



What to do if a club member dies by suspected suicide

June 2020

Acknowledgements

Funding for this workbook has been provided by the Department of Health and Human Services as part of the Victorian suicide prevention framework 2016–25.

North Western Melbourne Primary Health Network (NWMPHN) would like to acknowledge the organisations who have contributed to the development of this guide.

- Macedon Ranges Response and Recovery Working Group for identifying the need for this resource in community and their help in informing the content.
- Mindframe for their support in the review and recommendations to support safe communication about suicide.

We would also like to acknowledge that much of the source material for this workbook was originally created by the following organisations:

- Everymind
- Goodsports
- Lifeline
- LifeinMind
- Orygen
- Public Health England
- Victorian State Government

North Western Melbourne PHN acknowledges the peoples of the Kulin nation as the Traditional Owners of the land on which our work in the community takes place. We pay our respects to their Elders past and present.



What to do if a club member dies by suspected suicide

When a suicide occurs within the local sporting community, the effects can be far reaching. Questions come up about what to say, when and how. The way a suicide is discussed is important and should be handled with care.

This 4-stage guide has been developed to be used by local sporting clubs in communicating with and supporting its members following a suspected suicide within the club's community. Information within the guide is drawn from a variety of sources and is provided for guidance only and does not replace professional advice and support.

Stage 1 – Get the facts

Before discussing a suspected suicide with members, especially in a group setting or online, get the facts and ensure that those directly affected by the death have already been notified.

It is best to avoid making assumptions or announcements before a suspected suicide has been discussed with the family or someone close to the person. Sometimes there will be uncertainty about whether the death was a suicide or not and may be subject to an investigation by the Coroner.¹ Use the term 'unexpected death' to avoid any legal implications.



¹ Everymind, Fact sheet: Conversations matter when communities are affected by suicide, 2013
conversationsmatter.com.au/resources-community/when-communities-are-affected-by-suicide

Stage 2 – What to say and what not to say

How to talk about suicide

It's important to be thoughtful and sensitive when you talk to people about suicide. The aim is to limit the harmful impact of the death and to promote positive coping strategies and good mental health. That's why it's important to consider the words you use when talking about suicide.

- Certain ways of talking about suicide can alienate or inadvertently contribute to suicide being presented as glamorous, ideal or a common option for dealing with problems.²
- Please refer to [Fact Sheet 1](#) about how to talk safely about suicide, e.g. Don't say 'successful suicide' or 'unsuccessful suicide' to avoid presenting death as a good outcome.

When to communicate

If the death has been confirmed, it is generally best to communicate this as soon as possible to reduce rumours or misinformation, but **first think about who can make the decision about telling others**. The club committee should pre-nominate an appropriate committee member to lead the coordination of communications. It is recommended that the club doesn't communicate about the death as a suspected suicide. Instead it would be appropriate to simply say an unexpected death has occurred within the sporting community and acknowledge grief and loss.

Face to face communication is best in these circumstances so you can monitor people's reaction and provide support if needed.³ However this may not always be practical or possible. If your club uses electronic or closed-group social media to communicate with your members, as is common, use this as a way of encouraging help-seeking by providing contacts for support of helplines such as Lifeline and other national and local services. Details of support options are listed on [Fact Sheet 5](#).

What to communicate

When drafting a communication to the community there are 4 key elements to factor in:

- 1 Be sensitive to the grief of family and friends in your messaging.
- 2 Keep to the facts but do not discuss the circumstances of the death or speculate on reasons why someone has taken their life. Suicide is very complex.
- 3 Acknowledge the many feelings that people may experience on hearing the news and in the period following. Encourage them to seek help and share details of where to go for help. A list of organisations is listed on [Fact Sheet 5](#).
- 4 If you are planning to gather, take this opportunity to give people the details.

Please refer to [Fact Sheet 2](#) for template messages that you might wish to modify for your club.

Monitoring your post on social media

If you have made or shared a post on social media that refers to suicide or suicidal behaviour, you should monitor your post regularly to identify people who are distressed or for comments that are harmful.

If you do identify someone who you are concerned about and you know that person, you could reach out to them confidentially.

Look out for harmful posts or conversations. It is important that these are dealt with appropriately.⁴ You will find more information about what sort of post may be harmful and how to respond in [Fact Sheet 3](#).

