Supporting tamariki and whaanau through grief and loss

These slides include information on suicide loss

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Te Kāwanatanga o Aotearoa
New Zealand Government

Health New Zealand
Te Whatu Ora

KIA HORA TE MARINO

Kia hora te marino

Kia whakapapa pounamu te moana

Hei huarahi mā tātou i te rangi nei

Aroha atu, aroha mai

Tātou i ā tātou katoa

Hui e, taiki e!

May peace be widespread
May the sea be like greenstone
A pathway for us all this day
Let us show respect for each other
For one another
Bind us all together

Mihimihi whakamomori

Acknowledging there are people whaanau families and community impacted by suicide loss

Acknowledging those with lived and living experience of suicidal distress, or supporting someone they care for who is self-harming or experiencing suicidal thoughts

- Yellow Brick Road supports families and runs programmes for children

There is help and hope

- Self care important - supervision, EAP, 1737, Aoake Te Raa

Language Matters

You CAN do/say	What to avoid	WHY
Died by suicide ***Took their own life/ended their own life***	Committed suicide Completed suicide Successful suicide	Increases stigma, shame – both in people with or have had suicidal thoughts, and those bereaved Avoid framing something tragic with a positive outcome
Suicide attempt ***Attempted to end their life***	Failed attempt Unsuccessful attempt	Avoid framing something tragic with a positive outcome/negative outcome
Respect the person and their identity, using their chosen name	Misgendering/Deadnaming/emphasising sex characteristics over their identity	Mana upholding, respecting peer and communities grieving
Increasing/higher/concerning rates (when talking about data)	Alarmist language 'youth suicide crisis' 'bullying is killing our kids' Epidemic/Skyrocketing Sensational, glorifying language	Sensational language increases anxiety and feelings of hopelessness Talking about suicide as a big issue can drive feelings of hopelessness.
Suicide is complex ***Multiplicity of reasons***	WYZ made them 'do it' Bullying 'caused them' to do it	Single cause narratives of suicide can increase suicidal behaviour particularly with those who can relate e.g. suicide after being bullying sounds like an option
Seek cultural advice to understand beliefs or rituals of the deceased and their whaanau	Using images without consent or culturally assumptive/token/making assumptions about the persons faith and culture; memorialising without whaanau consent or engagement	Cultural respect for deceased, their whaanau and wider community

Language Matters

You CAN say	What to avoid	WHY
Asking about or discussing suicide in context, in respect to those around	Refraining from using suicide out of context E.g. Political Suicide Supporting our rangatahi when using KMS/KYS	Increases stigma shame – both in people with or have had suicidal thoughts, and those bereaved. Normalises suicide
Social Media: Content Advice: discussion of suicide	Trigger warning	Avoiding sensational language – use neutral language
Give hope - suicide is preventable ***Share stories of recovery and help-seeking***	That suicide is inevitable Sharing stories where suicide is seen as understandable or justified	Talking about suicide as a big issue can drive feelings of hopelessness.
The loss is sad, and help is always available	They are at peace now, in a better world/place, Set free,	Glamourises the loss and is framing as if an option or solution to life's difficulties
Remember the person, not their death, uphold their mana and that of whaanau bereaved	Not sharing details of the death - method, means, location	Details can be distressing, talking about method can increase risk to people who are experiencing suicidal thoughts.
Acknowledge suicide loss with humility, sadness and aroha	**Don't portray as a selfish act**	Can increase stigma and shame, decreasing opportunity for people with suicidal thoughts and families bereaved to talk about feelings or seek help and support.

Language for our tamariki

- Be guided by the whaanau and respect diverse cultural responses to death and dying
- It's okay to use word suicide – taken life – "suicide is when someone makes their own body stop working"
- Avoid unclear responses 'they are lost to us/gone to sleep/passed' it's OK to say 'they have died'
- CAN SAY: "you are not alone, I'm here, I'm listening" – "it's not your fault"
- Navigate magical thinking (common between ages 5-9, a stage of cognitive development were children still learning finality of death)
- Talking about death and dying with Tamariki (Kidz Health)
- Talking about suicide with Tamariki/children (Skylight)
- Navigating the WHY – can talk about deep sadness

Validate + Reassure!

skylight

Death: When a person's body stops working and they can't be alive anymore. We won't be able to see them anymore.

Homicide or murder: When a person ends someone else's life on purpose.

Grief or grieving: Normal thoughts, feelings, and reactions we have after someone close to us has died to help us deal with what's happened. Grief is loving someone who isn't here anymore.

Trauma or traumatic: A sudden, frightening, and overwhelming thing that happens

Suicide: when someone makes their own body stop working

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My Own Survival Plan

Language for Rangatahi

It's okay to use word suicide or share (with whanau permission or if this is known) that the person took their own life.

"they got so sad and thought they had no other options or no way out"

"we need to make sure anyone who is feeling so sad/angry/trapped know that there is help"

Be Direct. Be Honest. Remind it is no ones fault

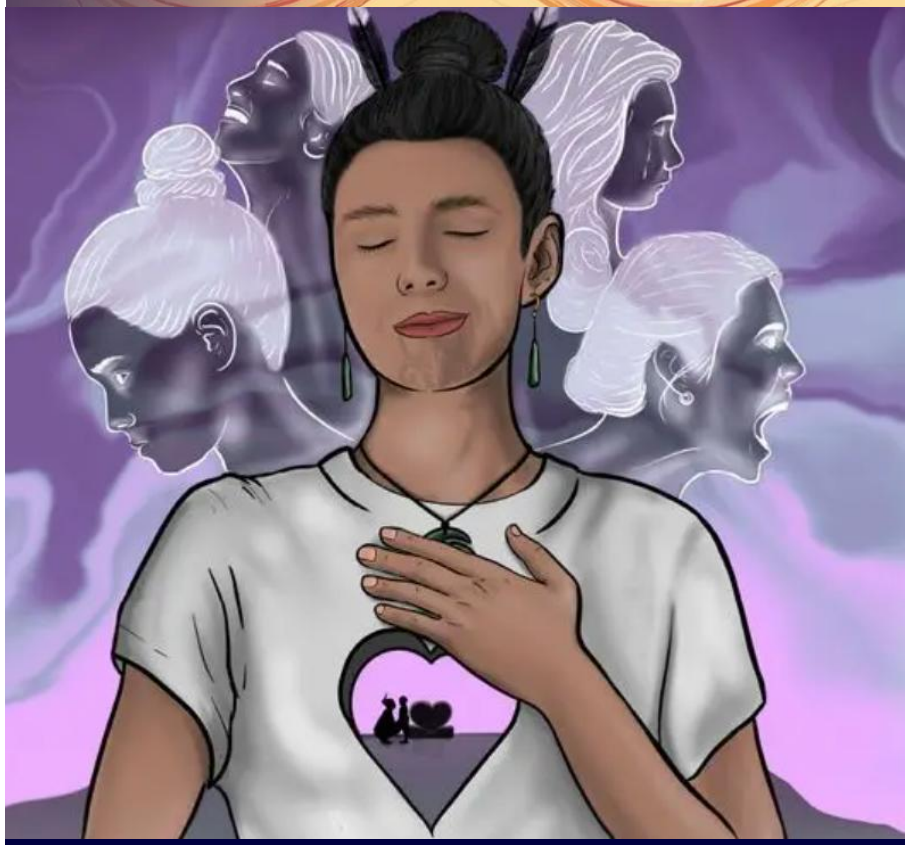
"People who feel suicidal may experience a lot of pain. They believe that dying is the only way to end their pain, and this can also stop them connecting with support and other things that can help." (Connecting Through Koorero p24)

*when it comes to suicide loss, its important to avoid romanticising or glamourising the passing, but focus on the life the person lived, honour their life and who they were

Grief Reactions children and rangatahi (Kidz Health)

Telling children and young people about a suicide (Afterasuicide)

Talk Grief – for teens and young adults



skylight

Suicide Postvention

No one should go through suicide loss alone

Huarahi Ora – interim suicide bereavement national coordination service (replacing victim support) – this is a phone call service to signpost to local supports, not a crisis line

Currently no F2F service unless referred into community to a provider than can offer this, some Suicide Postvention Coordinators can support F2F.

