to take care of yourself physically and emotionally.

What helps?

What helps one person will not necessarily help you, however, here are some things that might help you:

- Cry, know that it is okay to express your grief
- Take one day at a time, or half a day, or one hour at a time
- Spend time with people who care about you, understand you and will listen to you
- Allocate grief time, some people find it helpful to spend some time alone every day. During this time they deal with any emotions they may have stored up during the day
- Holding onto a photo of your loved one can be helpful. If you are getting flashbacks taking out your favourite photo can help minimise the pain/fear
- Allow people to help you with everyday tasks like preparing meals or doing the washing
- Prioritise daily tasks, do only what is essential
- Stay healthy – eat healthy food, exercise and get enough sleep
- Speak to others who have been bereaved by suicide e.g. a support group
- Accept that it was not your fault
- Stay connected to your loved ones and those who support you

- Be patient with yourself and your grief
- Keep a journal or write letters to your loved one
- Do something you enjoy – allow yourself time out from your grief
- Avoid seeking relief through alcohol, smoking, medication and other drugs as they may make you feel worse in the long run
- Consult your doctor about physical symptoms, for help with grief and for medical certificates
- Avoid making any major decisions in the weeks or even months after the death of your loved one
- Consider talking to a counsellor or psychologist to focus on your unique situation

Surviving the suicide of a loved one – a personal reflection

I can still remember the shock I felt when I was told that my sixteen year old son had taken his own life. There was no hysteria, just stunned disbelief. I can still feel the numbness that took over me, how I sat in a chair in my Mum and Dad's lounge and said to the police officer "It just doesn't seem real, it feels like it must all be happening to someone else". That numbness carried me through the first week, between his death and the funeral, and I realised later that the human body is a wondrous thing; it doesn't give you all your grief to process at once, because we just wouldn't survive it. I know that sometimes people don't survive it, physically, emotionally or spiritually, and I can understand how that could happen.

There are many other feelings that jump up to bite us too. You may have felt angry, guilty, abandoned, betrayed, lost, lonely or even relieved. Don't be afraid to feel these emotions, as confronting as they often are – they are very natural. You may need to choose whom you share them with though, as not everyone will understand that they are quite normal reactions.

I myself have been blessed with a wonderful support network consisting of my family, friends and professionals who have assisted me through the first stages of my grief journey. Grief following suicide is so complicated, and harder to deal with than many other forms of grief, and how you will get through it is dependent on so many things. One thing that many people do not realise is that there is no right or wrong way to grieve, just your way. I liken grief to spaghetti bolognese – everybody does it, almost every batch is different, but at the end of the day it is still "spag bol". That's how it is with grief.

The most helpful people have been the ones who have let me get on with it my way, however that happened to be on any given day, at any given moment, and that's how quickly it can change. One minute you will be laughing over something funny your loved one used to do or say, and the next minute you may be crying bucketsful, or cursing them for abandoning you.

The most valuable people to have around you are those who can accept all of these reactions, however strange they may seem, and just be there for you. They don't tell you that it will be "OK", because at the time you feel that life will never be the same again, and in many ways it won't, but many things do return. You will have days where you realise that you have been happy more than sad, you will be able to look at a photo of your loved one without bursting into tears, and you will be able to put away many of their personal possessions without the fear of forgetting them.

For ages I expected Michael to walk in the front door, throw his school bag in the corner and look for something tempting in the fridge. I did eventually accept that he wasn't going to, and there began my process of letting go. We do need to let go, but we are usually afraid we will forget them if we do. Trust me, it is OK to let go, and actually a very important part of the process. Forgiveness is a very important part of the process too. We need to forgive them for going, and we need to forgive ourselves for all the things we did and didn't do or say. You will probably be plagued with questions that begin with "Why..." "What if..." and "If only..." These are all very natural questions, but with help, there will come a time when you won't ask them any more and you will realise that you did the very best you could at the time, given the information and resources that you had.

It is extremely helpful to get some support from outside your close family and friends, because sometimes those closest to us are not the best equipped to help because they are often grieving too. Counsellors are invaluable at a time like this as you can say whatever you need to, and they won't be offended or affected by it. Remember though, counsellors are like doctors and restaurants, sometimes you need to visit a few of them before you find one that you are comfortable to go back to.

Spirituality is important to many people at times like these. This will take many forms, depending on your beliefs and does not necessarily need to be religious - again, find what you are comfortable with.

Support groups such as the Bereaved Through Suicide Support Group are also brilliant as it is a difficult grief to understand if you haven't been there yourself. Books are also a great source of help, and you can pick them up at any time. I would especially recommend Dr Sheila Clark's book "After Suicide". This is only one person's perspective, and only a small part of my journey, but I hope it can help, even just a little.

I wish you all the best for your journey, my heart goes out to you. Remember, you are not alone in this, as lonely as you feel at times, and whatever you are feeling is right for you at that particular time. Whatever you do, please don't try to do it on your own, as it is a very long and lonely road. We have too many wonderful resources at our disposal to do it the hard way.

A Mother.

Children and young people affected by suicide

How might a child react to suicide?

Like anyone else, children are affected by traumatic events such as suicide. They too experience both physical and emotional reactions to loss but tend to express their grief differently. For example, children do not always express their grief in words in the way that many adults can. It is not unusual to explain a death to a child and find that they do not seem affected by it, or they want to go out to play. This does not mean they do not feel the pain of the loss. In addition it is quite normal for children to move in and out of grief, a child may appear to be fine one day but not managing well the next. Young children who suffer trauma or are grieving may:

- have nightmares or problems sleeping
- wet the bed
- behave badly
- be easily upset
- ask the same questions many times
- eat too much or too little
- act like a younger child or act more like an adult
- cling to adults
- become withdrawn or fear being alone
- suffer headaches or stomach aches
- fight with friends
- lose concentration
- start doing badly in school

What do I tell a child?

One of the most difficult situations adults face, is telling children that someone they love has died as a result of suicide. Adults often worry that children will not understand. It is natural to want to protect children from the pain of losing a loved one and the circumstances surrounding their death. However, children should be told as soon as possible that a person they care about has died, preferably by a parent/guardian or someone close to them.

Depending on the age of the child it may or may not be the right time for them to learn about suicide. The amount of information that should be given to a child can often be gauged by the questions he or she asks. If a child is old enough to conceive of a question which shows considerable thought, that question deserves a serious, thoughtful reply.

If, on the other hand, the death is not discussed or grief is not expressed in front of your child, he/she may learn to suppress emotions and avoid asking questions for fear of upsetting the remaining family members. Children need to be given opportunities to grieve and may be more hurt, frightened, confused and resentful if they are excluded.

If the person who died was a parent or guardian of a child, it may be important to reassure the child that it was not their fault. Often children grapple with guilt just as adults do and may be left with any number of beliefs, for example:

- I was so bad my father or mother wanted to get away from me
- I caused my parent to die by wishing it
- I was supposed to watch Mum/Dad and I didn't
- I found Mum/Dad but I couldn't save her/him (I called the wrong number, I was not strong enough to help etc.)

