Suicide loss survivors often become a trusted contact for other people's suicide crisis, a friend's family, a stranger's fear, sometimes a coworker they barely know. If you remember nothing else from this handout, remember three names, 988, AFSP, and the National Institute of Mental Health. Everything else here, DBSA, NAMI, SPRC, is worth reading once things are calmer, drawn together with fifteen-plus years of peer facilitation experience.

Why You Became an Unintended Gatekeeper

- The suicide prevention field calls someone positioned to recognize a crisis and connect a person to help a gatekeeper; most gatekeepers train for the role through programs like QPR or LivingWorks ASIST, both of which Jack has completed, but a suicide loss survivor often becomes one without any training at all.
- Survivors who have spoken openly about a suicide loss are often seen as safer to approach than someone who has never had to say the word out loud.
- People frequently assume that lived experience with suicide loss makes a survivor an expert, even though it does not replace clinical training.
- This role usually appears well before a survivor feels ready for it, once the wider world starts to notice they are still standing, not on any predictable timeline.

What This Stirs Up Inside You

- Hearing about someone else's suicide crisis can bring up a flash of a survivor's own loss, even while they genuinely want to help the person in front of them.
- Feeling shaken by the conversation and wanting to help are not contradictions; both are signs of being a person, not a failure to cope.
- This reaction often settles within hours or days, but for some survivors, especially with a recent or unresolved loss, it can sit heavier and longer; that is also normal.
- If the conversation stirs up a survivor's own thoughts of suicide, not just grief or memory, that is a signal to call 988 for themselves too; it is part of doing this safely.

What You Can Actually Do

- The core steps used by crisis professionals are to ask directly, be present, help keep the person safe, help them connect to real resources, and follow up afterward.
- Sometimes the person confiding is the one at risk; sometimes they are a third party asking what to do for someone else, and it is that third party who needs to do the asking.
- Keeping someone safe until trained help can take over is a complete job on its own, not a smaller version of help; a 988 counselor can walk a survivor through reducing access to lethal means rather than the survivor handling it alone.
- If a situation ever feels physically dangerous, calling 911 and stepping back protects both people involved.

Crisis Resources to Have Ready

- The 988 Suicide and Crisis Lifeline can be reached by call, text, or online chat, and does not require an active emergency to use.
- DBSA focuses on mood disorders and peer support groups, while the NAMI HelpLine covers a broader range of mental health conditions and family support.
- AFSP's Talk Away the Dark #RealConvo guides offer practical scripts for starting these conversations, not just steps to follow.

When Someone Has Survived a Suicide Attempt

- The first six months after a hospitalization carry the most risk, and that elevated risk continues for the full first year, according to AFSP's guidance for family members.
- AFSP's After an Attempt guide, a self-care guide, and a family-care guide are short, practical, and written for the first few days home.
- For longer-term care once the crisis has passed, Psychology Today's therapist directory lets a family search by location, insurance, and specific concern.

When They Refuse Help or Say They Are Fine

- Common fears behind refusal include losing control, being hospitalized, cultural mistrust of mental health systems, having to retell their story, cost, and worry about medication; none of these fears are irrational, even when they are not fully accurate.
- Very few crisis line calls involve police, and most people who talk to a counselor report feeling better afterward, but treat these as facts that ease your own mind, not promises to make to the person, since a broken promise can cost more trust than the fear it eased.
- If the person at risk is a child or teenager, a parent or guardian generally needs to be brought in for their safety, even if the young person asks you not to tell anyone.
- Patience and follow-up work better than pressure, but immediate danger overrides someone's refusal; call 988 first whenever there is any window to do that, and call 911 only when the danger cannot wait even that long.

Source

https://sunflowersaftersuicide.com/the-unintended-gatekeeper-when-others-confide-a-suicide-crisis/