Aoake te Ra – F2F 1:1 counselling

0800 437 009

“Death ends a life, not a relationship” (Klass, 1996)

We can support Tamariki and rangatahi to learn how to maintain the continuing bonds in a symbolic form with loved ones gone

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Myths

1. Once someone is suicidal, they will always remain suicidal

- *suicidal distress is often **short term***
- *can be **situation specific**.*
- *Suicidal thinking is fluid, not static*

2. Asking about someone's suicidal thoughts will make them act on them or "put idea in their head"

- *No evidence to support this*
- *Talking about suicide increases help-reaching*

Myths

3. Someone who is suicidal is determined to die or are selfish

- *Suicide attempt survivors tell us they wanted the emotional pain to end rather than their life, felt trapped, no way else to escape*

4. Most suicides happen suddenly without warning

- *Many suicides have been preceded by warning signs, whether verbal or behavioural.*
- *Important to **understand the warning signs***
- ***Acknowledging many suicides are impulsive***

5. People who talk about suicide are doing it for attention or don't mean it

- *People who talk about suicide may be **reaching out for help and support**.*
- *Same goes for self-harm, this is a call of distress*
- *Yes – but **WHY***
- *Take ALL help seeking behaviour seriously*

6. Only a health professional can support someone who is suicidal

- *Can prevent whaanau, friends and colleagues from taking action. Suicide prevention is everyone's business.*
- *If you see or notice something, say something*

What is self harm?

Some young people who self harm experience suicidal thinking, and self-harm is proxy to suicide but a majority of young people who self-harm do not want to end their lives, but are experiencing distress

- It might include: cutting, scratching, burning, putting items into or under the skin
- Swallowing things not meant to be eaten
- Taking more medication than meant to
- Self harm includes things a young person does to hurt themselves
- A language of distress
- A need for aroha, compassion and support
- Something is not working well for this young person

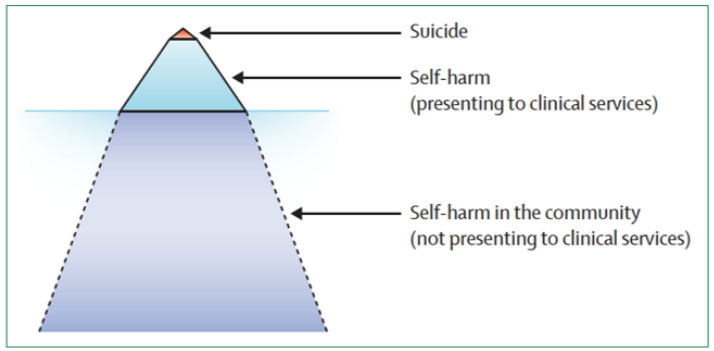

Figure 1: **Representation of the relative prevalence self-harm and suicide in young people**

Hawton, K., Saunders, K. E. A., O'Connor, R. C. Suicide and self-harm in adolescent. Lancet 2012; 379: 2373-82

Youth 2000 series data

2019 (N=7311)
Self-harm ~25% over 12 months

Increases from 2012-2019:
Suicide thoughts15.3% to 20.8%

Suicide attempts 3.9% to 6.3%

- **What is ISNT**
- Attention seeking: many young people deliberately hide their self-harm
- A mental health issue
- A forever thing: some young people self-harm once, for others it is repetitive
- Uncommon: worryingly, 1 in 4 young people are reporting self-harm in NZ

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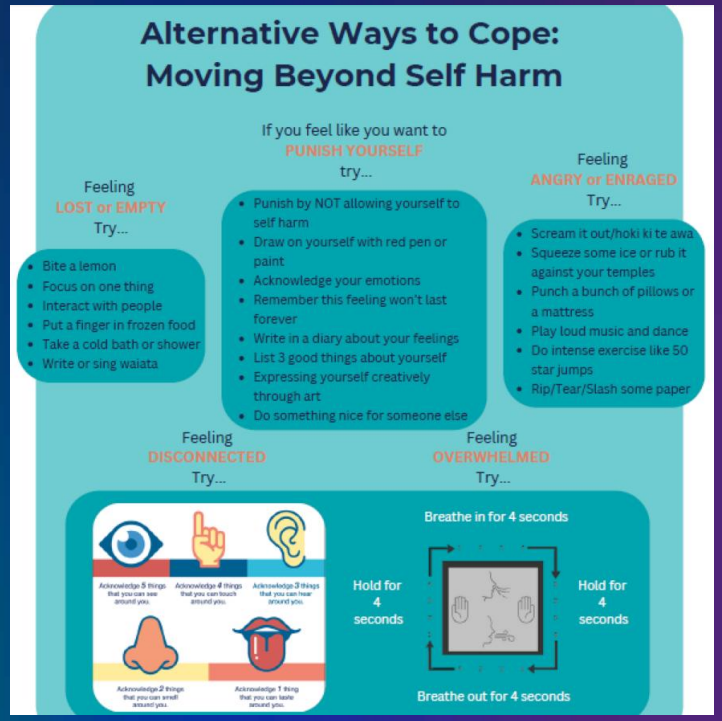
Suicidal and non-suicidal self harm - A language of distress



Language Matters - avoid colloquialisms like “just a fad or phase” – can minimise the issue

Use person focused, neutral language without labelling “they are a cutter”

Resources: The Low Down (for rangatahi by rangatahi)

Kids Health – on self-harm

And on Pathways for schools

Non-suicidal Deliberate Self-harm (Auckland Clin Health pathways)

Suicide Prevention in Youth (including suicidal intent self harm)

Oranga Tamariki - Towards Wellbeing – self harm and suicide prevention

CASA – deliberate self harm

HEADSSS (ages 10-24)

Apps – Calm Harm, Distract

Self-harm | Mental Health Foundation

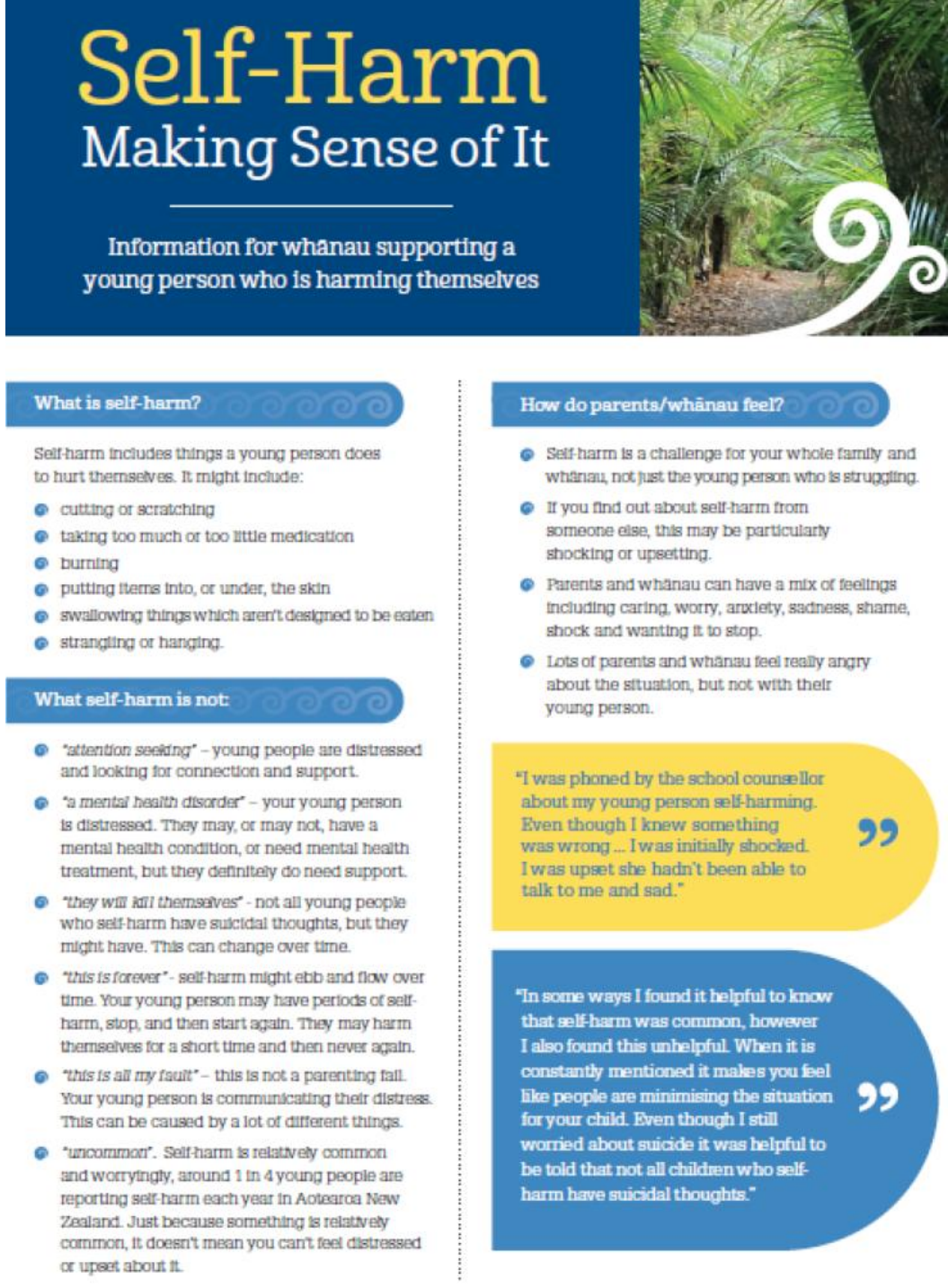
Self-Harm In Children & Young People | KidsHealth New Zealand's Trusted Voice On Children's Health