In addition, a child may fear losing their remaining parent/guardian. The surviving parent/guardian can reassure their child by mentioning things that will occur in the near future e.g. "we will visit Grandma at Christmas", "I will teach you to swim this summer", "when you go back to school you can help me make lunches". This tells the child that the surviving parent is planning on being there in the future.

Should my child go to the funeral?

For many people this is a very difficult decision. Some people wonder whether it is a good idea to include children in funerals, perhaps worrying that it will add to their distress.

Ultimately, the decision whether to include children or not will be up to you and those closest to you, and may be influenced by your culture, religion and/or family beliefs. However, an approach that is often helpful is to give children choices. You might consider inviting your child/children to the funeral, without forcing them to make a particular decision. Before making a decision children will need clear information and explanations about what a funeral is and what is going to happen. Consider discussing the following:

- Who will be at the funeral or memorial service
- What is going to happen
- Where the service will take place
- When the service will happen, and
- The reason for having a service

Children often express a desire to be involved in preparing for a funeral and some children ask to be involved in the funeral itself. Children may wish to add drawings, letters, poems, toys or a special gift to the coffin or read something during the funeral service.

It is important for children to be given opportunities to say goodbye to the person who died in a way that feels right to them. Saying goodbye is never easy for children or adults but it is an important part of the grieving process.

Should children keep things that belong to the person who has died?

Some people feel that it is morbid or strange for children to want to keep something belonging to a person who has died. However, it is just as important for children to maintain a connection with their loved one as it is for adults. Keeping a memento of the person – perhaps a lock of hair, a photo or a special belonging – may assist them to feel this connection.

Things you can do to help a child who is grieving

- Be aware that some explanations such as "he's gone to sleep" can confuse children as they take things very literally. A child may even start to fear going to sleep
- Express your feelings in front of your children
- Allow children time to talk, and ask questions
- Let them know they don't "have to be brave"
- Let them know it is okay to talk about someone who has died
- Accept their feelings and share your own. Sharing feelings can help people feel connected to others while also showing children that it is okay to express their grief.
- Explain to your children that they do not have to feel sad all the time.
- If you are too distressed to answer questions, ask another adult that you and the children trust to talk to them.

- Maintain routines and expectations such as homework and bedtime, this gives children a sense of consistency and security.
- Consider letting your child's teacher know there has been a loss in their life. Teachers and friends at school can help support your child.

For more information refer to Parenting SA, 'Parent Easy Guide No. 6, Grief and Loss'. This is available at www.parenting.sa.gov.au/pegs/Peg6.pdf

How might a young person react to suicide?

Teenagers are no longer children, yet neither are they adults. It is a developmental period that is filled with multiple physical and emotional changes and challenges – changes that can make grief particularly difficult for young people. However, just as young children may not react as an adult might expect, nor may teenagers. Some common reactions to grief include:

- Expressing grief through acting out e.g. risk-taking behaviours
- Begin using drugs and alcohol
- Social withdrawal
- Abrupt shift or change in relationships
- Decline in school performance
- Sleep and eating disturbances
- Engaging in active pursuits such as running, dancing, playing sport
- Seeking comfort in music, writing poetry, or being alone
- Turning to their peers for support rather than seeking support from family including social networking online

Things you can do to help a young person who is grieving

Provide a caring and supportive environment. The most important thing for a young person who is grieving to know is there are people who will care for them and support them. Make it clear that you are concerned for how the young person is managing, that you are prepared to listen, and have time to spend with them.

- Continue to enforce normal limits and boundaries
- Beware of mixed messages. Avoid telling young people to be strong and look after others during periods of grief. These messages directly contradict invitations to share how they really feel
- Don't assume peer support is enough. Check with and offer support and comfort to a teen
- Remember anniversaries can be painful. For teenagers who have encountered loss at a younger age, developmental changes may mean they engage with grief at a different level and need to grieve a loss again with a different perspective
- Young people may be confused by the intensity of their emotions. Explore feelings and the means of processing or expressing feelings
- Be watchful for unexplained or disproportionate emotional reactions to everyday events. Sometimes feelings of grief can be triggered by events that may appear unconnected to the loss. However, it is likely that something about the context of an event has precipitated the reaction e.g. the place is associated with the loss. Avoid overreacting but attend to the young person's grief
- Provide the young person with information about teen specific resources they may wish to access. (See page 59)

You should seek professional help if a young person:

- Talks of not wanting to live, being better off dead or is preoccupied with dying
- Is unable to concentrate and is withdrawn for months following the death of a loved one
- Is crying, sad or depressed much of the time.

See pages 59-64 for a list of services that can assist children and young people.

Helping others

Non-family survivors

There may be non-family members who are also deeply affected by the death of your loved one, particularly where they may have supported him/her prior to his/her death, or received a note or call for help. You may wish to consider including these people as you mourn the loss of your loved one.

How can I help a friend who is bereaved by suicide?

What might be helpful

- Contact the person as soon as you hear of the death and tell them you are sorry to hear of their loss
- Offer to dial phone numbers for them if they are unable to focus, but then hand the phone back if possible – some sense of control is important
- Attend the funeral if you can and if it is appropriate – this will let your friend know that you are there to support them through this difficult time
- Maintain contact
- Allow extra time to manage ordinary tasks – take it all slowly
- Listen – this is probably the most important thing you can do
- Remember that everyone's grief is unique – let your friend grieve their way in their own time
- Allow them to express their feelings – especially anger, guilt, blame and sadness. Let them know you understand what they are saying

- Remember that human touch is powerful. Holding your friend's hand or giving them a hug offers emotional support
- Talk about the person who has died
- Accept your friend's behaviour, e.g. crying, screaming, laughing
- Offer practical help, e.g. bring cooked meals, do the washing, do the grocery shopping, take care of children
- Let your friend know that grief takes time
- Be willing to sit in silence. If your friend does not feel like talking you can still support them by sitting with them
- Offer comfort and reassurance without minimising the loss
- Be sensitive about significant dates that may be distressing for your friend, e.g. Christmas, birthdays, anniversaries
- Be aware of those who may be grieving but forgotten, e.g. children, grandparents and friends.

What may not be helpful

- Avoiding talking about or naming the person who has died
- Lecturing your friend about what they should or shouldn't be doing
- Pressuring your friend to do things before they are ready
- Using clichés such as "time heals" or "don't dwell on the past"
- False reassurance
- Saying "I know how you feel"

- Avoid statements that begin with "you should" or "you will". These are very directive statements. Generally, people in grief are not seeking advice and they may find it troubling
- Avoid comparing your friend's experience with other's losses
- Avoid saying things like "you are so strong" or "you look so well". This may put pressure on the person to keep up appearances and to hide his/her true feelings.
- Avoid telling your friend "that it is time to move on". Grief works at its own pace and this will vary from person to person. It is important not to rush your friend through his/her grief
- Ceasing contact with your friend
- Comparing one loss to another

Grief reactions in different cultures

Grief reactions vary from one culture to the next. Culture includes all the attitudes, values and patterns of social behaviour that are common to a group of people. This means that each culture has its own rituals and practices surrounding death that help people grieve and mourn.

