

A pair of hands, one on the left and one on the right, are shown from the wrist down, cupping a small, vibrant green plant with three leaves and a small amount of dark soil. The background is a solid, light purple color. The hands are positioned centrally at the top of the page.

Guidelines for Priests on Pastoral  
Response to Suicide

*Faith Hope Love*

## 1. INTRODUCTION

Sadly the tragedy of suicide occurs in every parish at one time or another. Approximately one in every 38 male and one in every 143 female deaths in Ireland is by suicide<sup>1</sup>. The task of trying to support those affected by suicide is always challenging. The role of the priest is to bring the message of the Good News of our Salvation in Christ to the people, through the Liturgy and funeral mass, and in addition, along with others, to try to support the family of the person who has died. These roles can be very emotionally demanding on priests and it is important that all priests are aware of the need for support for themselves at these difficult times. This can be available through their brother priests or check out local counselling services on [www.nosp.ie](http://www.nosp.ie). They may be able to offer support to individual priests when requested.

Different challenges arise at different stages after the death. These can occur at any time from the possibility that you might have to attend the scene of a suicide, to occasionally having to break the bad news to those affected by the death, to interfacing with the family and friends of the deceased and managing the Liturgy for the funeral. This guideline is intended to assist priests at these difficult times and is based on wide consultation. An accompanying shorter “pocket leaflet” is available to supplement this longer document.

While it is difficult to be prescriptive or know exactly what is the best response in a wide variety of different settings and circumstances, hopefully these guidelines will at least prompt some questions, thoughts and due consideration and in some instances will be based on the recommendations of those we consulted.

## 2. SELF-CARE

It is thought that many priests may have a belief that they **should** be able to cope with “just about any situation” that arises in their parishes. For a priest to declare that he may not be able to cope with a suicide at a particular time might be viewed somehow as a sign of weakness. However, there are times in everybody’s life that are particularly stressful and times when we may be emotionally or even physically exhausted. This might occur at the time of a close bereavement of our own, a time of illness or any other difficult emotional issues in our lives. It is acknowledged that with the reducing number of priests available, combined with the geographic dispersal, the options for getting help in such instances may be very limited or

unrealistic. Nonetheless, priests should consider whether dealing with a suicide at a particular time may unduly affect their own wellbeing and be prepared to look for support or help where at all possible.

### **3. TRYING TO DO THE “RIGHT THING”**

A community that experiences suicide is often deeply shocked and people may look to the priest for both support and guidance. The funeral of a person who dies by suicide is a very public occasion and within and around the Liturgy the priest has a very important public role. What he says and does can be an enormous influence within the parish and indeed beyond. This brings its own pressure to try to do and say “the right thing”. Experience with families affected by suicide tells us that they remember clearly if something occurred around the Liturgy that upset them. If nothing unduly upsetting occurs at this time and even when they feel they are not that “tuned in” to what is going on around them they will still get to hear of the contents of homilies etc over the following days and weeks.

Bereavement following a suicide is often more intense and complex than other forms of bereavement. We can assist this journey for families or we may make it worse by our approach, attitude, words and actions. At the time of any death emotions often run very high. This is even more pronounced when a suicide occurs. Different members of families have various ways of coping and sometimes clash with each other and those around them. In their grief they may also lash out verbally at anybody around them. They may be very critical of those in the vicinity of the death. This can include doctors, hospitals, mental health services, other family members and possibly even the priest. Some of those bereaved may be very angry at God for “allowing this to happen” and thus the priest can get the brunt of this emotion.

It is really important to recognise that you are human and that you may be criticised no matter what you do in some circumstances. There is no definitive way to predict all the words and actions that might potentially offend any member of the family or community at this time. So an important consideration is to know that even with the best intentions in the world you may not “get it right” in the eyes of those around you. Try not to take any such criticism personally.

#### **4. CONSIDER WHO IS AFFECTED MOST**

It is important to recognise that sometimes the people who are emotionally closest to those who die by suicide may be outside of their immediately identifiable family. It may be a partner or ex-partner or work colleague and occasionally such a person may not be “approved of” by the family and yet may need pastoral care too.

#### **5. IS IT SUICIDE?**

Only the outcome of an inquest can determine whether the death can be officially referred to as suicide. Sometimes, even when there is insufficient evidence to bring about a verdict of suicide at the inquest the family may accept that it was suicide. On the other hand when it is very clear that it is suicide some or all of the family may still reject this belief. From a priest’s perspective the belief of the family is critical to how they support the family or engage with the funeral liturgy thereafter. If all members of the family are accepting that it is suicide then this can be addressed very directly. However, if a family is divided on this question or reject this belief then a priest should respect their views.