Communication of Caring

- Take all self-harm behaviours seriously
- Try stay calm upon disclosure
- Listen to your young people with compassion, without judgement
- Pay attention
- Seek medical care if the self-harm requires first aid
- Talk with your young person about helping keep them safe
- Increase connection
- Support healthy coping skills
- Take time to understand what is happening in their online and in-person worlds contributing to distress

- It is OK to ask a young person about self-harm, and about suicidal thoughts

- Order resources from teatahapara@auckland.ac.nz



Self-Harm
Making Sense of It

Information for whānau supporting a young person who is harming themselves

What is self-harm?

Self-harm includes things a young person does to hurt themselves. It might include:

- cutting or scratching
- taking too much or too little medication
- burning
- putting items into, or under, the skin
- swallowing things which aren't designed to be eaten
- strangling or hanging.

What self-harm is not:

- *"attention seeking"* – young people are distressed and looking for connection and support.
- *"a mental health disorder"* – your young person is distressed. They may, or may not, have a mental health condition, or need mental health treatment, but they definitely do need support.
- *"they will kill themselves"* - not all young people who self-harm have suicidal thoughts, but they might have. This can change over time.
- *"this is forever"* - self-harm might ebb and flow over time. Your young person may have periods of self-harm, stop, and then start again. They may harm themselves for a short time and then never again.
- *"this is all my fault"* – this is not a parenting fail. Your young person is communicating their distress. This can be caused by a lot of different things.
- *"uncommon"*. Self-harm is relatively common and worryingly, around 1 in 4 young people are reporting self-harm each year in Aotearoa New Zealand. Just because something is relatively common, it doesn't mean you can't feel distressed or upset about it.

How do parents/whānau feel?

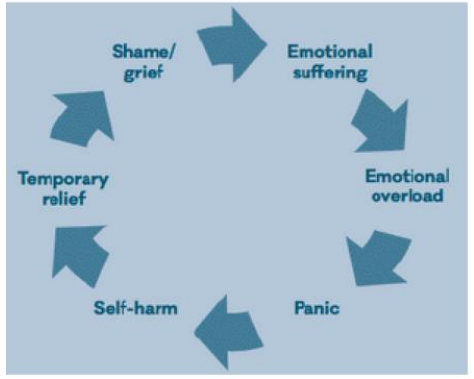
- Self-harm is a challenge for your whole family and whānau, not just the young person who is struggling.
- If you find out about self-harm from someone else, this may be particularly shocking or upsetting.
- Parents and whānau can have a mix of feelings including caring, worry, anxiety, sadness, shame, shock and wanting it to stop.
- Lots of parents and whānau feel really angry about the situation, but not with their young person.

"I was phoned by the school counsellor about my young person self-harming. Even though I knew something was wrong ... I was initially shocked. I was upset she hadn't been able to talk to me and sad."

"In some ways I found it helpful to know that self-harm was common, however I also found this unhelpful. When it is constantly mentioned it makes you feel like people are minimising the situation for your child. Even though I still worried about suicide it was helpful to be told that not all children who self-harm have suicidal thoughts."

KŌRERO TUKU IHO

In Māori communities, caring for youth who self-harm incorporates the vital concept of kōrero tuku iho which translates to passing down ancestral knowledge and wisdom. This involves imparting traditional practices, and blanketing our tamariki with pūrākau (stories). Our whānau find comfort in learning about values that emphasize resilience, tuakiri (identity) and belonging. Kaumātua (Elders) engage in meaningful dialogue with young people, sharing histories of overcoming adversity and the importance to whānau whenua (land), and whakapapa (genealogy). By embedding kōrero tuku iho in to support frameworks, Māori communities address the immediate needs of our rangatahi, but also strengthen tuakiri Māori (Māori identity) and empowering youth to draw upon ancestral strength i.e hoki te awa (return to the river).



SELF HARM AND YOUR BRAIN

Self-harm can cause pain, which should be unpleasant for most people however research shows there are differences in brain pathways between people that self-harm and people that don't (17). The pain/reward processing neurocircuits are different, making the young person feel extreme relief while experiencing pain, leading to a feeling of reward. This means that there is less connectivity between the parts of the brain that regulate emotion, and that treatment possibilities through therapies are possible (17). If we recognise that self-harm is a symptom of an underlying mental health challenge or life stressor then this helps take away the associated stigma, which is an important step toward reducing self-harm behaviours (16).

Self Harm Guidelines for Schools – MOE
- Schools should Not be taking disciplinary actions for self-harm behaviours

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My Own Survival Plan

Suicide Postvention, grief and loss

Grief is a deeply personal experience

Not linear, no timelines

No one should go through suicide loss alone

Postvention (support after a suicide loss)

- Community
- Schools/Kura
- MOE TI

Refer: to sudden death in schools webinar

1 in 5 young people will be impacted by suicide loss by the time they reach adulthood

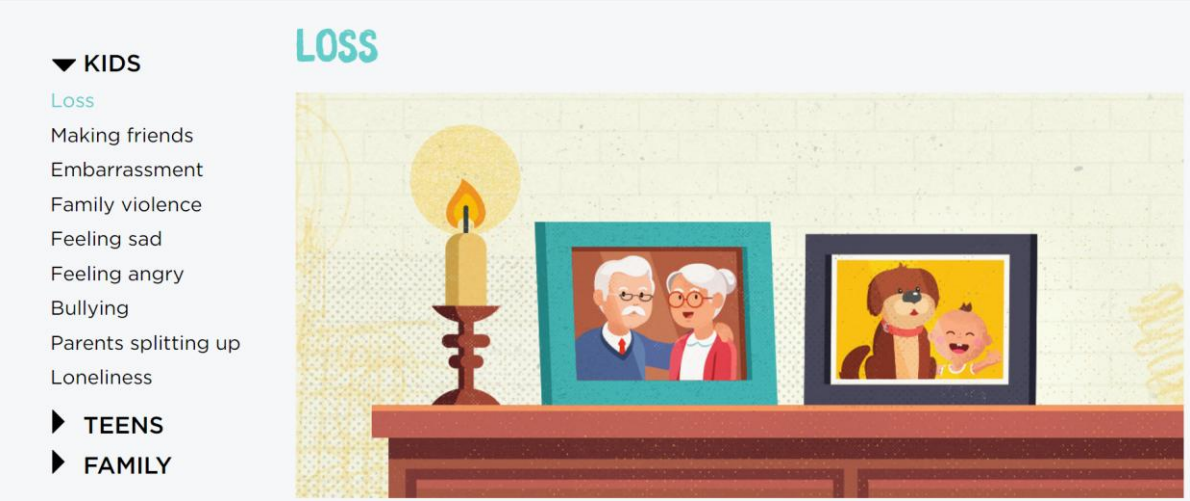
Research tells us for every suicide loss, up to 135 people are impacted

The relationship of the survivor to the deceased *does not determine the impact.*

Cerel et al 2019

Andriessen et al 2020

Whatsup.co.nz/kids



Telling a child about a suicide

- Check in with self first
- Be honest – without details
- Remind them they are loved
- And it is not their fault ! Nor the person who died's fault
- Reassure – validate – let them know they are safe
- Avoid sharing Details/graphic info (not sharing How or where the person took their life)
- Avoid sharing news in child's bedroom – share in a communal/neutral/open space
- Avoid value judgements (i.e. They were selfish/they decided to leave/abandon us on purpose)

Telling children and young people | After a suicide

Supporting grieving tamariki

- Acknowledge the enormity, life altering – grief usually most expressed in first two years
- Grieve in spurts (“child size bite segments”) emotional up/downs
- Children can feel alone in their grief
- **Mattering Reinforcing Care –** need ‘voice and choice’ in their care and support
- Not crying doesn’t equate to not caring
- Are learning death is permanent – but with some magical thinking

- Common to experience regression, being withdrawn, distracted. ***Get advice from CAMHS or GP if concerned or impacting daily life***
- Can present in different emotions (anger) or physical symptoms (sore puku) – behaviour as communication

- Use the persons name – allow space for emotions – encourage talking about LIFE, what did they love the most about that person? What was their favourite food?