In some cultures there are very public displays of grief following the loss of a loved one whereas in other cultures expressions of grief are quieter and more private. If you are supporting a person from a different cultural background who is grieving you may wish to consider the following:

- What emotions and behaviours are considered a normal grief response?
- What are the beliefs about what happens after death for someone from this cultural background?
- Who is expected to attend mourning ceremonies, and how are attendees expected to dress and act?
- Whether people of different genders or ages should grieve differently or have different roles?
- What ceremonies and rituals should be performed and who should participate?
- How long are family members expected to grieve?

Having an awareness of their customary ways of expressing grief and responding to death will guard against imposing your own assumptions upon the family of the deceased.

For more information visit the Grieflink website at www.grieflink.org.au. You will find information about the grief reactions for different groups including men, children, teenagers, Aboriginal and Indigenous people and other cultures.

Aboriginal people bereaved by suicide*

Tribal way

When someone died our people had the infrastructure in place. Sorrow Camps took place, this is where Aboriginal people all came together and sit in a location away from the area where the person had lived and conducted ceremony. People would, mostly, sit quietly at Sorrow Camps paying respect to the close kinship of the family structure. Long term ongoing support was also provided to the bereaved by the extended families like Sisters, Brothers, Uncles and Aunts. These were mostly classed as Mums and Dads the Aboriginal way. Even the burial had its own structure of respect to comfort the family.

It is important to understand that our people had this structure to help you through this process, we call it nowadays, Sorry Business. This is still practiced out bush by many today. All tribes are diverse and they each had their specific ways but Sorry Business was most important to the healing process for all families and others who were close.

Nowadays

When we grieve, when someone commits suicide, or, has died the first response is mainly tremendous shock. We struggle to believe that the person has died. This usually effects our concentration about what is going on around you and could affect how your body reacts: you may feel tingling, faintness, feeling of helplessness, lack of appetite and even anger. Other things that used to be important may no longer be important.

* Written By Aaron Stuart, Manager of Aboriginal Projects Centacare Catholic Family Services Catholic Diocese of Port Pirie

The Aboriginal way is that other Aboriginal people will come far and wide, even non Aboriginal people, to see you to show their respect, like shaking hands, and sitting down. This is similar to what happened before colonization but more often nowadays it happens in a house or dwelling rather than out bush.

You also may wish to go back to the country where the person was born, not just for the funeral but for the healing process. While waiting for the funeral there is sometimes a lot of anger and with large families there may be disputes. It is important to respect your Elders and ask them, or let them decide, not just funeral arrangements but the healing process and who should help you through this.

You should never lose focus on what you are grieving for and never let anger or other feelings cloud your judgment on how you respect or judge the person who has taken their life. You will find that many not just you will ask questions why. You must always remember that this was our Aboriginal way back in the old days where everyone would come together just to cry and that they too are close to the deceased person and hurting too.

Just like the old days it is rude to mention the person's name that has died. Use a nickname of the person that has died. If you have other family members around who have the same name refer to them as another name as this is necessary for the healing process.

Our people were always spiritual and believed not just in religion but in spirits the Aboriginal way. This also plays an important role on how we view death. This could also include thoughts of Aboriginal Payback, thinking someone has done something wrong, that he or she, did not commit suicide but was actually killed. If you have concerns about this you may need to talk to an Elder or even the police. This is not very common but could just be a thought like many others that flow through your

mind leading up to and even after the funeral. Do not feel ashamed this is our tribal way and culture.

At the funeral you will see a lot of Aboriginal people showing their respect and who want to show you they also love and care for you. Especially those who know what you are going through their own experiences. It is important that you listen to what they have to say to help you get through this first initial stage. Grief itself is a humanely function and it is part of the process of your healing. Don't be ashamed to show this.

You might even have thoughts of suicide and/or taking others lives. If you ever feel like this you need to speak to an Aboriginal Healer, General Practitioner, Counsellor or another trusted person about these thoughts.

You always must remember the old ways and how we dealt with this important issue-it has been lost to some extent and we need to fill in the gaps with what our community services offer us today – this includes psychologists, counsellors, doctors, grieving forum/support groups.

Its important to be truthful that when you lose someone your life will change dramatically forever. You will feel that emptiness that will affect us all at some point in our lives. If you follow the right process and use our culture to guide you that feeling of emptiness does and will get better, but you need to understand that there now is a gap in your life and it will be there forever. The only way to treat this gap is to make yourself feel better in doing these living skills like:

- Going back to country
- Talking To Elders
- Going to where the loved one was born
- Counselling
- Talking to a Doctor
- Family Support
- Follow your Aboriginal Group Culture or your spiritual beliefs

You will find that it may be harder when the funeral is over – this is when you may feel truly alone as it may seem everyone else's life is still going on.

There is no right or wrong way to grieve, everyone grieves differently, it is important that you do what is right for you, and it is important to keep talking to others.

Some warning signs that you are not coping are:

- Excessive amounts of alcohol and drugs
- Not wanting to get out of bed
- Believing the person is still alive
- Serious thoughts of self-harm or suicide

Be honest to yourself about your true thoughts and feelings and get help if you need it. You will get through this.

Practical issues

There will inevitably be practical issues that you must deal with following the death of your loved one. This section outlines some of these issues and provides information about the options and choices that may be available to you.

The police and coronial process

A coronial investigation is conducted by police on behalf of the coroner to determine the cause and circumstances of all sudden deaths including suicide. It involves certifying that death has occurred, identifying the deceased person, and collecting and providing information to the coroner relating to the cause and circumstances surrounding the death.

A brochure titled 'The Police and Coronial Process Information for Family and Friends' provides information about the role of the coroner and police, post-mortem examination, viewing your loved one's body and coronial inquests. You may have already been given this brochure, however if you have not, you can request a copy from police, the Coroner's Office on or (08) 8204 0600 or www.courts.sa.gov.au/courts/coroner or the Commissioner for Victims' Rights on 8204 9635 or voc@agd.sa.gov.au.

Arranging the funeral

Arranging a funeral can mean making many decisions at a very difficult and emotional time. You should contact a funeral director as soon as possible. The funeral director will liaise with the Coroner's Court regarding the release of the deceased, which cannot happen until the post-mortem is complete and the body has been formally identified. There may be a delay in certain circumstances but this is usually no longer than 72 hours.

Although arrangements for a funeral may be made, a burial or cremation cannot be carried out until the Coroner has issued the appropriate order to release the body. The executor named in the will is responsible for making funeral arrangements. In the absence of an executor, the next of kin or other relatives are responsible.