If you haven't already, you might consider participating in suicide awareness training to help you respond appropriately. There are a range of suicide awareness training options available both online and face to face. Please refer to [Fact Sheet 7](#) for a list of training options.

^{2,3} Everymind, *Fact sheet: Conversations matter when communities are affected by suicide*, 2013 conversationsmatter.com.au/resources-community/when-communities-are-affected-by-suicide

⁴ Orygen, *#chatsafe: A young person's guide for communicating safely online about suicide*, 2020

orygen.org.au/Training/Resources/Self-harm-and-suicide-prevention/Guidelines/chatsafe-A-young-person-s-guide-for-communicatin

Stage 3 – Gathering together

In season

If a suicide occurs either in pre-season or during the season, members will be coming together regularly. This is an ideal opportunity to talk as a group, acknowledge what has occurred, how people might be feeling and extend support. The Committee will need to decide who will be the spokesperson to address the group and think about drafting a script ahead of time as it is likely to be an emotional time and a script will help to keep the messaging clear. The following resource might be helpful in this instance, please visit the Life in Mind webpage. lifeinmindaustralia.com.au/for-the-sector/media-and-public-speaking

It is likely that people will respond differently, and it may be useful to have a mental health professional or a counsellor available at the event. Contact your local community health service or headspace service to find out how to arrange this support and to talk through your plan. [Fact Sheet 4](#) provides further information about how people might respond following a death by suicide.

It is also useful to have a list of services and contact details available to give to each of the players to take home. Please refer to [Fact Sheet 5](#) for a list of local and national services – you may wish to print this out.

Off-season

A suicide during the off-season may make it more difficult to respond, however the club can still play a role in supporting the club community. You may consider bringing the club together for a gathering or a BBQ to nurture the team connection, provide support and information about seeking help. The club could encourage and support key committee members and coaches to complete Mental Health First Aid and suicide prevention awareness training during this quieter time. More information about the range of available programs can be found on [Fact Sheet 6](#).



Stage 4 – Stay connected

Staying connected is an important protective factor and enables people to reach out, talk about how they are feeling and to look out for each other. Here are some suggested approaches that you might consider.

- Organise monthly pre and post season training sessions or social gatherings.
- Keep the lines of communication open through newsletters or social media posts and provide positive messages about self-care and looking out for others. See [Fact Sheet 6](#) for some suggested messaging.
- Check in with individual members who may be more vulnerable to see how they are going.

- Arrange for the committee members, coaches and any other interested members to undertake mental health awareness and suicide prevention training.
- Get to know your local service providers and what sort of support they offer.
- Get on board with national events such as RUOK Day to encourage and create an environment of openness and help-seeking.

Looking after yourself

It is important that you also consider your own wellbeing during this time when you are busy looking out for everyone else. Some useful tips about self-care can be found on the Everymind webpage.

everymind.org.au/need-help/self-care

Feedback about this guide

NWMPHN is committed to providing the community with information that is both accurate and useful. If you have feedback about how this guide can be improved, please provide this via our feedback form which can be located on our nwmpn.org.au website.

nwmpn.org.au/feedback





**North Western Melbourne
Primary Health Network (NWMPHN)**

**For more information about this resource
or to speak to one of our Suicide Prevention team
call (03) 9347 1188**

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How to talk about suicide

Avoid simplistic explanations about suicide

Conversations about suicide should try to outline the complexity of the issue. Suicide is complex behaviour caused by a range of factors and is rarely the result of a single event or problem.

- People will often want answers about why a suicide has occurred which can lead to blaming a certain person or event. Try not to reinforce these views.
- Discussions should be framed in relation to the many things that may increase someone's risk and the things that might protect someone from suicidal behaviour.
- When having conversations about a suicide, find a balance between ensuring that suicide is not being kept a secret and ensuring that the way it is talked about does not present suicide as a way of dealing with problems.
- Avoid: describing suicide as 'common' among particular age groups or communities.
- Avoid explanations that suggest the person is 'in a better place' or the person is 'free from pain and suffering'.

Consider the language used

While it is most important to use words and language that engages the audience you are talking to, certain words can hurt people bereaved by suicide or harm people vulnerable to suicidal thinking.

Here are some specific suggestions.