Unaddressed grief may quietly shape how a child sees the world, manages relationships, regulates emotion, and understands the self

- The power of animals or plushies

Bereavement and reactions of grief among children and adolescents: Present data and perspectives - ScienceDirect

Supporting grieving tamariki

- Grief across the age development stages
- Anxiety, worries about someone else dying
- Good routines, consistency, involvement
- May repeat questions
- Activities – memory box, scrap book, active play, journaling, doing something to honour their loved one, karakia, read books about death,

'Without explicit intervention, children may internalise distorted explanations and carry unresolved guilt or fear that may not become clear until much later

Bereavement Reactions Of Children & Young People By Age Group | KidsHealth New Zealand's Trusted Voice On Children's Health

Audio – how to talk to a child about suicide

Grief in Children and Adolescents: A Developmentally Informed Clinical Review With Illustrative Cases - PMC

Age group	Cognitive understanding	Emotional expression	Behavioral signs	Common misinterpretations
Early childhood	Death is reversible or temporary	Tantrums, clinginess, regression	Separation anxiety, sleep issues	Behavioral disorder, separation anxiety
Middle childhood	Death is final, concrete understanding	Sadness, guilt, avoidance	Somatic symptoms, academic issues	ADHD, somatization
Adolescence	Abstract understanding, existential focus	Withdrawal, anger, emotional numbness	Risk taking, academic decline	Depression, oppositional behavior

Regressions

- reverting to younger behaviour

- If concerned, refer!

Reassure and Validate!

EARLY CHILDHOOD – AGES FIVE TO ELEVEN

Regressive behaviors are especially common in this age group. Children may become more withdrawn and/or more aggressive. They might be particularly affected by the loss of prize objects or pets. Verbalization and play enactment of their experiences should be encouraged. While routine expectations might be temporarily relaxed, the goal should be to resume normal functioning as soon as possible.

REGRESSIVE REACTIONS

- increased competition with younger siblings for parent's attention.
- Excessive clinging
- Crying or whimpering
- Wanting to be fed or dressed
- Engaging in habits they had previously given up.

PHYSIOLOGICAL REACTIONS

- headaches
- complaints of visual or hearing problems
- persistent itching and scratching
- nausea
- sleep disturbance, nightmares, night terrors

EMOTIONAL/BEHAVIORAL REACTIONS

- aggressive behavior (e.g. fighting with friends and sibling's
- repetitive talking about their experience
- sadness over losses
- school phobia
- withdrawal from play group and friends
- hyperactivity
- withdrawal from family contacts
- irritability
- disobedience
- fear of wind, rain, etc
- inability to concentrate and drop in level of school achievement.

POSSIBLE RESPONSES

- Gentle but firm insistence on more Responsibility than the younger child; positive reinforcement of child's age appropriate behaviour.
- Temporarily lessen requirements for optimum performance in school and home activities.

POSSIBLE RESPONSES

- give additional attention and consideration; physical comforting.

POSSIBLE RESPONSES

- reassurance that competency will return
- provide opportunity for structured, but not demanding chores and responsibilities
- encourage physical activity
- encourage verbal expression of thoughts and feelings about the trauma.
- provide play sessions with adults and peers.
- rehearse safety measures to be taken in future traumas.
- encourage this attempts to integrate experiences.
- encourage child to verbalize feelings of

Mattering Reinforcing Care

(Dr Shelley Brunskill Matson)

Tony's Place
SUPPORT AFTER SUICIDE

- Tamariki need VOICE and CHOICE, are active agents (not passive)
- Reinforce they MATTER, mattering is the essence of care and support
- Rethinking supporting grieving children – Youtube/Ted Talk
- Trauma informed and tamariki centred approaches to supporting grieving children
- Support to have agency (and boundaries) around others "thank you but I don't want to talk about this anymore"

Tony's Place
SUPPORT AFTER SUICIDE

Home | About | Support available | WAVES programme | Training and PD | Fundraise | Contact | Donate to Tony's Place

Compassionate support for people of all ages affected by suicide.

KenziesGift
Healthy Minds, Happy Hearts

About | Articles | Fundraise | Contact | Get Support

Grief and Mental Health Support for Children and Young Adults

Kenzie's Gift is a registered charity in New Zealand (Aotearoa) dedicated to supporting children (tamariki) and young adults (mātātahi) whose parent or sibling has died, or is seriously ill.

We provide professional therapy, practical resources, and evidence-based mental health support to help young kiwis and their whānau navigate the toughest times.

Supporting grieving young people

Youth grieve differently – more actively, socially, young men may grieve silently; friend group may change (can increase isolation)

Active remembering practices including online*

May not ask for support as wanting to assert independence/be strong for whaanau members

Wanting to seek meaning

Need access to good safe information

Acknowledge nuanced grief for trans – gender diverse – rainbow communities

Risk taking behaviour to escape/prove they are alive

Promote foundational health habits – eat, sleep, nature, connection, managing self / help seeking

Developmentally sensitive care requires ongoing curiosity and periodic reassessment

Supporting grieving young people

- Avoid expectations of adult behaviour
- Keep routines
- Talk openly about grief, and how/where to get support (youthline cards)
- Involve in decisions
- May not want to talk to immediate whaanau, widen support circle
- Ongoing attention, reassurance and support

Supporting children and young people through grief | Kenzie's Gift

Remembering

Acknowledging the date as significant and a simple gesture may be sufficient to show care and support.

- Ask whaanau/friends/peers/flatmates how want loved one to be acknowledged
- Check ins: anniversary dates, birthdays, mothers or fathers day, coronial inquest (resurfacing grief)
- Avoid phrases like “lost” “in a better place” – glamourises death, isn’t clear
- Death ends a life, not a relationship – support to integrate grief
- Avoid permanent memorials, espec on site – time limits

- schools, universities

- In University settings: 210107-Suicide-Postvention-Toolkit-for-Australian-universities.pdf
  - have a response plan/crisis management team
  - good safe communication
  - time limited memorials
  - acknowledge loss would any other, ie. posthumous acknowledgement of studies