Some people feel angry or frustrated by delays caused by the coronial process, however they may also assist you. Delays slow the process down and give you more time to think about what type of funeral would be meaningful and an appropriate acknowledgement of your loved one's life. They also give you more time to consider your own involvement in the funeral service.

Funeral directors are there to offer help and guidance during one of life's most difficult times. When making arrangements:

- Select a funeral director who is licensed and has a good reputation in the community. The Australian Funeral Directors Association (AFDA) has a listing of funeral directors with AFDA membership (www.afda.org.au). The Yellow Pages also has a listing of funeral directors
- Discuss with the funeral director or minister of religion their role in the service to ensure you understand what you need to arrange
- Be sure to discuss all the available financial options before making a decision
- The funeral director may ask for a deposit to be paid before the funeral and for the balance to be paid by an agreed date. Ensure you check the terms and conditions for payment of the funeral before you commit to them
- Consult the will of the deceased person for any unique funeral arrangements to be made
- Feel free to ask questions and to speak up about anything that concerns you

Some people have found it valuable to have an audiotape or videotape of the funeral service as they have difficulty recalling details of the service that are important to them later on. If you think this might be useful to you, you might ask someone to take responsibility for this.

Returned service personnel may be entitled to an official war grave. If you think this may be the case, contact the Commonwealth Department of Veterans' Affairs on 133 254 or visit www.dva.gov.au

Websites such as www.funeraldirectory.com.au may also assist you in planning a funeral.

Paying for the funeral

Some people make a provision in their will for the payment of funeral costs. Others may have arranged a prepaid funeral. Otherwise, it is normally the person who arranges the funeral who has to pay for it. If you are suffering financial hardship, you may be eligible for the Families SA Funeral Assistance Program, which provides financial assistance for a basic funeral. You can contact Families SA on 1300 762 577.

How do I obtain a copy of the death certificate?

The funeral director may have already arranged a death certificate, but if not, copies of the Registration of Death (death certificate) can be obtained from the Principal Registrar at the Births, Deaths and Marriages Registration Office. An interim death certificate is available prior to a cause of death being reported by the Coroner. The certificate may be used in some instances to assist in finalising matters of the deceased person's estate such as access to bank accounts by a spouse, and for social security purposes. Once the Coroner has confirmed the cause of death, it is added to the register and a further fee is required to obtain the complete death certificate.

What financial assistance is available to me?

Centrelink support for you after someone dies

Adjusting to life after you have lost someone close is never easy. There is a lot of help available to assist you to make the necessary adjustments.

Centrelink may provide you with financial assistance after a partner or person you are caring for dies. Contact Centrelink for further information.

Bereavement Payment

Bereavement Payment helps make it easier for you to adjust to changed financial circumstances after the death of your partner or your child, or someone you cared for.

Bereavement Payment is generally for people already getting an eligible payment from Centrelink or the Department of Veterans' Affairs.

You may be eligible for a Bereavement Payment if:

- your partner dies and when they died you were both receiving either:
 - a pension from Centrelink or the Department of Veterans' Affairs or
 - a benefit such as Newstart Allowance or Parenting Payment for at least 12 months, or
- you are caring for an adult or child who dies and you were receiving Carer Payment for them; or
- you are the carer or parent of a child who dies; and
 - you were getting, or were qualified to get Parental Leave Pay, Family Tax Benefit, Baby Bonus or Maternity Immunisation Allowance for the child who died.

You also need to be an Australian resident.

Bereavement Allowance

If you are recently widowed you may be entitled to Bereavement Allowance. It is a short-term income support payment to help you adjust following the death of your partner.

You may get Bereavement Allowance if:

- your partner dies
- you were living with your partner immediately before your partner's death
- you have not re-partnered
- you are not eligible for Widow B Pension or Parenting Payment from Centrelink
- you are not eligible for a Service Pension or War Widows Pension from the Department of Veterans' Affairs,
- you lodge your claim within 4 weeks to be paid from the date your partner died, or within 14 weeks to be paid from the date you claim, unless you were pregnant when your partner died.

Note: Bereavement Allowance is not payable in addition to another income support payment. However, if you are currently receiving a payment, other than Parenting Payment, you may choose to transfer to Bereavement Allowance.

For more information go to www.centrelink.gov.au

Adjusting to your new circumstances may take time. Centrelink Social Workers may be able to assist.

Social work services

- Social Workers are available to help customers in Centrelink Customer Service Centres and Call Centres and can assist people who have recently experienced a bereavement

How can social workers help?

Social workers:

- provide counselling and support to Centrelink customers with difficult personal or family issues
- provide information about, or refer customers to, community support services like:
 - community health centres
 - Lifeline
 - Solace Association
 - the National Association for Loss and Grief.

How do you contact a social worker?

Phone Centrelink on 13 1794 or call into a local Centrelink office to:

- speak directly to a Social Worker, or make an appointment to see a Social Worker at your local Customer Service Centre.

Who do I need to contact?

As well as contacting your friends and relatives there are a number of organisations who will need to be told about the death of your loved one. For example, it is important to contact banks or any financial institution that holds money in the name of your loved one as soon as possible so they can freeze the accounts.

If your loved one was in receipt of any pensions or benefits you should also contact Centrelink as a priority. This reduces the possibility of over-payments which would later need to be repaid.

While many organisations may require a copy of the death certificate before they take action, it is wise to notify of the death as soon as possible. For this purpose it may help to have information such as your loved one's birth certificate, marriage certificate, Medicare number, health fund membership number, tax file number, social security number, bank account details etc close at hand when making these calls. Some organisations may require written notification. Please see page 72 for a guide to writing to organisations but note some organisations such as banks may require additional information.

Here are some of the people/organisations you may need to contact:

- Accountant
- Australian Electoral Commission
- Australian Taxation Office
- Banks and financial institution
- Centrelink/ Department of Veteran Affairs
- Executor of Will
- Insurance companies (home, health, car)
- Landlord
- Lawyer or executor of will
- Local council (rates, libraries etc)
- Medicare
- Medical Practitioner and dentist
- Priest, minister or religious advisor
- Schools/TAFE/University
- Sporting clubs
- Subscriptions to magazines/ publications
- Superannuation fund

- Utility companies such as electricity, water, gas and phone
- Workplace
- Vehicle registration and any licences

A list of organisations you may need to contact along with a sample letter for informing people/organisations of your loved one's death can also be downloaded from the Centrelink Website at www.centrelink.gov.au/internet/internet.nsf/individuals/help_notify.htm

A mother's journey – a personal reflection

It is now over two years since Michael died, and we have recently been informed that the Coroner has decided to hold an inquiry into his death, focusing on his medical treatment, from what I can gather. I guess I had lulled myself into a false sense of security after all this time, as even though the police did tell me that it may be twelve to eighteen months before we would have confirmation on whether or not an inquiry would be held, I felt that after all this time they may not. It was obviously quite a shock when the call came in (at least we got a call - not just a letter, unannounced) Steve, one of the Social Workers from the Coroner's Office was wonderful, as was Kate, counsel for the Coroner. They both patiently answered all my questions, and Steve was comforting and supportive when I went in to read all the documentation. Having not been exposed to the court before, I had no idea what to expect – "How formal is this process?" "What does the court room look like?" "Is it a full court, or more like a Magistrate's Court?" Even. "Will people be cross examined like they are on Law and Order?" (It is amazing how bizarre we can be when we are upset!)