#### **6. ATTITUDES TO SUICIDE**

Increasingly most people accept that a death by suicide occurs when a person feels overwhelmed by some difficulty or beliefs whereby they feel that they don’t have any other choice but to end their lives. Clearly there is always an alternative and suicide can never be accepted as an action that resolves any of life’s problems or stresses. Many people who die by suicide have a history of mental health difficulties or may act impulsively after becoming intoxicated by alcohol or drugs. For others one of the precipitating issues might be a failed or difficult relationship, financial worries, health concerns or there may be no apparent reason available. It is thought that the causes of suicide are complex and often multifaceted. The common question of “Why?” pursues many individuals and families for a long time and is often never resolved. This is particularly so when there was no obvious history of any distress of the person who has died and no intelligible suicide note was left. Suicide is now typically viewed with compassion and communities are very supportive of family and friends of the deceased. Suicide clearly carries less stigma than

previously. Some would argue that the loss of stigma makes it more prevalent but the statistics suggest that there has not been any dramatic increase overall, though individual years can vary a lot. For information on current statistics please refer to [www.cso.ie](http://www.cso.ie)

Talking about suicide does not result in more suicide deaths although “copycat” suicides do occur. When we talk about suicide publicly our conversation should ideally emphasise how those who are emotionally distressed should avail of support services such as their GP or other therapies, such as counselling, and also that information on how to access these services is made readily available.

However, as mentioned, the way we talk about suicide can help prevent other people from considering ending their lives in a “copycat” fashion, e.g., it is recommended to avoid any reference to the actual means of suicide.

Those who are acutely grieving the death of a loved one through suicide are themselves at higher risk of mental health difficulties and sometimes even self-harm. Support of those who are bereaved by suicide is called “postvention” and it is widely accepted that suicide postvention support is considered to be part of suicide prevention.

However, many families feel a greater stigma attaches to the avoidance of the use of the word “suicide” when they believe it is clearly suicide. Priests should give consideration to publicly using the word “suicide” at least once in their liturgy when it is accepted by the family and that the family know the context in which it is to be said.

## **7. WHAT IF THE PERSON WHO HAS DIED OR THEIR FAMILY ARE NOT “PRACTISING CATHOLICS”?**

Most families who are not regular attendees at church services still want and value contact with the priest and a Catholic funeral liturgy for their loved one. An overarching principle of contact with any family following a suicide is to be open to such and provide them with the courtesy of asking them. While you may run the risk of being rebuffed it is still better to err on the side of making yourself available rather than presuming they wouldn't want your contact.

## 8. ATTENDING THE SCENE OF A SUICIDE

The scene of a suicide can be anywhere. It can vary from the family home, to adjacent buildings or to a geographically remote location. Depending on the location of the scene your presence may be requested by a family member or the Gardaí. The request is usually based on many families desire that the deceased is given whatever Catholic rite as may be appropriate or at least that prayers are said. Where the body is still not identified the Gardaí usually initiate the contact. At the end of this booklet and on the accompanying leaflet there is a **suggested prayer** for this specific situation. Families can be very upset if a priest is requested at the scene and doesn't come at all or if he doesn't come as quickly as possible.

If family members, or those close to the deceased, are present when you are there then your role can also include comforting the bereaved. The main principle here is that there is no "right thing" to say and that you're respectful, often silent presence is usually found to be the most helpful. Ask if there is anything they may like you to do. Use words sparingly and try to avoid easy answers. Phrases such as "he/she is at peace" or "they are in heaven now" may be unhelpful to the family at this particular moment in time. Judge how long is sensible for you to remain in the home and be guided by asking the family directly. Before you leave ask if it would be acceptable for you to return again and when this might be suitable for you and for them. Encourage the family to contact you if they would like to do so and leave your contact details.

## 9. SELF-CARE REGARDING THE SCENE OF A SUICIDE

When you are going to attend the scene, while the body is still present, you might consider enquiring about the means of death before you arrive. Some scenes can be more disturbing than others and please have regard to your own welfare and personal sensitivities in attending such scenes. If you know the deceased or his/her family this can make it more difficult for you. You may consider discretely avoiding visual contact with the deceased where practicable. Alternately you may choose to attend the scene only after the remains are placed in a body bag or coffin. Consider also whether you would like to have another person accompany you to the scene of the suicide and possibly drive you there and back and even stay to chat with you when you return home.

However, only another fellow priest should attend the actual scene with you. When you return home don't be reluctant to ask for some support for yourself. It can be helpful to talk to a colleague. If you wish, contact counselling services in your area.