Reassure – Validate – Communicate

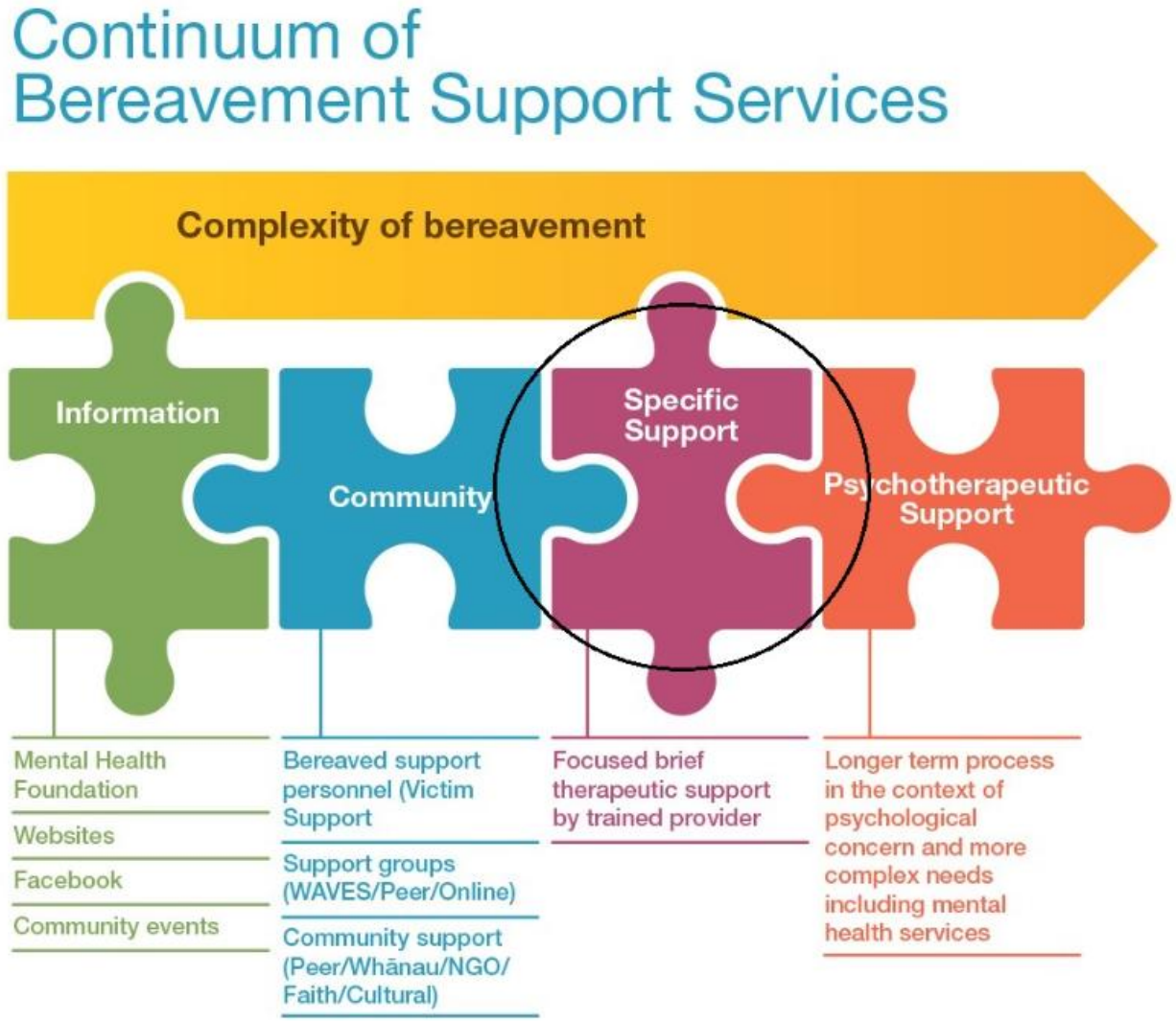
Life affirming practices – awareness raising, something in honour of the person, acknowledging their life lived without focusing on the death

Support in the community postvention

- **For all – Aoake te Ra, suicide bereavement counselling support**
- **Yellow Brick Road (MH support for families and whaanau + postvention support)**

  and WAVES (8 week resilience course 18+, Otaahuhu, Central Auckland) WAVES online
- **Solace peer support group (central Auckland – second Saturday every month, Community of St Luke Church)**
- **Grief Centre – grief counsellors + webinars on grief**
- **After a suicide website**
- **GP → HIPS (can support all ages!) check here if your clinic has one**
- **Access and Choice – free, non referral support for wellbeing**
- Workplace resources – MHF + Workplace Wellbeing

Self care is essential



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My Own Survival Plan

Grief and Loss resources

Tamariki – Children

Tony's Place
SUPPORT AFTER SUICIDE

[Supporting Grieving Children (Tamariki) in Schools – A Teacher's Toolkit | Kenzie's Gift]

MHF - Connecting through Koorero + Supporting young people through mental distress

[Skylight Resilience Hub]

[Sparklers] – for classrooms and whaanau

[Seasons for Growth]

Carers: Overview of the *Seasons for Growth* Program

AUTUMN		
SESSION 1: LIFE IS LIKE THE SEASONS	Children will be getting to know each other and thinking about how the programme relates to their life.	Children will be asked to think about how things change over time including them-selves for example as a baby they crawled – as a toddler they walked, now they can run.
SESSION 2: CHANGE IS PART OF LIFE	Children will reflect on changes in their lives and explore how life is like the changing seasons.	Children will be talking about how we are all special and continue to grow and change throughout life.
WINTER		
SESSION 3: VALUING MY STORY	Children will have an opportunity to share a story of change/loss that has happened to them and name some of their feelings.	Children will be reminded about confidentiality. They will be thanked and affirmed as important members of the group. Children may need additional support following the winter sessions where they have had the opportunity to share.
SESSION 4: NAMING MY FEELINGS	Children will be given time to think about and carefully name their feelings. They will identify how feelings can affect their bodies.	Children will learn that feelings change just as the seasons do. We all have feelings and they don't last forever.
SPRING		
SESSION 5: CARING FOR MY FEELINGS	Children will learn how important their feelings are and to find ways to care for them.	Children will be encouraged to think about how to take care of feelings and who they can talk to when their feelings are big and difficult to look after.
SESSION 6: REMEMBERING THE GOOD TIMES	Children learn about the importance of remembering special people, places, times and events.	Children are encouraged to find hope through their memories and encouraged to think about who they could share their happy memory/memories with.
SUMMER		
SESSION 7: MAKING GOOD CHOICES	Children learn the importance of making choices that help them to grow in positive ways.	Supporting children to make good choices is central to their social and emotional wellbeing. The choices they make affects their feelings and relationships with others.
SESSION 8: MOVING FORWARD	Children have an opportu-nity to review their learning and explore ideas about who and what can help them in times of difficulty.	Children will help to plan a Celebration Session where they can celebrate the journey they have been on. Children and carers will be asked to complete an evaluation form to give feedback about the group.

Self-care is essential.

Looking after yourself and your loved ones is important. Take the time you need to grieve in your own way. It's okay to ask for help and support if you need it.

- **We all grieve in our own way.** Shock, loss and grief can affect us physically, mentally and spiritually.
- **Give yourself time to grieve.** Be kind to yourself, something big has happened. It may take some time to find a way forward.
- **Let others give you a hand if it feels right.** Accept help from loved ones. Let them know what's most helpful for you.
- **Stay connected.** Make time to be with people you feel comforted by. Sharing how you're feeling with trusted friends or whānau can help.
- **Make time for yourself.** This is particularly important if you're also supporting others.
- **Take care of your health.** Eat well, do gentle exercise, get regular sleep, and avoid heavy use of alcohol. Spend time in the fresh air. See your GP when you need to.
- **Keep a notebook handy.** It may be hard to focus and remember things. Write down important and helpful information.
- **Find some quiet space.** Slow down, relax and breathe deeply. You may not want to do anything at all, which is okay.
- **Do things you find comforting.** Kōrero, listen to music, be creative, read, write. Whatever works for you.
- **Stay active.** Physical activity, like playing sport or going for a walk with a friend, or working on a project, can help channel and express grief and provide distraction and time for healing.
- **Talk to people who understand.** When you're ready, be open to talking with others who understand the grief that follows a suicide. You might like to join a support group. Visit **mentalhealth.org.nz/suicide-loss** to find a group near you.
- **Find supportive relationships.** Don't do this alone. Connect with others who can be there for you, like whānau, friends, a spiritual leader, a counsellor or kaumātua.
- **Help is available.** Reach out to someone you trust, such as a counsellor, GP, Victim Support worker, Aoake te Rā or another support service.

For a list of free helplines or support services visit **mentalhealth.org.nz/helplines**.

Be gentle with yourself – there is no "normal" time period for grief.