Of course it was my choice to be involved in the process; as far as I can understand I am not obliged to attend, and didn't have to read the statements, but chose to do so. I am glad that I did, but it also opened some old scars – wounds, which I thought had healed, but not perhaps as well as I thought they had. There were over twenty-five statements to read, and I took issue with a couple of them, which I am still in the process of answering. Many of them didn't shed any new light, but some of them did, and this was very confronting. Once again, the support of those around me came into play, and with the help of my

partner, and one or two close friends, I have processed a lot of the information.

It was interesting though, how many of the “What if...” and “If only...” ‘s came to the surface again. Because I have put them to bed once before it was a much quicker process than last time, and as I read, I had to keep reminding myself that all this information was coming from a wide range of sources, and yes, with the wisdom of hindsight, and ALL the information at my fingertips, I could have seen it coming and saved him, but that wasn’t the case. What is it they say about hindsight giving us 20/20 vision?

I am still deciding whether to go to the inquiry in October or not, but I think I will regret it if I don’t go – I only hope I don’t regret it if I do! I feel confident that I can work through whatever comes up, and when the official finding is handed down, I will have to remember that it is only the opinion of one person, and possibly seen from a narrow perspective.

I take issue with the time lapse between Michael’s death and the calling of an inquest (which is not a personal attack on the Coroner or his staff but rather likely to be the result of demands on this office). At least for the last two years we have known exactly what happened – of course there are many unanswered questions, which will not be answered in this life – but we don’t have to live with the uncertainty and lack of information that many families of homicide and road trauma victims do. My heart really goes out to these people, as their unanswered questions are much more traumatic than mine.

A Mother

What now?

While your life will never be the same, in time and with the help of loved ones and/or professionals and support networks you will learn to cope with your pain and grief. Your pain and grief may seem constant and overwhelming at present. Gradually however, you will notice that you are able to spend some time withdrawn from your grief, when you are able to think of other things or at very least when you are able to distract yourself. At other times you will spend time thinking about the suicide, about your loved one, about your regrets, your distress and your loneliness (in contact with your grief). Both the time spent withdrawn from and in contact with your grief are important parts of your grieving process and your recovery. Be gentle with yourself and others and live one day at a time. With help you can be okay.

Useful contacts and resources

General contacts and resources

After Suicide Help for the Bereaved – by Dr Sheila Clark

This is an extremely valuable book which will be of great support and assistance to those who are bereaved through the tragedy of suicide. It shows practical commonsense and careful guidelines to help people find their way through this time.

Anglicare SA Loss and Grief Service

The Loss and Grief Service provides a range of services to meet the needs of people who are grieving, and others affected by grief.

Ph: 8131 3400

Email: admin@anglicare-sa.org.au

Website: www.hopesa.org.au

Bereaved Through Suicide Support Group

The Bereaved Through Suicide Support Group provides help and guidance to those grieving the loss of someone through suicide.

The group comprises people from all walks of life. Their common link is that they have been close to someone who has suicided – relative, child, friend or acquaintance. They are able to provide help and guidance to anyone bereaved through suicide. They are able to provide many of the answers to your questions through their personal experiences and provide comfort and support to help you through this difficult time.

The group is administered by its own committee and is supported by a council of professional advisers.

The easiest way to make contact initially is by telephoning or writing to Bereaved Through Suicide Support Group Inc. Services provided:

- Telephone counselling
- Support group meeting 3rd Wednesday of each month at 7pm - 9pm
- Literature on grief
- Sale of publications

Ph: 8332 8240 or 0468 440 287 – calls are diverted to a mobile and answered as soon as possible. If no answer please leave message for call back within 48 hours. If urgent please call Lifeline 131 114.

Postal Address: PO Box 15, Hindmarsh SA 5007

Email: support@bts.org.au

Web: www.bts.org.au

beyondblue

Beyondblue is a national, independent, not-for-profit organisation working to address issues associated with depression, anxiety and related disorders in Australia.

beyondblue is a bipartisan initiative of the Australian, state and territory governments with a key goal of raising community awareness about depression and anxiety, and reducing stigma associated with the illness.

National Information Line Ph: 1300 22 4636

Website: www.beyondblue.org.au

Commonwealth Carelink Centres (Free Service)

Commonwealth Carelink Centres provide free and confidential information on various support services available locally or anywhere within Australia. Information on Commonwealth Carelink Centres is available for people from culturally and linguistically diverse backgrounds; Aboriginal and Torres-Strait Islander people and people with vision, speech or hearing impairments.

Freecall: 1800 052 222

If an interpreter is required to contact a Commonwealth Carelink Centre, telephone the Translating and Interpreting Service on 131 450.

TTY and modem callers may call through the National Relay Service by dialling 1800 555 677.

Compassionate Friends, South Australia

The Compassionate Friends (SA) Inc. is part of a world-wide organisation offering friendship and understanding to families following the death of a son or daughter, brother or sister. TCF offers support in the grief and trauma which follows the death of a child at any age and from any cause.

Our purpose is to offer friendship and understanding by reaching out to bereaved parents, to the surviving siblings and other family members to support them in the grief and trauma which follows the death of a child.

We promote the positive resolution of parents' grief, and to foster the physical, emotional and spiritual growth, in an open and friendly environment of bereaved parents, grandparents and siblings.

Grief Support Telephone Line

The grief support telephone line is a message bank service and is available 24 hours a day. Please leave a detailed message when you call and a volunteer will contact you as soon as possible. Volunteers are also bereaved parents and can provide support and understanding.

Ph: 8351 0344

Support Groups

These support groups offer the opportunity for bereaved parents and siblings to meet in a safe environment with others who have 'been there', who understand and care.

Monthly support groups are held at the under mentioned locations and times:

Adelaide Chapter

7.30pm, 1st Wednesday of each month.

St. Matthews Church Hall,
146 Kensington Road, Marryatville

Parking off Kensington Road at rear of Church Hall.

Modbury Chapter

7.30pm, 2nd Tuesday of each month

St. Mark's Anglican Church hall, corner Golden Way
and Wynn Vale Drive.

