



## Clinician-Survivor Facts

- There are over 47,000 suicides in the US annually.
- Up to 50% are under the care of mental health professionals.
- 50% of Psychiatrists and 20-25% of mental health professionals lose clients to suicide during their career.
- Research has shown that losing a client is often the most profoundly disturbing event of one's professional career.
- Research demonstrates that the impact of losing a client may result in depression, anxiety, and suicidal ideation.
- With support, guidance and resources, clinicians can become stronger, more knowledgeable, competent and compassionate.

## The Clinician Survivor Task Force

### Mission:

Under the auspices of the American Association of Suicidology, we provide consultation, support and education to psychotherapists and other mental health professionals in order to assist them in understanding and responding to their personal/professional loss resulting from the suicide death of a patient/client and/or loved one.

### Co-chairs:

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ASSOCIATION OF SUICIDOLOGY

## CLINICIAN SURVIVORS

[CLINIANSURVIVOR.ORG](http://CLINIANSURVIVOR.ORG)

Despite the large number of professional caretakers impacted by suicide annually, there is a lack of training and guidance regarding:

- Preparedness before the event
- Prevention and Postvention risk management strategies
- Postvention knowledge of common grief sequelae
- Postvention Guidelines and Postvention Protocols for agencies and individuals
- Effective support for individual clinicians

This can lead to:

- Changes in assumptions around one's competence
- An overwhelming sense of guilt and responsibility
- Difficulty believing in the effectiveness of the work
- Changes in clinical work
- Burnout
- Leaving the profession

### **Positive change and Posttraumatic growth can occur via:**

- Education and training re: the actual likelihood of patient suicide
- Access to and use of postvention guidelines and protocols
- Accessible resources and support in the face of suicide loss

### **Please visit the AAS Clinician Survivor Website which includes:**

- Mission Statement
- Clinician Testimonials
- Clinician Survivor Contacts
- Bibliography and References
- Postvention Protocols and Guidelines
- Information on the Task Force List Serve

## **DEALING WITH GRIEF**

### **Personal and professional isolation can develop due to Disenfranchised Grief:**

The extent to which the therapeutic relationship may be acknowledged is compromised by confidentiality and legal issues

There are limited access to **grief rituals** that facilitate healing, and validate grief.

There is a scarcity of available places to process loss with others who are familiar with its sequelae.

There are often negative and unsupportive reactions of colleagues.

There is often prejudice and discrimination around suicide, suicide loss and professional vulnerability.

Legal and Ethical Issues can also complicate and extend the grief process.

Dealing with surviving family members can be confusing, anxiety provoking or healing and positive, depending on many factors.



**Since its inception, the AAS Clinician Survivor Task Force has become an essential resource for clinicians grieving from a suicide loss. It addresses a huge need for professionals and I am grateful for the work of this important Task Force." David Jobes, PhD, ABPP**