Grief and Loss resources

- Pukapuka – Books for Tamariki - Books for Grieving Children
- **Luna's Red Hat:** to help children cope with loss to suicide (Akld libraries)
- **Death Duck and the Tulip** (helpful if older person has passed)

The Whatumanawa Collection – Linda Tuhiwai-Smith, books for tamariki who experience life challenges

Arlo and the Orca: child who has lost a grandparent to suicide experiencing disconnection and emotional turmoil, but after a korero with an Orca, Arlo reconnects and finds hope

"I don't like Wednesdays" - story about a young boy whose sibling dies by suicide, the story gently explores the challenging situation and highlights the important role relationships and connections from those supporting can help tamariki manage difficult times

Grief at Christmas – remembering practices

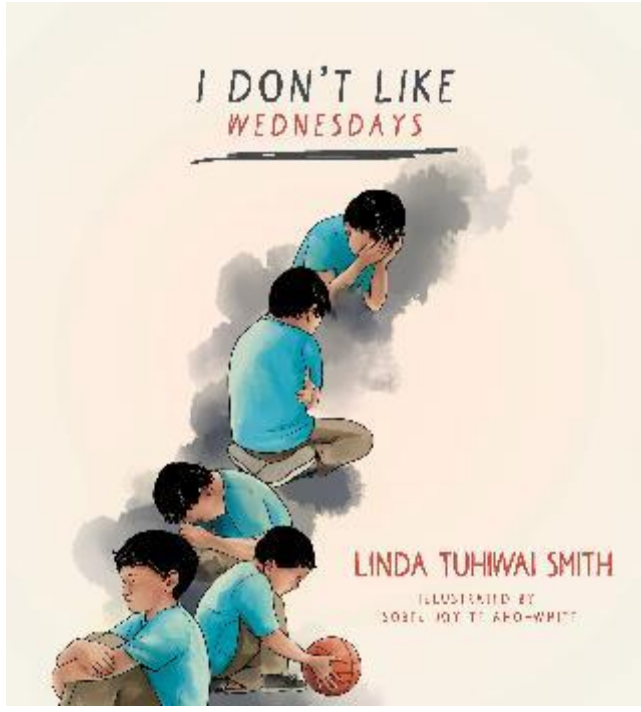
Tony's Place

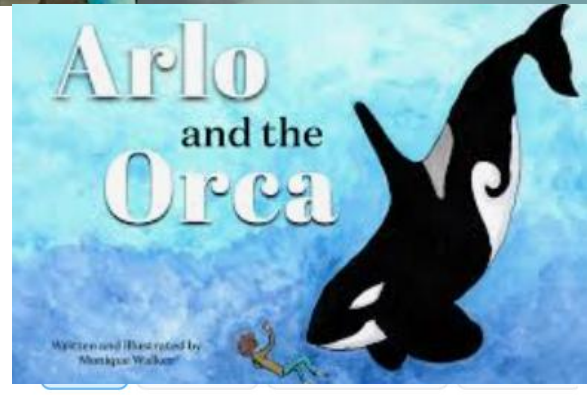
- Grief journals

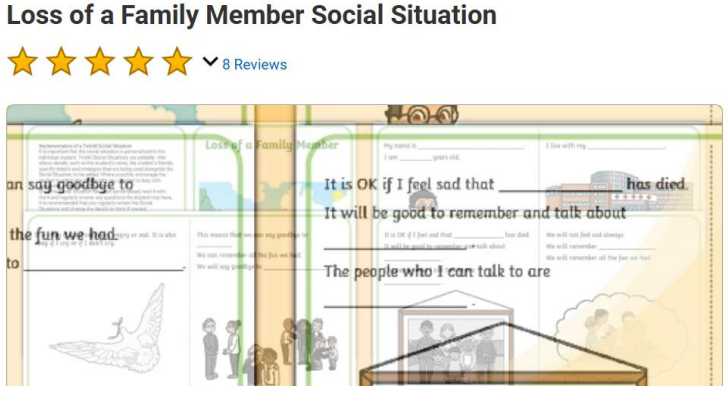
- Victim Support: Resources – supporting children and young people family harm, homicide, crime/ traumatic event (some resources translated)

- Skylight ($9) When tough stuff happens (7-12 yo), Something has Happened (3-6yo - $12.50); Kids Booklets (parental separation/family harm/MH, AOD) – $1.50

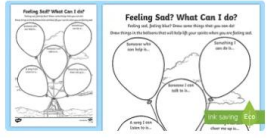
TWINKL Memories Writing Template - End of Year Reflection Activity



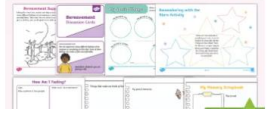




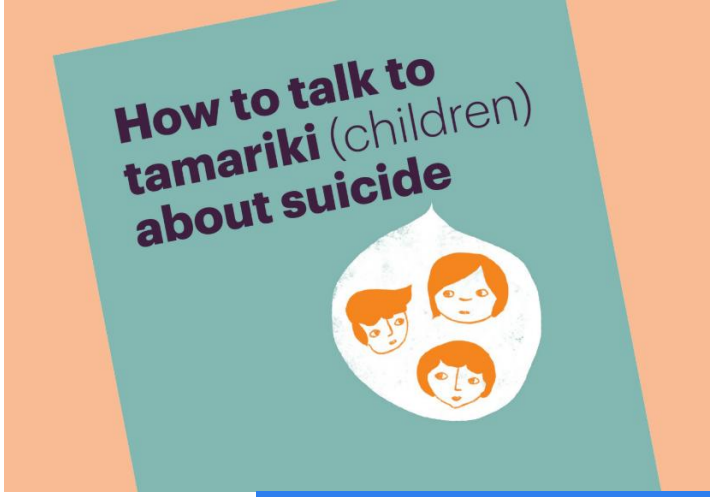
Coping with Grief Journal



Feeling Sad? What Can I Do? Worksheet



Grief and Loss – for parents/caregivers



- Kenzies Gift – Parenting through Grief ($5 koha)

- Coping with Trauma – Victim Support
- Arabic, Japanese, Hindi, Samoan, Korean, Tongan, Chinese

Grief support and walking groups w/ The Grief Centre

Death Cafes at Auckland Libraries

SOLACE

Grief podcasts

She Is Not Your Rehab (breaking intergenerational violence and wellbeing support for men)

Yellow Brick Road - wellbeing

Dr Lucy Hone (Ted Talk – resilience) – on grief loss hope and resilience

After a Suicide

Talking to Children About Suicide – A Practical Guide for Parents and Caregivers | Kenzie's Gift

Manawa
My Own Survival Plan

Youth grief and loss

- Youth grieve differently – more actively, socially
- Emotions and behaviours as communication
- Need 'voice and choice' in their care and support
- Grief is a personal experience, not linear, no timelines
- Keep checking in, letting them know you are there to talk when they need – like to have options of support
- For children, common to experience regression
- Can present in different emotions or physical symptoms (body pains, headaches, sore stomach)
- Taane/Men/Boys may grieve more silently
- Recognise our Takataapui/Trans and Rainbow whaanau can experience disenfranished grief*

Advice when working with youth community

- Avoid permanent/on-site memorials, offer a temporary remembrance
- Acknowledge important anniversary's/date
- Widen the support circle – friend group may change
- Asking how they are coping and gently offer safe/healthy options
- Validate and Reassure !

*when society or culture does not recognise ones grief/not acknowledged or validated

Manawa
My Own Survival Plan

Youth wellbeing support + resources

ALL RIGHT?

- **234** free text Youthline now 24/7 + x8 free counselling sessions + Insta Chat + ACC SENSITIVE CLAIMS
- The Low Down – website
- Xabilities – story telling lived experience Autism (Tamara)
- ASD MUMS/ ASD DADS NZ
- Mind Set Engage – U14 U18 NZ RUGBY
- Voices of Hope
- Kia Piki te Ora (25 across the motu) – Ruakura (Tamariki Ora)/Te Ahi Kaa
- Gumboot Friday
- Kidz Social Services
- The Village Collective - Pacific youth wellbeing + healthy relationships
- Seasons for Growth (Howick & Franklin)
- Waypoint – Counties (youth primary care 12-24)
- Le Va – Mental Wealth (2h MH literacy) + Le Va – B.R.A.V.E video
- The Kindness Institute – Mauri Tau
- - 8 week mindfulness and meditation for Tamariki and taiohi, underpinned by Te Ao Maa
- HELP Auckland (after a sexual assault)
- **Free Counselling Phoneline for Kids in New Zealand | 0800 What's Up**
- **Apps:** Manaaki Ora, Virtual Hope Box

Headstrong, Whitu (7 ways 7 days), Aunty Dee, SPARX, Ao Marama

Mental health and wellbeing apps (for teenagers and young people) | Healthify

For educators – Pūmau (healthy classrooms healthy students); Twinkl

Mitey - Mental health education in schools

Prevention Resources

- Tongan Youth Suicide Prevention (Le Va) + rebuilding wellbeing (multiple languages) + postvention