Email: tcfsachat@bigbutton.com.au (for support and to chat with a volunteer bereaved parent)

Website: www.compassionatefriendssa.org.au

Coroner's Court

302 King William Street, Adelaide SA 5000.

Counselling Service Ph: 8204 0600

Counselling Association of South Australia (CASA)

Through CASA consumers can access a counsellor or psychotherapist who has a high standard of training and ethical practice. Consumers can also report concerns about the professional conduct of a member of the association

Ph: 8331 2255

Website: www.casa.asn.au/index.asp

For Suicide Survivors (on-line)

This site is devoted to those who are grieving the loss of a loved one by suicide.

Sometimes in life, events occur that break the very foundation on which we stand. Our life, as we have known it, seems forever changed and we find ourselves in an unexpected struggle, first just to survive and then to move forward.

This site provides support for people coping with the shock and excruciating grief that accompany the loss of a loved one to suicide. It was also designed for survivors further along in their healing journey.

We hope that you will find resources here to help you deal with, and eventually heal from, what may well be the worst pain you will ever feel.

Website: www.forsuicidesurvivors.com

Alliance of Hope for Suicide Survivors (on-line support)

This is a forum for suicide survivors... a healing place for those grieving loss to suicide. Since its launch in 2008, this forum has played a significant role in the healing experience of thousands of survivors from all over the world.

Our forum is supervised by a trained grief counsellor. It is moderated by a team of trained veteran survivors who provide compassionate support, information and wisdom born of their own experience. We are a community of hope, dignity and respect, comprised of people from diverse cultures and faith traditions. Linked by an invisible bond, we are respectful of each other and joined in our commitment to live meaningful lives.

Website: www.forum.forsuicidesurvivors.com

General Practitioner/Family Doctor

Ask your doctor for a 30 minute consultation and a Mental Health Care Plan. General practitioners can refer for up to 12 individual consultations and 12 group sessions with a psychologist, social worker or occupational therapist – all with a MEDICARE rebate – Health Care Card holders will have no gap fees but some providers do charge others a gap. Enquire before making a booking.

GriefLink

This website is an information resource for those bereaved and grieving, their carers, friends and colleagues and health and welfare workers.

GriefLink is a website providing information on many aspects of death-related grief, including local supports and resources for loss and grief in South Australia.

Website: www.grieflink.org.au

Healthdirect Australia

Healthdirect Australia is a FREE* 24-hour telephone health advice line staffed by Registered Nurses to provide expert health advice.

'We all feel better when we know what to do.' That's the idea behind healthdirect Australia's health advice line: fast and simple expert advice about any health issue and what to do next. Every time you call healthdirect you'll talk directly with a Registered Nurse. We provide a 24-hour service you can use any time you are anxious about any health issue. We can also help with general health information and direct you to local health services.

Ph: 1800 022 222

The 24-hour telephone health advice line is currently available to residents of the Australian Capital Territory, New South Wales, the Northern Territory, Tasmania, South Australia and Western Australia.

Ph: 1800 022 222 (freecall from land lines)

Hopeline

Salvos National Telephone Counselling Service operates 24 hours a day, 7 days a week to help people bereaved by suicide.

Ph: 1300 467 354

Lifeline

Lifeline is a telephone counselling service available 24 hours a day, seven days a week. Volunteer telephone counsellors will listen, support and assist you to clarify options and choice for yourself. Counsellors may also provide you with information about community services.

Local call costs, however additional charges may apply for calls from pay phones, mobiles or some home phone plans.

Ph: 13 1114

Lifting the Mask - Suicide Bereavement Support in the North

This group will provide an opportunity for you to explore your thoughts and feelings with others in a similar situation.

1st Wednesday of the month, 7pm - 9pm
Grenville Connections Hub
Playford Boulevard, Elizabeth

For more information ph: 8256 0183

LIVING Beyond Suicide

LIVING Beyond Suicide is working with volunteers, service providers and communities statewide to:

- Guide families through the array of systems that enter their lives at this most distressing time;
- Offer immediate practical and sensitive support to bereaved families;
- Help with referrals to other agencies where needed; and
- Increase the sensitivity of service agencies and the general community to families bereaved by suicide.

Ph: 8131 3400

To request support for yourself or someone you know, please contact us between 10am - 10pm any day on:

Ph: 1300 76 11 93

This free service recruits, trains and supervises volunteers to visit families in pairs and guide them through the maze of things that invade their lives at this most traumatic time

Address: 4-8 Angas Street, Kent Town, SA 5067

Email: lbs@anglicaresa.com.au

Website: www.anglicare-sa.org.au/living-beyond-suicide

Local GP

Many local GPs have completed additional specialised training in mental health. Their details can be found on the beyondblue website at www.beyondblue.org.au under the heading 'Get Help' or by calling the beyondblue infoline on 1300 22 4636.

MOSH (Minimisation of Suicide Harm)

- is about creating opportunities for people to reach out for support in times of crisis, if they feel they are at risk of harming themselves or others, and those who are bereaved through suicide.
- aims to break down the stigma surrounding mental illness and suicide.
- is working towards providing the wider community with the tools to help each other.
- is about helping to create a sense of purpose for people, somewhere they can come to engage in activities that will link them to others in a similar situation.
- provides resources so people know where to go for help.

Ph: 8443 8369

Website: www.moshaustralia.org.au

Relationships Australia - Bookshop

For a wide variety of resources and self-help books to purchase or borrow.

Ph: 8245 8111

Solace Association (SA) Inc.

The Solace Association assists bereaved people to cope after the death of their partner and provides a telephone support service available 7 days per week, 7am - 7pm.

Ph: 8271 6366

The Association also provides the following support groups which meet on a regular basis.

Young Solace – for young men and women who have lost their partner.

Children and Youth of Solace Plus (CAYOS) – for children and young people under 16 years who have lost one or both parents, step-parents or guardians.

Parental Adult Loss Support (PALS) – for people over the age of 16 years who have lost one or both parents, step-parents or guardians.

For information about any of these support groups:
Ph: 8271 6366.

Suicide Call Back Service

The Suicide Call Back Service provides a free nation-wide telephone support service for people at risk of suicide, their carers and those bereaved by suicide.

The appointment-based service supports people through a series of six 50 minute telephone counselling sessions, available seven days a week from 10am until 8.30pm (EST). Please leave your contact details if you are not able to speak to one of the professional counsellors, as you WILL be contacted within 48 hours (often much sooner) to arrange your first counselling session.

The counsellors will provide support, information and advice about: maintaining your personal safety, strategies for working through difficult emotions, self care and boundary setting for carers as well as referrals to local support services.

Ph: 1300 659 467

Website: www.crisissupport.org.au/SuicideCallback.aspx

Support After Suicide

Support After Suicide is a program of Jesuit Social Services and is funded by the Department of Health and Ageing under the National Suicide Prevention Strategy.

The website provides many useful resources and fact sheets.

Website: www.supportaftersuicide.org.au

Contacts and resources for men

MensLine Australia

MensLine Australia is a professional telephone support, information and referral service for men, specialising in family and relationship concerns.

