



## Discussing traumatic events and suicide in public meetings<sup>1</sup>

Trauma Informed Care informs us about the impact of trauma on individuals and communities to provide predictable, consistent, safe and welcoming environments incorporating the voices of those with lived experiences. It is not uncommon for personal stories of trauma, such as suicide, abuse, systemic oppression, or other events, to be shared during meetings. Sharing personal experiences can impact the audience and the person sharing in ways that are healing, and in ways that may increase distress. Sharing personal experiences can motivate policy and system change and is best done in a manner that shares insights and minimizes trauma to listeners. These recommendations are offered as assistance for preparing, facilitating and responding in a meeting when sharing personal experiences that may cause distress and trauma, to reflect a trauma informed approach.

**How to talk about suicide:** Evidence-based recommendations for safe and effective messaging about

Basic guidelines for disclosing about suicide include:

1. Let participants know about help available locally, and encourage them to seek help if they need it. Make sure they know that the National Suicide Prevention Lifeline is available anytime, 24/7, 365 days per year at 1-800-273-TALK (8255).
2. Avoid discussing details of a suicide. It can increase risk of contagion and distress people who are at risk or who have attempted suicide.
3. Get permission in advance from those involved before any disclosure –from the person or from relative and significant others, regardless of age. Obtain their permission, including children, to share at a public meeting-- and acknowledge the risk that the story will be repeated.
4. Realize that everyone involved directly or indirectly with a suicide or attempt experiences trauma, including guilt and shame. Focus your discussion on what was helpful to you, and how a better-functioning system might have helped you. Be mindful to avoid statements that single out individuals or entities and could be perceived as blaming. Offering ideas and suggestions for improvement assists with problem solving for improved outcomes.

suicide suggest there are risks to vulnerable individuals and to those who are grieving, when suicide is disclosed. The following recommendations aim to reduce distress for the person disclosing and for meeting participants. Disclosure could lead to *contagion*, an increased risk that listeners could attempt suicide themselves, and it is particularly acute for youth.

**Meeting Procedures:** If you are facilitating a meeting where a **disclosure is planned**, it's important to provide a physically and emotionally safe environment that is predictable, consistent and transparent so that meeting members and guests can be as present and engaged as possible.

- Assess how the physical space conveys a safe and welcoming

environment. Is there enough space to move around or stand? Avoid arranging chairs so close together that it is hard to leave. Make sure the exit is clearly marked. Identify a place at the site

where individuals may go (e.g. hallway, restroom, a vacant meeting room, etc.) if they identify a need to take space and take care of themselves. Ensure this space is accessible for people with disabilities. Consider providing water, snacks or fidget toys. Facilitators can ease the group by communicating this information in advance.

- Let meeting participants know in advance of the meeting that suicide will be discussed to allow them to make an informed decision about attending or to arrange for self-care. Let them know they can leave at any time. Ask them to pay respectful attention and limit distractions – silence and put away phones, stop typing, etc.
- Provide the speaker with guidelines for safe disclosure. These can include:
  - ✓ Do share the purpose of your disclosure within the time allowed.
  - ✓ Please do not share specific details about the event. Do share your thoughts and feelings, but avoid blaming.
  - ✓ Please let us know if you need anything from listeners in the room.
  - ✓ Please respect the privacy of people involved in the disclosure, especially the individual who attempted or completed suicide. This is especially important for children or youth who may feel the ramifications of the disclosure into adulthood.
  - ✓ Listeners, remember that you may leave any time and a space is available for self-care.
- At the group's next meeting, acknowledge the challenges from the previous meeting, encourage self-care and provide the National Suicide Prevention Lifeline number. Invite discussion of the impacts the disclosure had on meeting participants within a time limit, with options for further follow-up outside the meeting as needed.

#### **When disclosure is unplanned:**

- The facilitator should compassionately interrupt: *"I want to apologize but it seems you are getting ready to share a personal experience that is important to you. As the facilitator, I need to check in with the group about safety. We have guidelines for when personal experiences are shared to care for those sharing and those listening. The guidelines are..."*
- Encourage participants to ground themselves after the disclosure, using these activities:
  - Taking a brief stretch break.
  - Practicing deep abdominal breathing which is facilitated by clasping one's hands behind the back, as able.
  - Quietly name to oneself: 5 things you can feel, 5 things you hear outside the room, 5 things you smelled today, and 5 things you tasted today.
- Acknowledge that participants may have a delayed reaction to disclosure. Have a list of resources available to support individuals in their self-care.

#### **Resources:**

- [Strategic Sharing](#) – Casey Family Programs Foster Care alumni
- [Youth Leadership Tool Kit on Strategic Sharing](#) – National Resource Center for Youth Development
- [Speaking Out About Suicide](#) – American Foundation for Suicide Prevention flier

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<sup>1</sup> This resource was developed in collaboration with Trauma Informed Oregon to guide discussions by the Children's System Advisory Committee and other state or local public groups when discussing traumatic events, specifically suicide.