Do say	Don't say	Why?
'non-fatal' or 'made an attempt on his/her life'	'unsuccessful suicide'	So as to not normalise or glamorise a suicide attempt
'took their own life' or 'ended their own life'	'successful suicide'	So as to not present suicide as a desired outcome
'dies by suicide' or 'deaths by suicide'	'committed suicide' or 'commit suicide'	So as to avoid the association between suicide and 'crime' or 'sin'
'concerning rates of suicide' or 'number of deaths'	'suicide epidemic'	To avoid sensationalism and inaccuracy

Limit discussion about the method of suicide

Talking in graphic detail about the method of suicide can create images that are upsetting and can increase the risk of someone copying the behaviour.

Conversations that include the details about the method or location of a suicide should be avoided, especially where the conversation is occurring in a group or as part of public conversation.

If someone asks about the method of suicide or cause of death, you could respond by saying: 'Some people can be affected by hearing a description of what happened, so I'd prefer not to go into detail at this stage'. For more information visit the Life in Mind website.

lifeinmindaustralia.com.au/communities



Sample communication messages

If you are planning on drafting a communication with club members or community the following is an example message to follow:

I am writing to you about the tragic death of (insert name). Our thoughts go out to their family and friends.

or

I'm writing to you with some sad news that (Insert Name) has died

This will be a very difficult time for [insert name] family and close friends and for all of us who knew them.

I want to make sure that everyone in our sporting/local community is aware of the support available to them, if needed. Shock, sadness and anger are entirely normal responses following a sudden death, and what has happened will affect everyone in different ways and at different times. If you have been affected, it is important that you talk to your friends and families about how you are feeling. In addition, you can access support and counselling through:

List local services

Help is available around the clock, please remember the following services are available out of normal hours.

Lifeline: 24-hour national telephone crisis counselling service | 13 11 14 | text 0477 13 11 14 between 6pm to midnight

Kids helpline: Free confidential 24-hour telephone and online counselling service for young people aged 5 to 25 years | 1800 55 1800

Suicide call back service: 24-hour national telephone counselling service for people 18 years and over who are suicidal or bereaved by suicide | 1300 659 467

I am sure that you will look out for each other during this difficult time, but if you are concerned about the welfare of anybody following this news, then please reach out to them and encourage them to seek help from family or from one of the local or national supports listed above.



Monitoring Social Media

Social media posts that cause concern and how to respond

If you do identify someone who you are concerned about and you know that person you could reach out to them confidentially.

If you don't know the person, the following is a sample response to social media posts that cause concern:

If you or someone you know is feeling desperate, help is always available. The best way to honour (person's name) is to seek help for you or someone you know is struggling. If you feel lousy, desperate or alone please get in touch.

Lifeline: 24-hour national telephone crisis counselling service – 13 11 14 | text 0477 13 11 14 between 6 pm to midnight

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Harmful social media posts and how to respond

You may find that some people post, share or comment in a way that is unsafe or harmful. Here are some examples of harmful content:

- Bullying
- Comments that include an invasion of privacy
- Graphic descriptions of suicide
- Graphic images of suicide
- Means or methods of suicide
- Plans of suicide (e.g. when or how)
- Spamming or repetitive content
- Statements that encourage people to take their own life
- Statements that appear to deliberately seek to trigger difficult or distressing emotions in other people
- Statements that include suicide pacts or suicide partners
- Statements that place blame or make others feel responsible for another person's safety
- Statements that provide vulnerable people information about how to end their life
- Suicide notes or goodbye notes
- Swearing
- Trolling
- Verbal attacks

If you do come across unsafe or harmful responses to your post, you should avoid arguing with other users in the comments section.

Instead you could consider doing the following:

- Hide the user's post, if the platform allows it.
- If you know the person making the comment or posting the material, consider talking with them directly about potential harm.
- Report unsafe content to the relevant social media suicide prevention help centre, if available.

Public Health England – Identifying and responding to suicide clusters – A practice resource, page 38, 2019, www.gov.uk/government/publications/suicide-prevention-identifying-and-responding-to-suicide-clusters

Orygen, #chatsafe: A young person's guide for communicating safely online about suicide, 2020, www.orygen.org.au/Training/Resources/Self-harm-and-suicide-prevention/Guidelines/chatsafe-A-young-person-s-guide-for-communicatin



What people might experience following the suspected suicide of a team member, friend or family member

The impact upon individual club members will vary significantly and will be influenced by their relationship with the deceased person and their family, but also their own personal life experiences.

