

SELF-CARE FOR PROVIDERS FOLLOWING A SUICIDE LOSS

The suicide death of a client can be a profound professional and personal loss. Providers face the additional burden of continuing to serve in a clinical role and provide care while dealing with grief. Taking care of yourself after a suicide loss

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is part of sustaining a safe, compassionate,
and ethical practice.*

is part of sustaining a safe, compassionate, and ethical practice. It's also important to remember that suicide loss is an occupational hazard in clinical professions, and it does not reflect a lack of skill or professional competence.

Common Reactions Following a Client Suicide

Reactions can vary by person, relationship with the deceased, clinical role, work setting, prior losses, and colleagues' or leadership's responses. Providers may experience effects in the following areas:

- **Emotional:** shock, grief, sadness, anger, anxiety, depression, numbness, helplessness, shame, or guilt
- **Cognitive:** replaying sessions, questioning decisions, searching for missed signs, intrusive thoughts, or "what if" thinking, self-blame
- **Physical:** fatigue, changes in appetite, sleep disruption, headaches, muscle tension, or restlessness
- **Professional:** decreased professional confidence, reluctance to treat clients at risk for suicide, changes to clinical practice (such as increased documentation, increased requests for consultation, or advocacy for higher-level care), or fear of blame, litigation, or peer judgment
- **Relational:** withdrawal from colleagues, difficulty talking with family or friends about the loss, reluctance to seek help, or feeling isolated because of confidentiality limits

These reactions are common. They do not mean that you are weak, unprofessional, or unsuited to mental health work.

How to Care for Yourself Following a Loss *Honor what you need*

There is no single "right" way to respond. Some providers need time away from work; others feel steadier maintaining a familiar routine. Consider what will help you function most effectively and be aware of changing needs in the days and weeks following the loss.

Suggested Strategies

- Tend to your physical needs, including maintaining consistent exercise, meals, and sleep.
- Be mindful of maladaptive efforts to cope, such as substance use or avoidance, as well as behavioral extremes, like overworking or oversleeping.
- Stay connected with others and avoid isolating yourself.
- Ask for help when needed from family, friends, and peers.
- Practice self-compassion in difficult days, weeks, or months, acknowledging the realities of human and professional limitations.

Continued

When to Seek Professional Help

Seek additional support if you notice:

- Persistent inability to sleep, eat, concentrate, or function
- Becoming less effective in your professional role or feeling consistently overwhelmed or anxious in clinical interactions
- Intrusive images, nightmares, panic, or persistent physiological arousal
- Avoidance of or lack of interest in usual activities
- Intense guilt, shame, hopelessness, or fear that does not ease with time and support
- Increased alcohol or other substance use
- Withdrawal from support
- Thoughts of self-harm or suicide

If you feel you might be in immediate danger or may harm yourself, call or text **988** in the United States to reach the Suicide & Crisis Lifeline, contact emergency services, or go to the nearest emergency department.

Resources

- **Coalition of Clinician Survivors** provides support, education, resources, consultation, personal accounts, and postvention resources for clinicians affected by suicide loss.
- **Suicide Prevention Resource Center** offers postvention resources, including materials for individual practitioners and agencies responding to client suicide.
- **U.S. Department of Veterans Affairs (VA), Uniting for Suicide Postvention** offers provider-focused materials on suicide loss, postvention, and consultation resources.
- **988 Suicide & Crisis Lifeline** is a 24/7 hotline for mental health support.
 - » Press 1 for Veterans.
 - » Press 2 for Spanish speakers.