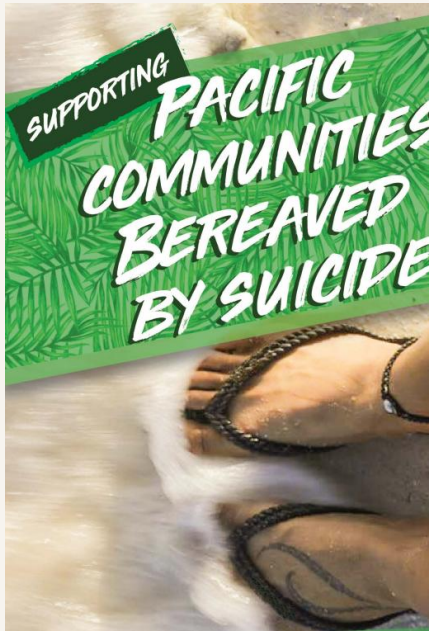
- Supporting youth in distress (MHF)

+ all SP resources

Tehei Mauri Ora – supporting whaanau through suicidal distress

AFS multilingual SP and wellbeing resources

About Access and Choice | Find wellbeing support | Te Whatu Ora – Health NZ



Child Adolescent Mental Health Services – CAMHS (AKA Whirinaki)

Counties

- Crisis Line: Mauri Oho (decide if acute or N/acute
  09 265 4000
  0800 775 222
- Taunaki (Counties North)
- Te Puawaitanga (Counties South)

- Clinical Coordinators

- Primary care support – low to moderate MH: Waypoint ages 12-24

- District wide services: Early Psychosis Intervention, Youth Forensics Team; Maternal MH; Eating Disorders; Infant; Children's Team; Intensive Community Teams

Youth health services | Te Whatu Ora Counties Manukau

Child Adolescent Mental Health Services

Waitemata

- Marinoto North Child Team (0-4 age)

- Takapuna

- Marinoto North Youth Team (5-18 age)

– Milford.

- Marinoto North Rodney Team – Orewa.

0800 489555

marinotonorthreferrals@waitematadhb.govt.nz

- Marinoto West Child Team – Waitakere Hospital.
- Marinoto West Youth Team
- Ph: (09) 822 8666
- E-mails: marinotowestreferrals@waitematadhb.govt.nz

Te Toku Tumai Auckland

- Child and Family Unit (CFU) Starship Hospital – Auckland Hospital
- Kari Centre – Greenlane Clinical Centre
- Koanga Tupu – small team within Kari assessment and treatment infant (0-4)
- Tu Tangata Tonu – within Kari, support rangatahi and whanau where one or both parents experience mental illness.

0800774488

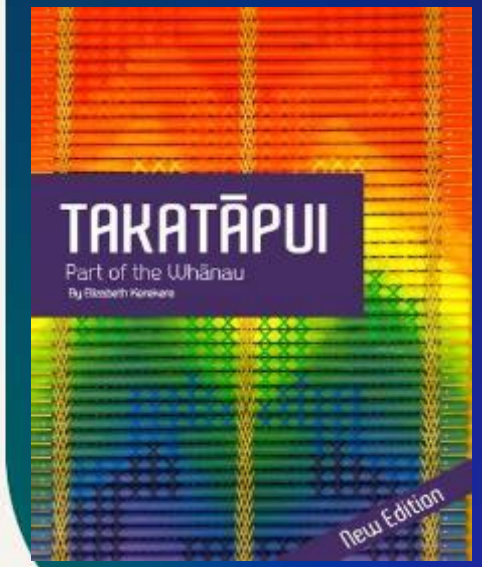
KariCentre-Admin@adhb.govt.nz

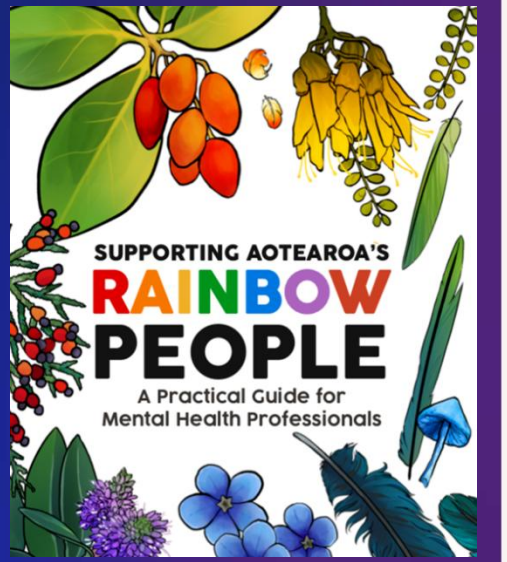
Rainbow community providers

- **The Village Collective** - Rainbow Fale- Based in Wiri (Counties)
- **Mana Aaniwaniwa** (Quack Piripi – they/them) - a kaupapa aiming for Takatāpui & Queer liberation through wānanga, with mātauranga co-designed within our communities
- **InsideOut**
- **Adhikaar** – advocacy and support for rainbow people of colour, particularly South Asians
- **Nevertheless** – Maaori Pacific Takataapui Rainbow MH charitable trust
- **OutLine** – nationwide MH service, providing free counselling
- **Rainbow Youth** – national youth led supporting Queer NZ'er's
- **Pride in Health** – a focus on rainbow health
- **Gender Affirming Care Teams**
- **CADS** – AOD w/ Rainbow clinicians
- **Intersex Aotearoa**
- **Gender Minorities Aotearoa**
- **Rainbow Path** - advocacy and peer support for rainbow refugees and asylum seekers in NZ
- **F'INE** – Pacific navigation support for MVPFAFF+ Queer people and their families in Auckland
- **Joyful Movement –** pathways for trans and non-binary people to access movement and physical activity

Te Ngākau Kahukura

Rainbow wellbeing resources





Be There + Storm Clouds and Rainbows
- Pacific LGBTQIA+ MVPFAFF+ archive

Mental Health Foundation resource by Elizabeth Kerekere – Takataapui Part of the whaanau

Policy and Practice – InsideOut "creating rainbow inclusive policies and procedures"

Te Ngaakau Kahukura

Talanoa clearing pathways – stories from Rainbow Pacific People and their families

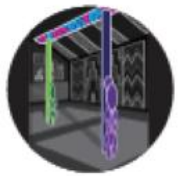
Rainbow MH resource – for mental health professionals

Rainbow Advisory Panel – Te Kunihera o Taamaki Makaurau Auckland Council

Kids Health.org – Copying with gender dysphoria + gender diversity children and young people

TE WHARE TAKATĀPUI: Celebrating Trans Tamariki

By Elizabeth Kerekere



Te Whare Takatāpui: An Overview

Te Whare Takatāpui is both a conceptual and practical framework for takatāpui and Rainbow peoples' health and wellbeing. The six values each represent a different part of the wharenui:

Whakapapa (genealogy) (page 11)
Wairua (spirituality)
Mauri (life spark)
Mana (authority/self-determination)
Tapu (sacredness of body and mind)
Tikanga (rules and protocols)

When these values are woven together, *Te Whare Takatāpui* can shelter and nurture all people with diverse genders, sexualities, and innate variations of sex characteristics, and their whānau. We are proud of who we are as Māori and as takatāpui.

Te Whare Takatāpui explores ways to address the homophobia, transphobia, interphobia and biphobia that impacts on takatāpui and Rainbow health, well-being and relationships.

Ngā mihi mahana ki a Ngāti Hine Health Trust, the first iwi provider to champion Te Whare Takatāpui and Warming the Whare for Trans People and Whānau in Perinatal Care research project. These projects have run alongside and informed each other.

Resources

Mental Health Foundation resources

CHUR, All good bro? – tips on how to korero with the bro. This resource is directed at tāne to tautoko/support fellow tāne Māori who may be going through a rough patch or thinking about suicide.

Connecting through Kōrero – a guidebook for parents, caregivers, teachers, counsellors, aunties, uncles, friends and other whānau members - anyone who cares about taiohi and needs tautoko/support and guidance to kōrero with them about suicide

Tihei Mauri Ora, supporting whānau through suicidal distress – information for whānau and friends to support someone who is in crisis or distress. This resource gives information and suggestions about how to support people who might be distressed or in suicidal crisis, and those who are recovering from feeling suicidal

Are you worried someone is thinking of suicide? - Advice for families, whānau and friends who are worried about the suicide risk of someone close to them.

Takatāpui: part of the whānau - This resource is for takatāpui, their whānau and communities, sharing stories and information about identity, wellbeing and suicide prevention

What happens now? - This resource offers information to help people stay safe in the days and weeks after they survive a suicide attempt or serious self-harm. The resource also provides information to friends, whanau, counsellors or support people about how to help

Yellow Brick Road

Te Wahapūahoaho: Supporting families towards mental wellbeing

YBR care for the carers who may also be experiencing some challenges as they try to support themselves as well as their loved one.