When the death is sudden, unexpected, and potentially traumatic, as in a death by suicide, the grief process can become complicated by blame, guilt, shame, and anger. You may see these feelings play out in an individual's behaviour and in the way that the team functions together.

Grief is a healthy part of the healing process and shouldn't be viewed as poor coping.

Some of the initial feelings of grief after a suicide may include:

- shock, numbness and disbelief that there was no chance to say goodbye
- strong feelings of anger or confusion
- isolation and emotional withdrawal from others
- feelings of depression, sadness, loneliness, and tearfulness
- loss of interest in things they usually enjoy
- helplessness
- restlessness
- difficulty with everyday routines
- change in appetite
- sleeping, increased tiredness or insomnia
- tension headaches
- shame, guilt, failure and regret that they did not prevent the suicide
- regret about things they did or did not do while the person was alive.

In time:

- The strong feelings will start to reduce.
- The loss will not always be uppermost in their minds.

If you are concerned about a member of the team, encourage them to seek help by either contacting one of the listed services in this guide or seeing their GP.



Where to go for help

Lifeline

24-hour national telephone crisis counselling service and text message service call 13 11 14.

For online counselling, further information and service finder, visit the lifeline website.

lifeline.org.au | 13 11 14

Men's Line

Telephone and online support, information and referral service to help men with relationship and other problems.

mensline.org.au | 1300 789 978

Kids Helpline

Free confidential 24-hour telephone and online counselling service for young people aged 5–25 years. Phone or visit the kids help line webpages.

- kidshelpline.com.au | 1800 55 1800
- for kids kidshelpline.com.au/kids
- for teenagers and young adults kidshelpline.com.au/teens

Switchboard

Switchboard Victoria provides peer-driven support services for the lesbian, gay, bisexual, transgender and gender diverse, intersex, queer and asexual (LGBTIQ+) people, their families, allies and communities. Visit the Switchboard website.

switchboard.org.au

QLife

Provides nation-wide, early intervention, peer supported telephone and web-based service. QLife is supported by Switchboard.

Phone or for webchat visit the Switchboard website.

switchboard.org.au | 1800 184 527

Suicide Call Back Service

24-hour national telephone counselling service for people 18 years and over who are suicidal or bereaved by suicide. Phone or for online counselling services and further information visit the Suicide Call Back Service website.

suicidecallbackservice.org.au | 1300 659 467

Thirrili – National Indigenous Critical Response Service (NICRS)

The NICRS supports individuals, families and communities affected by suicide or other significant trauma. A Critical Response Support Advocate can be contacted 24/7.

thirrili.com.au/nicrs | 1800 805 801

Griefline

Provides counselling and support to people experiencing loss and grief at any stage in life.

1300 845 745

Safe Steps

Free professional support services for women and children experiencing violence and abuse from a partner or ex-partner, another family member or someone close to them.

safesteps.org.au | 1800 015 18



Where to go for help

Support After Suicide

Provides support to people who are bereaved by suicide, including friends, family and young people. They offer counselling, group support and an online community website.

Phone or visit Jesuit Social Services, and search 'Support After Suicide'.

jss.org.au | (03) 9421 7640

General Practice

Your GP is there to assist you with all your health needs including mental health and is able to refer you to a range of professional mental health supports and treatment if you have concerns about your mental health or that of someone you care for. Visit the website to find a general practice near you.

healthdirect.gov.au

Your local Community Health Service

Community health services provide free and low-cost health services including counselling.

IPC Health

ipchealth.com.au

106 Station Street, Deer Park | 9219 7142

330 Queens Street, Altona Meadows | 8368 3000

117–129 Warringa Crescent,
Hoppers Crossing | 8734 1400

cohealth

www.cohealth.org.au

107–139 Churchill Avenue, Braybrook | 9448 5507

53 Victoria Street, Central City | 9448 5536

365 Hoddle Street, Collingwood | 9448 5528

Djerriwarrh Health Services

www.djhs.org.au

228–232 Caroline Springs Boulevard,
Caroline Springs | 9361 9300

195–209 Barries Road, Melton | 9747 7600

35 Grant St, Bacchus Marsh | 5367 9674

Psychiatric Crisis Assessment and Treatment Team

Provides you with immediate telephone access to an experienced mental health clinician, 4 hours a day, 7 days a week.