Open 24 hours a day, seven days a week, MensLine Australia is available to all men and their families for the cost of a local call.

Ph: 1300 78 99 78

Website: www.menslineaus.org.au

The Shed Online

The Shed Online is an online social community for men, founded by beyondblue: the national depression initiative, The Movember Foundation and the Australian Men's Shed Association.

Like the original Men's Sheds, The Shed Online is a place for men to socialise, network, make friends and share skills. It aims to recreate the atmosphere of "real life" Men Sheds – a safe space where men can feel confident to discuss and exchange information. The Shed Online aims to foster a sense of community and build men's social networks.

In addition to being a place for men to interact with other men The Shed Online also provides men with information on health and well-being. Good health is based on many factors including feeling good about yourself, being productive and valuable to your community, connecting with friends and maintaining an active body and mind. Becoming a member of The Shed Online gives men a safe environment where they can find many of these things in the spirit of "old-fashioned mateship".

Website: www.theshedonline.org.au

Contacts and resources for children and young people

ASCEND Suicide Intervention Program

(Centacare Catholic Family Services)

ASCEND is a Suicide Prevention Program providing assessment, support, consultation, education, networking and direction. The program provides services to young people who are exhibiting depressive, suicidal or self-harming behaviours. Clinical consultations can be one-to-one with the young person at risk or in a secondary capacity with the worker who is supporting the young person at risk. Young people aged up to 25 years

Monday - Friday, 9am - 5pm

Assessment of risk of suicide and self harm for children and young people aged 12-25.

Ph: 8241 7022

Child and Adolescent Mental Health Service (CAMHS)

CAMHS provides a wide range of activities and services including counselling services to children and adolescents (up to 18 years of age) and their families.

Metro

Ph: 13 14 65

Trained mental health staff man this line 24 hours a day. This contact number can be used by those seeking assistance with grief and/or depression

Northern CAMHS

CAMHS Eastern Region (Paradise)

Ph: 8207 8999

CAMHS Western Region (Port Adelaide)

Ph: 8341 1222

CAMHS Northern Region (Elizabeth)

Ph: 8252 0133

Southern CAMHS, Flinders Service (Bedford Park)

Ph: 8204 5412

Marion Regional Service (Oaklands Park)

Ph: 8298 7744

Children and Youth of Solace Plus (CAYOS)

A support group for children and young people under 16 years who have lost one or both parents, step-parents or guardians.

For information about this support group:

Ph: 8271 6366

Crisis Care

For assistance with after hours emergencies call the Crisis Care telephone service. The service operates from 4pm to 9.00am on weekdays and 24 hours on weekends and public holidays. Crisis Care can assist people in crises as a result of personal trauma, suicidal behaviour, child abuse or neglect and homelessness among other things.

Ph: 131 611

Kids Helpline

Kids Helpline is a free 24 hr counselling service for Australian kids and young people aged 5-25 years. You can get help over the phone or web 24 hours a day, 7 days a week.

Ph: 1800 55 1800

Website: www.kidshelpline.com.au

Headspace

Headspace is a community based youth mental health service for young people aged 12-25 years. Headspace offers young people and their families help with issues or questions relating to mental health, alcohol and other drug use, work or education, general physical health, sexual health and relationships.

Website: www.headspace.org.au

Red Chocolate Elephants: For Children Bereaved by Suicide – Book & DVD. Author: Diana C. Sands, PhD

Red Chocolate Elephants an important resource for children

Many aspects of this kind of grief are confusing and don't make sense, and children need support in expressing these bewildering inconsistencies. The Red Chocolate Elephants provides a sensitive, age appropriate way of talking with primary school age children about the difficult questions of death through suicide. The unique combination of text, children's words, drawings and voices allows children to hear their concerns and questions put into words by other children just like them, to support them in finding a way to express their own grief.

Available from www.bereavedbysuicide.com.au

Second Story Youth Health Service

Provides a range of health services including information, referral, general medical services, health promotion and education and health counselling for children and young people 12 to 25 years old.

Ph: 8232 0233

Website: www.chy.com

Sesame Street - When Families Grieve on Youtube

When Families Grieve Message for Families: Big Feelings

Website: www.youtube.com/watch?v=s8M_5_JxY7k

When Families Grieve Message for Families:
The Memory Box

Website: www.youtube.com/watch?v=sE3aWr6Mc7s

Shopfront Youth Health and Information Service

Service of the Northern Metropolitan Community Health Service Shopfront provides a range of services to young people aged 12 to 25 years that address issues related to emotional wellbeing, physical and social health and violence and abuse. Services include counselling, groups, programs, information and referral. The service is free and confidential and for young people living in the Playford, Salisbury and Tea Tree Gully local government areas.

Ph: 8281 1775

Star Bear Program

The Star Bear is a grief support program for children aged 5-13 who are grieving the death of a parent, sibling, carer or other significant person.

Children attend a (free) weekend camp conducted by trained mentors/leaders. The program aims to increase children's understanding of death and the grieving process, as well as providing them with the opportunity to share their experiences with other children. The camp is facilitated by qualified professionals, and volunteers who are trained in working with people who have experienced loss. Star Bear is a program of Anglicare's Loss and Grief Centre.

The Star Bear Remembering books were created by children for children, to share about how they cope with grief, and show ways to remember the person who has died. They are great for children and for children to use with their families. There are three age appropriate booklets for children and young adults; ages 5-8, 9-12 and 13-16 years. The books can be purchased directly from Anglicare or via the web.

Ph: 8301 4208

Website: www.anglicare-sa.org.au

Email: starbear@anglicare-sa.org.au

Star Bound Program

The Star Bound Program is for teens aged 13-17 who are grieving the death of a parent, sibling, carer, or other significant person.

Teens attend a (free) weekend camp conducted by trained mentors/leaders. The program aims to increase young people's understanding of death and the grieving process, as well as providing them with the opportunity to share their experience with other people. The camps are run by program staff and trained volunteers, who have all undergone the required police checks.

Star Bound is a program of Anglicare's Loss and Grief Centre.

Ph: 8301 4208

Email: starbear@anglicare-sa.org.au

Teen Challenge SA

Christian Telephone counselling (volunteer based service).

For young people aged 15-25. Suicide prevention – help and support. Care line for help in a crisis, or a listening ear.

9am - 11pm, 7 days a week. Free service.

Ph: 1800 771 777

Youth Counselling

A counselling service specifically for children and young people 12 to 25 years old.

Ph: 8377 1055

Website: www.ischs.com

Contacts for Aboriginal and Torres Strait Islander people

Nunkuwarrin Yunti

Provides many forms of support for Aboriginal and Torres Strait Islander people, including counselling and referral.

Adelaide CBD

Ph: 8223 5217

Relationships Australia

Aboriginal Liaison Officers are available and will provide both support and relevant referrals.