## 10. IF YOU HAVE TO BREAK THE NEWS AND FIRST MEETING WITH THE FAMILY

Sometimes a priest and a Garda together may have to inform a family of a suicide death, although occasionally a priest on his own may have to do this. This may be particularly so if the priest knows the family whereas some other first responders to the suicide may not be known, or may be less likely to be acceptable, to the family. If it falls to you to give the bad news to family member(s) it is essential where at all possible that this is given in person and not by telephone. Ensure that you are absolutely certain of the identity of the person who has died and the house to which you are calling. If you are delivering this bad news to a family consider the following;

### **Who should ideally be present when the news is delivered?**

Has this person(s) other supports available to them at the time? If necessary delay giving the news if there is no support for the person(s) receiving the bad news. That being said if there are non-family members around remember that some families would not want to have others in the same room when the news is delivered, (though they might be immediately available otherwise). Regrettably bad news travels fast and can break in the community in a very short space of time, such as through social media, and so this might hasten the need to inform the family.

Start by telling the person(s) that you have some very difficult news to tell them. Thereafter use the word "died" or "has died" or "is dead".

**Don't** use words like "gone", "passed away", "gone to his/her eternal reward" or similar sentiments. Rarely do families respond well to this time being used as a religious or spiritual or "preaching" occasion.

People receiving this tragic news are entitled to know information that is accurate and truthful. Do not try to make it sound softer than it really is **but it is recommended** that you would avoid graphic detail. Don't give any more information than may be requested. People are entitled to know as much or as little as you know as long as you are accurate. It is sensible to say you don't know the answers to

certain questions you might be asked when that is the case. Acknowledge the shock and other emotions you think you observe in the receiving of the bad news. You don't need to fill the space of any silences with words and often the least you might say the better. If a person is alone when receiving the news then ask is there anybody that you might contact to be with them. Ask if there is anybody they need to contact and who might do this and if no alternatives are available you might need to do this on their behalf. If you are asked how the person died be truthful as far as you know. At this stage, and depending on the individual circumstances and evidence, it may be wise to use words like "**may** have taken his/her own life". Be careful not to use the word "suicide" or "taken his/her own life" unless you are certain of this. Sometimes a suicide verdict is not given by a Coroner, for example, if a person has drowned and has not left a suicide note, even where there is a history perhaps of previous self-harm attempts or an ongoing high risk mental health problem. Similarly gunshot or overdoses may result in an open verdict if it can't be shown to be deliberate rather than accidental.

Again consider how long you might stay with the family. Ask if they would like you to stay or to go. Ask if they would like you to say a prayer or not and if there is anything else they may find helpful. Ask if it would be ok if you called again and when this might suit them and you.

## 11. SUICIDE BEREAVEMENT SUPPORT SERVICES AVAILABLE LOCALLY

If, at any time, you get an appropriate opportunity to mention that there are suicide bereavement services available then please do so. These services provide professional support to individuals and families.

Check **www.nosp.ie** for local information on counselling and bereavement services. Contact details for Resource Officers for Suicide Prevention are also available on the website.

## 12. ARRANGING THE FUNERAL

Try to make contact with the funeral director as soon as you can. Having such preliminary discussions can be useful so that the funeral fits in with other parish arrangements. It is often considered worthwhile not to have the funeral occur too quickly as this reduces time for people to try to adjust to the shock. It gives more time to try to get the details of the funeral liturgy organised in as measured a way as possible. Keep



in touch with the family often. Consider making short and frequent calls rather than longer ones. Be guided by what the family want.

Ideally meet all the family by arrangement to talk about the funeral details. Doing this at, or just after, the time of the removal can be too rushed.

### **13. MORE DETAILED MEETING WITH THE FAMILY AND FUNERAL ARRANGEMENTS**

When the family have had time to absorb the immediate shocking aftermath of the death of their loved one you should ideally try to meet all the family together again to discuss some details of the funeral.

As previously mentioned the unique and primary role that the priest has with the family is in relation to the Liturgy and the messages of the Gospel communicated therein. This cannot be separated, however, from a number of broader issues. It is sometimes difficult to reach a balance, and ideally a consensus, with the family concerning the details of the Liturgy. Ultimately the priest must take responsibility for making decisions about what is acceptable during the Liturgy and what is not. Nonetheless, in so far as reasonable, the priest should be attentive and sensitive to the wishes of the family within certain constraints. Consider discussing the following with the family in an order you believe to be appropriate: Ask whether they would be accepting of you using the word "suicide" at some stage during the liturgy. Generally when it is an obvious suicide death the wider community know this anyhow and, as already mentioned, avoiding using the word "suicide" may, in itself, be interpreted as adding to the stigma. Outline also, especially when it is the death of a younger person, that we all have a responsibility to try to prevent such deaths in the future and that what you say at a funeral liturgy must bear this in mind. A priest has a responsibility to the wider community/ congregation as well as to the family. Families are normally accepting of your concern that what you say may influence vulnerable people in the congregation. Families who experience a suicide are generally very positively focused on preventing any other suicide. Outline the broad content of your Homily to them and especially your message to people who need support at any time in their lives and encouraging them to access such and where to get it.