Emergency numbers for your Local Government Area

- Hume and Moreland | 1300 874 243
- Mooney Valley and City of Melbourne | 1300 874 243
- Melton and Brimbank | 1300 874 243
- Wyndham, Hodson Bay and Maribyrnong | 1300 657 259

CAREinMIND™ Wellbeing Support Service

A free 24/7 online and phone counselling to support people who are experiencing the pressures and stresses of everyday life for people who live, work or study in Macedon Ranges, north, central and western Melbourne.

No referral necessary.

careinmind.com.au | 1300 096 269



Positive messages in sport

You can use these messages in your social message posts, when you need them.

Is self-care part of your daily routine? #selfcare

Self-care should be something we consider every day. Taking a break from our busy lives is important to recharge both body and mind. Go for a swim, walk the dog, practice yoga or meditate.

Our tip: start small and be consistent.

If you need additional support call Lifeline on 13 11 14.

Our words and actions can impact others #bekind

Being unkind to others can negatively affect their mental health. With just a few words we can make or break someone's day.

Be mindful of the language you use and how you treat others, as we don't know what someone has gone through that hour, week or day.

Choose kindness. If you need additional support, call Lifeline on 13 11 14.

There's no harm in asking #listen

If someone doesn't seem themselves, don't be afraid to ask the question. 'Are you okay?' 'I'm here for you' and 'Is there anything I can do to help?' are all great statements to open up the conversation.

Try to listen twice as much as you talk so the other person has a chance to open up.

If you need additional support, call Lifeline on 13 11 14.

Practice mindfulness #trainyourmind

Mindfulness is about learning to be present. It's a skill we should all practice. Mindfulness has been proven to reduce stress and lower anxiety levels in just a few minutes. Give box breathing a try: close your eyes, inhale for four counts, hold your breath for four, and then exhale for four counts. Repeat five times.

If you need additional support, call Lifeline on 13 11 14.

Mental and physical health go hand-in-hand #beyourbest

Eating well and being active is important in achieving a good sporting performance. But it's important to know that your mental health is just as important as your physical health.

Learning skills to be resilient and maintain positive mental health will help you perform at your best.

If you need additional support, call Lifeline on 13 11 14.

Have you been there for someone this week? #support

Have you noticed any of your teammates are not themselves? Could they use someone to listen or a shoulder to lean on?

As a teammate you're in a good position to notice any signs or symptoms that someone might not be ok. Have the conversation and link them to the right help.

If you need additional support, call Lifeline on 13 11 14.



Mental Health and Suicide Prevention Training

There is a range of mental health literacy and suicide prevention training options available in Australia. The following is a selection, but not exhaustive, list of publicly available training.

Mental Health First Aid Training

Each year **1 in 5 Australians** will experience a mental illness. Mental Health First Aid (MHFA) teaches people the skills to help someone they're concerned about. MHFA offers a range of programs including programs which target specific groups such as young people, adults, older persons and Aboriginal and Torres Strait Islander people. MHFA also offer a range of specialised programs including Suicidal Person First Aid.

Visit the MHFA website for more information about the programs and how to access training.

mhfa.com.au

LivingWorks Australia

LivingWorks Australia offers a range of suicide prevention training for community and professional helpers. Introductory training is available online through the START program or via face to face through safeTALK. There is also a more comprehensive program called – Applied Suicide Intervention Skills Training (ASIST).

Visit the LivingWorks website for more information about the programs and how to access training.

livingworks.com.au

Question Persuade Refer (QPR)

QPR is an online suicide prevention training program for community members. Training can be accessed for free at the North Western Melbourne Primary Health Network's suicideprevention-qpr webpage.

nwmpnhn.org.au/place-based-suicide-prevention/suicideprevention-qpr/

Wesley LifeForce

Wesley LifeForce offer suicide prevention training for community members and workplaces. Visit the Wesley LifeForce suicide prevention training webpage for more information about the training options available and how find or arrange a course near you.

wesleymission.org.au/find-a-service/mental-health-and-hospitals/suicide-prevention/training/