

# The suicide of a Co-Worker



Suicide is a tragic and shattering reality which not only brings a life to an untimely end but also has far-reaching effects on family, friends, colleagues, and communities. The workplace is one such community where people can spend up to half their waking hours, with many forming meaningful relationships, bonds, and camaraderie with their colleagues.

Suicide is different. Employees who wouldn't think of holding themselves accountable for a co-worker's accidental automobile death may torture themselves with guilt over not having done enough to prevent a suicidal death. On top of all the grief that people experience after a "conventional" death, many must cope with guilt. The confusion and emotional turmoil are, in many ways, unique those who have lost someone to suicide.

Managers may feel that they should have been in better touch with their subordinates, that there was something suspect in their management style (mainly if there has been a problematic relationship or recent disciplinary issues), or feel overly responsible for creating job stressors.

Given the social stigma associated with suicide, those left behind are often unable to cope with their loss and grief using conventional support systems and are "forced into a privatized and individualistic mode of grieving," making the healing process even more difficult. No one, no institution, or part of our society, is free from the stigma associated with suicide and mental illness.

---

## The Loss of a Co-Worker

You may be surprised by the strength of your reactions, or on the other hand, you may be concerned that you have a minimal response. However, you are experiencing your grief, remember not to judge your reactions and try not to judge the way your colleagues are reacting. Everyone will respond differently. Grief is not limited to certain people, and everyone has the right to grieve. There is no specific set of emotional or physical reactions that apply to everyone.

---

## Why Do People Take Their Lives?

The question of why a specific person would choose to die by suicide is something that may not have an answer. Some explanations may help to understand someone's action, but, in most cases, only the person who is no longer with us has the answers.

Even though there is clear scientific data that indicates irrefutably that a mental illness exists with most mental disorders, many people still stigmatize others because they hold on to the misguided beliefs that people with mental disorders are weak or lack will power.

Suicide is a deeply personal act that is the responsibility of the person who took his/her own life. The person who died by suicide may or may not have shared their thoughts and feelings with others. Most suicidal people desperately want to live. They are often just unable to see alternatives to their problems.



*Sometimes the people who need help the most are standing right beside us...*

[American Association of Suicidology](#)

[Alliance of Hope for Suicide Loss Survivors](#)

[Understanding Suicide Loss](#)

[We R Native – Resources for Indian Country](#)

[American Foundation for Suicide Prevention](#)

[Support for Military Veteran Suicide Loss Survivors](#)

[Firefighter Behavioral Health Alliance](#)

### **A Word About Contagion**

Having your own suicidal thoughts is common. It does not mean you will act on them. In the aftermath of suicide, some vulnerable individuals may be at risk of responding to the suicide by attempting their own suicide. It is known as the [contagion](#) effect. In other words, a person's death by suicide can have an impact on someone already vulnerable to suicide themselves. It may increase their risk of copy-cat behavior. Maintain situational awareness and any signs that others may be showing that they are struggling.

---

## Common Reactions

With suicide, the natural mourning process is supercharged with emotions of shock, guilt, and possibly anger. Sometimes suicide is not a surprise. Suicide adds a dimension of "unfinished emotional business" to the relationship that has ended.

### **Confusion**

Suicide is so sudden that there is confusion as to what has happened. Uncertainty and confusion occur when it may be unclear whether the suicide was intentional or not. Questions about what happened and how it happened remain and survivors may struggle with reconciling the person they knew and the actions they took. Confusion is particularly significant when the person had recently appeared to be feeling better or more hopeful.

### **Shame**

One of the most prominent feelings is that of shame. There is such stigma around suicide in our society that suicide loss survivors may not feel comfortable or able to acknowledge their loved one took his/her own life. They may also worry the suicide may imply to others they were a horrible partner/family member/friend. It may manifest in pressure to keep the death a secret or to pretend as if it had never happened. It can cause severe emotional strain, mainly if there is conflict about keeping the secret.

### **Guilt**

Survivors often struggle with the reasons why the suicide occurred and whether they should have done something to prevent the suicide or help their loved one. Feelings of guilt typically ensue if the survivor believes their loved one's suicide could have been prevented. They may feel a powerful sense of responsibility, that the death was somehow their fault. At times, especially if the loved one had a longstanding mental or psychiatric disorder, the survivor may experience relief.

### **Anger**

Suicide loss survivors often become angry with the person who died, wondering, "Why? Why did you do this to me?" Underlying this sense of anger may be feelings of rejection and inadequacy (e.g., "I wasn't enough to live for.") and guilt at being angry. There may well be anger at God or oneself.

### **Blame**

It is not uncommon to search for blame in others, especially if suicide loss survivors are feeling their own sense of personal responsibility. Finding someone to blame also enables suicide loss survivors to direct anger toward the person who died (anger they may feel is inappropriate or wrong to have) to someone else.

### **Trauma**

It is not uncommon to have disturbing and graphic images from a loved one's suicide play in one's head. If the suicide loss survivor witnessed the suicide, the images might play over and over in his/her mind. If the survivor did not see the suicide, his/her imagined fantasies of the event may be even more disturbing.

### **Disconnection**

When we lose a loved one to disease or an accident, it is easier to retain happy memories of them. We know that if they could choose, they would still be here with us. But it's not as easy for the suicide loss survivor. Because our loved one seems to have made a choice that is devastating to us, we feel disconnected and "divorced" from their memory. We are in a state of conflict with them, and we may feel we are left to resolve that conflict alone.

## How to Cope with Suicide

There is no "right way" to grieve your loss. Grief is intensely personal and individual. You may be experiencing a wide range of powerful emotions, no emotions at all, or somewhere in between. The following guidelines may be helpful as you deal in your unique way.

- Most people struggle with what to tell other people. Do what feels right for you. Many suicide loss survivors find it helpful only to acknowledge their loved one died by suicide. The silence that may surround suicide affects the conversation about how to address the issue — the discussion with suicide loss survivors can ease their pain and may prevent additional suicides.
- Keeping in contact with others is essential, even if it is tough. Friends and family may feel that they don't know what to say or how to help. It may be important to share with them as much as you can about your thoughts and feelings. If you have a sense of what you need from them, ask for it. Joining a support group with other suicide loss survivors can be very helpful. Counseling is another option.
- Take the tasks of daily living at your own pace. You may feel unusually exhausted, nervous, or restless. Physical reactions to grief, like headaches and loss of appetite, are common.
- Expect setbacks. Grieving is a process. So is healing. Try to be kind to yourself if you feel like you're not "getting over it" or if you think you're not "dealing" well with your loss. If you're in it's also okay not to know what you need or not be able to articulate it to yourself or others.
- [Avoid stigmatism terminology](#). We need to talk more about suicide and make sure we talk about it in a way that is helpful and healthy. The word 'commit' comes from a time when suicide was treated as a crime. As we learn more about suicide, our language has evolved. The more we can use language that accurately and sensitively describes suicide, the more we encourage a healthy and respectful way to talk about suicide. Died by suicide, ended his or her life rather than committed suicide is an example. Completed suicide rather than was "successful at suicide" is another example.

---

*"Compassion is not a relationship between the **healer and the wounded**. It's a relationship between equals. Only when we know our own darkness well can we be present with the darkness of others. Compassion becomes real when we recognize our shared humanity." - Pema Chodron*

---



The Bureau of Indian Affairs produced this document in support of the National Interagency Critical Incident Stress Management Program. It can be found at: [Suicide of a Co-Worker](#)