Self-Care After Suicide Loss: Caring for Yourself When Everything Hurts

Self-care after suicide loss is not a wellness routine. It is a survival skill. Grief after suicide loss is physiological as well as emotional, and the body, the heart, and the spirit all need tending when they are under this kind of sustained stress. This handout draws on lived survivor experience and bereavement research to offer options across the physical, emotional, spiritual, and relational dimensions of care. None of it is prescriptive. Take what is useful. Leave what is not.

Why Self-Care Feels Impossible Right Now

- Grief after suicide loss is physiological. When trauma hits, the body floods with stress hormones, the immune system is suppressed, and the part of the brain responsible for planning and motivation is under measurable load. Self-care feels impossible partly because the system that would help you do it has been pushed past its limits.
- You are not lazy. You are not weak. You are running on a system that has been pushed to its limits, and the controls are not responding the way they used to. That is the honest starting point.
- The Alliance of Hope for Suicide Loss Survivors notes that the traumatic, sudden, and often stigmatized nature of suicide loss creates a grief experience that is uniquely demanding on every system in the body and mind. Caring for yourself in that context is not a luxury. It is a survival skill.

Physical Self-Care: The Floor, Not the Ceiling

- Physical self-care in early grief is about the minimum that keeps you functional enough to get through today. Food, even something small. Water, which dehydration makes every grief symptom worse without. Rest without guilt, because pushing through exhaustion does not speed healing.
- Sleep matters even when it is broken. Protect whatever sleep you can get: a consistent bedtime, limiting screens before bed, keeping the room quiet. These are small signals to a nervous system running on high alert. A word about numbing: substances like alcohol pause the grief, they do not move it. When the numbing wears off, the grief is still there, often heavier. If this has become the primary coping tool, it is worth bringing to a doctor or therapist.
- Tell your doctor what happened. Grief can change how the body responds to medications already being taken. Chest pain and severe fatigue warrant ruling out cardiac causes at any age. A useful sentence: "I lost someone I cared for deeply to suicide. I know my body is under extraordinary stress. I want anything I am experiencing evaluated in that context." Some survivors also find body-focused approaches like Somatic Experiencing or EMDR helpful when talk therapy does not reach the physical residue grief leaves behind.

Emotional Self-Care: Giving the Heart Room

- Let yourself feel what you actually feel, not what seems appropriate. Grief after suicide loss is not a single emotion. It is a storm of them, sometimes in the same hour: rage, guilt, love, relief, confusion, tenderness. All of it is part of the experience. Watch the pull toward isolation. There is a difference between protecting your energy and disappearing entirely. Reaching back toward one person, one conversation, one small point of contact, is a form of self-care worth attempting when you can.
- It is all right to limit contact with people who deplete you. Some people will ask questions you cannot answer, say things that hurt without meaning to, or expect you to be further along. You are allowed to say "I cannot talk about this right now." Peer support with other suicide loss survivors is different from any other kind of support. The AFSP Healing Conversations program and the Alliance of Hope online community connect survivors with people who understand without explanation.
- Be patient with yourself about the timeline. Three months is not a long time. Six months is not a long time. The people around you may have returned to their routines and stopped checking in. You may not be doing better, and that is not abnormal. It is how grief works.

The Guilt of Feeling Okay

- Many survivors feel guilty about self-care itself. If I slept through the night, does that mean I did not love them enough? If I laughed at something today, am I already forgetting? These questions are common and they are worth naming.
- Grief is not measured in suffering. Taking care of yourself is not a betrayal of the person you lost. A moment of rest, a moment of laughter, a moment of ordinary life does not erase the loss. The grief will be there when the moment passes. It always is. What those moments do is give you enough of yourself to keep going.
- You are allowed to take care of yourself. You are allowed to need things. You are allowed to still be alive, with all that being alive requires.

Spiritual Self-Care: What Feeds Your Spirit

- Spiritual self-care looks different for every person. For some it is prayer or returning to a faith tradition. For others it is nature, music, ritual, or silence. For some it is none of those things, and that is honest too. What matters is finding somewhere to put the weight, even briefly, outside of yourself.
- Some survivors carry a quietly exhausting question: what happened to them? Where are they now? If that question is present, it deserves a place to go. Spiritual pain after a suicide loss is real, and it does not have to be managed alone. Faith that has been shaken by this death is also a real experience, and it does not require resolution to be honored.
- For further reading: Do people who die by suicide go to heaven? and What Good Friday taught me about faith after suicide loss.

If You Are Someone Who Wants to Help

- The people around a survivor often want to help but do not know how. In the earliest weeks, most survivors do not have the capacity for heart-to-heart conversations. What they need most is for the basics to be handled so they do not have to handle them. Bring food. Not "let me know if you need anything." Bring food, and drop it at the door if they are not up for company.
- Drive them to the doctor appointment they keep putting off. Send a text that does not require a reply: "Thinking of you today. No need to respond." Show up for the small logistics: groceries, errands, the things that accumulate into overwhelm when someone is barely holding on.
- Most of all, do not disappear after the first two weeks. The numbness begins to lift right around the time people stop checking in. Keep showing up in small, low-pressure ways. That sustained presence is one of the most useful things a helper can offer.

Source

https://sunflowersaftersuicide.com/self-care/