Adelaide Ph: 8419 2000

Elizabeth Ph: 8255 3323

Muna Paiendi Community Health Care Centre

Community Health Centres & Services – Elizabeth Vale, SA

Ph: 8182 9206

Rosemary Wanganeen, Australian Institute for Loss and Grief

'Specialising in a Culturally appropriate Loss and Grief Model', Loss and Grief counselling as well as Education available.

Ph: 8242 3138

M: 0438 203 032

Second Story (for young people between the age of 12 and 25)

Aboriginal workers available. Aboriginal workers can refer on to counsellors at Second Storey after an initial meeting. No cost for this service.

Ph: 8255 3477

Aboriginal Family Clinic

Aboriginal mental health worker as well as a social worker available at various times during the week. Waiting list is one to two weeks. Service Bulk bills.

Ph: 8179 5042

Karpa Ngarrattendi

Aboriginal Health Unit, Flinders Medical Centre

Ph: 8204 5012

Ceduna Koonibba Aboriginal Health Service

Ph: 8625 3699

Oak Valley (Maralinga) Inc

Ceduna

Ph: 8625 2946

Tullawon Health Service

Ceduna

Ph: 8625-6237 (all hours), Fax 8625-6268

Web: www.tullawon.org.au

Dunjiba Community Council

Ikartuka, Oodnadatta

Ph: 8670 7828

Goreta Aboriginal Corporation

Pearce

Ph: 8836 7205

Kalparrin Inc.

Murray Bridge

Ph: 8532 4940

Mid North Regional Health Service

Port Pirie

Ph: 86384500

Nganampa Health Council Inc

Alice Springs

Ph: 8952 5300

Port Lincoln Aboriginal Health Service

Ph: 8683 0162

Umoona Tjutagku Health Service

Coober Pedy

Ph: 8672 5255

Veterans & Families Counselling Service**Veterans and Families**

Veterans & veteran's families counselling service (24 hr service)

Ph: 1800 011 046

Vietnam Veterans

Vietnam Veterans Counselling Service: After hours telephone crisis counselling for veterans and their families.

Ph: 1800 011046

Legal services

Find a Lawyer

You can search for a lawyer who specialises in a particular field. Also find a comprehensive list of articles and other contacts.

Website: www.lsc.sa.gov.au

Flinders Trustees Group re Wills

For a free discussion on what to do next regarding wills and estates.

Ph: 1800 623 530

Legal Help Line

For fast, free legal advice call Monday to Friday
9am - 4.30pm

Ph: 1300 366 424

General enquiries: 8463 3555

Public Trustee, SA

211 Victoria Square, Adelaide SA 5000

Email: pt.enquiries@sa.gov.au

Public Trustee provides guidance for people who have lost a friend or a relative and who would like to know what the options are in relation to managing the estate.

Public Trustee has also developed some 'Frequently Asked Questions (FAQs)' that are accessible on the website www.publictrustee.sa.gov.au

For assistance or more information, please contact 8226 7371 or 8226 9255.

Regional services

Just Ask Rural Mental Health Information Referral Line (National)

Ph: 131 114

Website: www.justask.org.au

Email: infoservice@lifeline.org.au

Murray Bridge Mental Health Service

Situated next door to the hospital, this service can provide bereavement counselling. The fee structure for this services is tailored for each individual.

Ph: 8535 6800

Silent Ripples

Silent Ripples is a group that provides support for families and friends affected by the loss of a loved one through suicide. Silent Ripples provides an understanding environment where you can share in discussing the issues associated with loss by suicide. Meetings are held in Murray Bridge, Strathalbyn and Oakbank.

Ph: 0417 741 888

Website: www.silentripples.net

Southern Fleurieu Health Service

Provides comprehensive community based health services including grief counselling for people living in the Southern Fleurieu region, Goolwa and Yankalilla.

Ph: 8552 0600

StandBy Response Service - Suicide Bereavement Support

The local StandBy Response Service is a community based active suicide postvention program. The service provides a 24 hour coordinated crisis outreach response to assist families, friends and associates who have been bereaved through suicide.

SA - Country North - Port Augusta

StandBy Coordinator

SA-Country North

Crisis Mobile: 0438 728 644

Office: 0423 966 165

Email: standby@centacarecdpp.org.au

Centacare Country SA

6 Gibson Street

PO Box 2276

Port Augusta SA 5700

SA - Country South - Mount Gambier

StandBy Coordinator

SA-Country South

Crisis Mobile: 0437 752 458

Phone: (08) 8723 8600

standby@unitingcommunities.org

Uniting Communities

11 Wehl Street

Mount Gambier SA 5290

Other StandBy locations

National Office: Tewatin QLD

Other Australian Regions: Canberra ACT, Brisbane QLD, Far North Queensland, East & West Kimberley Region WA, Pilbara Region WA, Southern Tasmania, North/North West Tasmania, Sunshine & Cooloola Coasts QLD, Winda Bay Burnett QLD, FNQ Queensland, North West Central QLD, Central Australia NT, NT Top End, Loddon Mallee Victoria.

The National StandBy Response Service is one of Australia's leading suicide postvention programs dedicated to assisting people and communities affected by suicide.

National Contact:

National StandBy Response Service,
United Synergies Ltd. 07 5442 4277

Feedback or Lodging Complaints

Giving feedback on this booklet

Your feedback is important to us as we seek to ensure that this booklet is a valuable and up to date resource for people bereaved by suicide. If you would like to provide any feedback or lodge a complaint in relation to this booklet please contact:

Commissioner for Victims Rights

GPO Box 464, Adelaide SA 5001

Ph: 8204 9635

Website: voc@agd.sa.gov.au

Giving feedback or lodging complaints on services

Health & Community Services Complaints Commissioner

The Health and Community Services Complaints Commissioner helps people – service users, carers and service providers – resolve complaints about health and community services, including child protection services, when a direct approach to the service provider is either unreasonable, or has not succeeded.

- covers health and community services across the public, private and non-government sectors
- handles complaints confidentially and impartially monitors and reports complaint trends
- makes recommendations to improve safety and quality

- is an independent statutory officer
- operates a telephone enquiry service Monday to Thursday 10am to 4pm. Ph: 8226 8666, toll free in regional South Australia 1800 232 007. Fax: 8266 8620

Draft letter for notifying organisations that a loved one has died

To whom it may concern,

I wish to notify you of the death of

Mr/Mrs/Miss/Ms _____
Surname

Given Names _____

Date of Birth _____

Street name and number _____

Suburb _____ State _____ Postcode _____

Date of Birth ____/____/____ Date of Death ____/____/____

I understand that the person named above had dealings with your organisation.

The reference number/membership number/client number for your organisation was _____. Please amend your records.

If you need any further information, my name is _____

Contact number _____

Street name and number _____

Suburb _____ State _____ Postcode _____

Relationship to the deceased _____

Signature _____

Date: ____/____/____