Tell them that you will need sight of any prayers or eulogies that might be used, in advance. Talk about the Prayers of the Faithful; ideally give them some idea of what might be included. Emphasise the responsibility that anybody delivering a eulogy has to the whole congregation and the community including the possibility that it might be reported in a local newspaper. Discuss the choice of music and try to influence that the music is not too emotive considering the level of distress that might be in the family and community. Check if they are bringing symbols of the deceased and what they are and if a commentary is going to be done. In some instances it might be worthwhile if you do the commentary yourself.

#### **14. KEY HOMILY MESSAGES**

The public words used by a priest during the funeral liturgy of somebody who died by suicide is likely to set the tone for the entire congregation and community. It is really important to prepare for the Homily as well as you can. Once more this is part of the unique role that the priest has during all funeral liturgies. It is recommended that you write the homily in advance or at least you are very clear about specific phrases and messages you want to communicate, such as;

- How our Faith gives us the message of Hope in eternal life, and the Love that God has for each of us.
- Acknowledge the magnitude of the loss of the person who has died.
- Talk about how those affected by the death may experience a very wide range of feelings, including; helplessness, sadness, guilt, blame and anger and that these feelings may change frequently even from hour to hour.
- Suicide is not the solution to any of life's problems. Sensitive try to emphasise the gift and goodness of life.
- The devastation that is left afterwards.
- Encourage those who are grieving to talk with each other over the coming weeks and months as they will have good days and bad days. Direct people who are in distress, at any time in their lives, to sources of support in their local area.

- Don't engage in speculation about the "whys" or "maybes".
- Encourage people to consider not using social networking sites at this time in referring to the person who has died as we have to be careful that posts on these sites can be misinterpreted and also can cause undue distress to other people.
- Death in the context of Scripture.
- God's compassion in understanding the struggles of our human nature.

## 15. REFERENCES

1. National Office for Suicide Prevention. *Suicide Prevention in the Community: A Practical Guide*. (2011). [http://www.hse.ie/eng/services/list/4/Mental\\_Health\\_Services/NOSP/Resources/suicidepreventioncommunity.pdf](http://www.hse.ie/eng/services/list/4/Mental_Health_Services/NOSP/Resources/suicidepreventioncommunity.pdf)

## 16. USEFUL READING

*"Suicide Prevention in the Community, A Practical Guide"*  
Health Service Executive (2011). This guide is available on the National Office for Suicide Prevention website: **[www.nosp.ie](http://www.nosp.ie)**

*"Support for those Bereaved by Suicide: Information Pack"*. (2016). Published by Family Life Services, The Family Centre, Chapel St., Castlebar.

*"When someone you Love Dies by Suicide: This is what Bereaved Mayo Families have to say"*. (2016). Published through the Family Advisory Group, The Family Centre, Chapel St., Castlebar.

Suicide Prevention & Emotional Wellbeing (Pastoral Guidelines and Training Directory for Churches) Produced by FLOURISH - A Churches Initiative on Suicide developed in Northern Ireland. (2015)

<http://www.wewillflourish.com/wp-content/uploads/2014/09/flourish-book-v6.pdf>

**Note:** Traditionally in Ireland we have used the phrase "*committed suicide*".

However, since suicide was decriminalised in 1993 this phrase is not accurate and examples of more acceptable phrases include; "*died by suicide*" or "*a suicide death*".

Also the phrase "*successful suicide*" which is sometimes used is now considered inappropriate as an acknowledgment that there is no "success" in suicide. Currently a more typical phrase such as "*a completed suicide*" is used instead.

# *A prayer for the Bereaved*

**Lord,  
In this darkness  
be my sight  
In this wounded fear  
My strength and healing  
Be, in this confusion  
All my understanding**

**See and take my steps for me  
Suffer all my loss for me  
Smile and heal my friends for me  
Strength without deserting me  
Kindness without ending**

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*These guidelines have been developed by The Working Group for Pastoral Care and Response to Families bereaved by Suicide with membership from The Council of Priests of the Archdiocese of Tuam, The Family Centre, Castlebar and Families bereaved by suicide.*



family centre, chapel street, castlebar



mayo  
suicide  
bereavement  
liaison  
service