- **Individualised family and whānau support** We provide support through one on one or family group meetings, phone calls or digital communication to provide tailored solutions or support.

- **Group support and "fellowship"** YBR is built on the principle of supporting one another or "fellowship". We coordinate and/or facilitate support groups where families and whānau can share lived experiences to support one another.

-

- **Programmes and courses** We provide a range of programmes and courses on different mental health topics for individuals, groups and the wider sector to foster understanding, and opportunities to learn ways of supporting family/whānau members and/or themselves.
- **Resources and information** We develop or access well-researched materials for families and whānau to build understanding of mental illnesses and challenges.

- **Influence** Our narrative or story is articulated to influence a wider societal shift where we build New Zealanders' views that many answers lie with whānau and wellbeing promotion.

- **Support for Children and Rangatahi** We support children who have a parent/s experiencing mental illness, through our CUMI (Children Understanding Mental Illness) education programme.

Olivia and Melanie are Family Support Workers working in the Counties Manukau area and would be happy to talk with you if you would like to know more

After a suicide attempt

Published: September 5, 2024

Format: PDF Document

Size: 1.99 MB

Download this resource

Email to a friend

Finding out that someone you know has made a suicide attempt can be a stressful thing to go through.

Sometimes people blame themselves for what has happened.

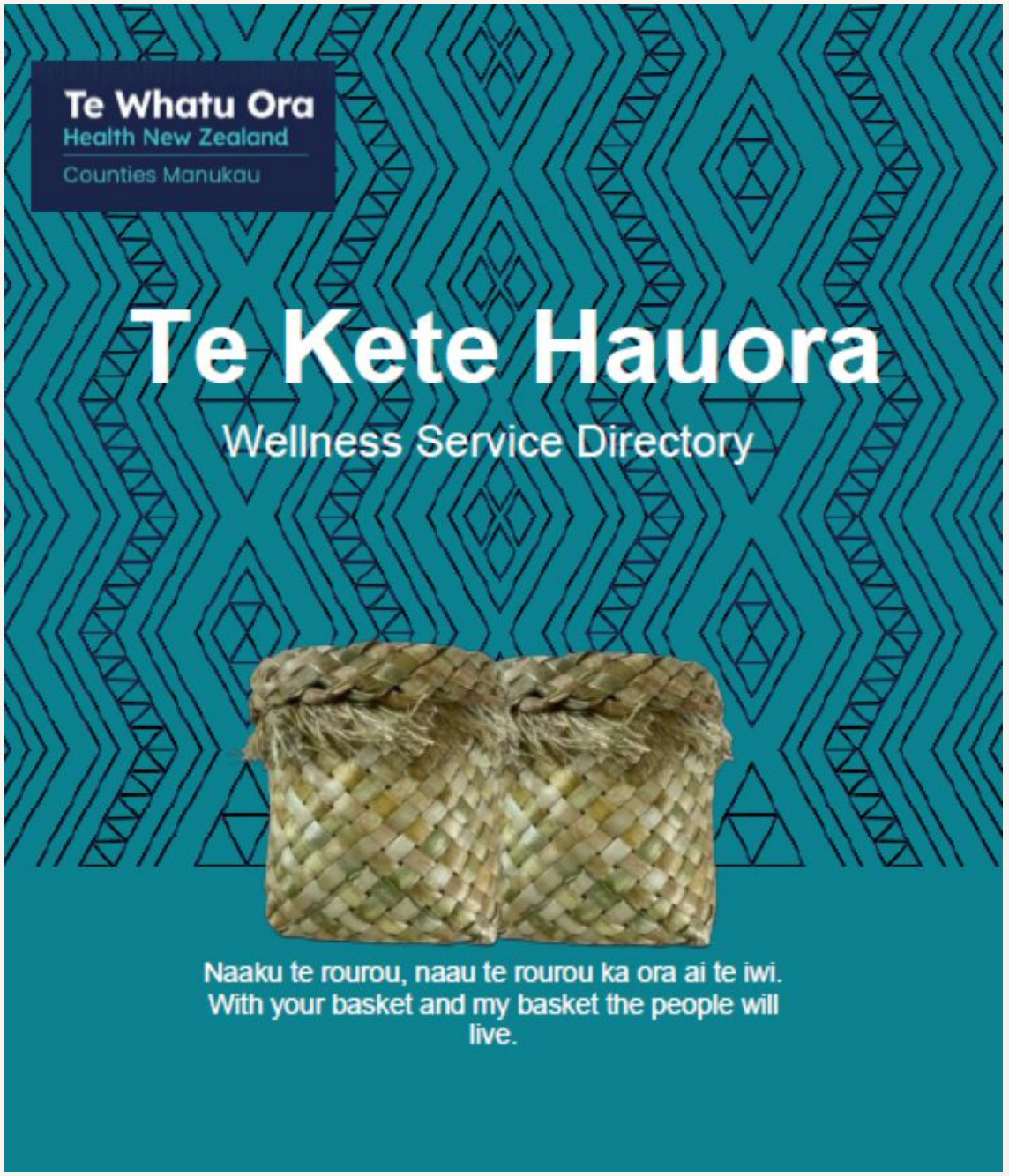
The fact that someone you care about has attempted suicide is not your fault. This is the time to take great care of everyone involved.

[After a suicide attempt - available in English, Samoan and Tongan]

Manawa
My Own Survival Plan

Community wellbeing and Mental Health resources

Online here



Asian Family Services

Asian Family Services

Together enriching lives

ARE YOU FEELING OVERWHELMED, ANXIOUS, OR STUCK?
YOU'RE **NOT ALONE**—AND WE'RE HERE TO **HELP**.

What We Offer ?

Asian Family Services provides free, culturally sensitive counselling for Asian youth who are New Zealand residents, aged 14–24 and living in Auckland and Northland.
Our Asian Helpline providing information, emotional support, and navigation assistance to help you access the right services and resources.
We offer individual and family counselling, with up to 6 sessions available based on your needs and assessment.

Common Challenges We Support

Academic pressure and burnout
Family conflict and communication issues
Excessive gaming and screen time concerns
Identity struggles and cultural expectations
Anxiety, stress, and emotional distress

LANGUAGES

Languages We Support:
Our counsellors speak Mandarin, Cantonese, Korean, Japanese, Hindi and English.

This programme is proudly funded by Foundation North. Funding is limited and prioritised for youth who are New Zealand residents, but we can guide international students to explore insurance options for accessing our support. We encourage all eligible youth to reach out. We'll do our best to support you and ensure you get the help you need.

FOUNDATION NORTH
Pūtea Hāpai Oranga
Funding to Enhance Lives

CONTACT

How to Access Support?

- Fill out the AFS online Referral Form https://www.asianfamilyservices.nz/services/referral-form/
- Call our Asian Helpline on 0800 862 342. Support is available in multiple Asian languages.

Community wellbeing and Mental Health resources

- Home | Mind. Set. Engage. (rugby community)
- Healthify – MH and wellbeing apps
- Resources – Mental Health Foundation

- Asian Family Services – wellbeing, gambling , supports Fijian Indian Communities
- Gambling support – Turn it Around
- WELL WOMEN – maternal MH in the community
- Kia Piki te Ora – Maaori Suicide Prevention – Te Ahi Kaa
- Asian Family Services – resource for Chinese and Korean families

+ resources in Chinese, Korean, Japanese, Hindi and Thai

Penina, Ember (new peer support space in Otaahuhu)
Mahi Tahi – Awhi Ora

Youthline, Access and Choice (free wellbeing support in community, self referral)

- Yellow Brick Road (MH whaanau support), Bravehearts (AOD whaanau support)
- Vagus Centre – counselling for Chinese Community

Community wellbeing and Mental Health resources

netsafe

Age Concern – over 65s, advocacy and support

- Addressing social isolation ! + dedicated ethic service

Sahaayta – Ghadi Nivas (counselling for ethnic communities + support for taane with stand down orders)

Rural Support Trust, Farmstrong, Lean on a Gate (farming/rural communities)

The Psychology Group

- DBT, EMDR, TIC

Tend - free 30 minute appointments, book online

Netsafe

+ Take it Down

Community Support Groups

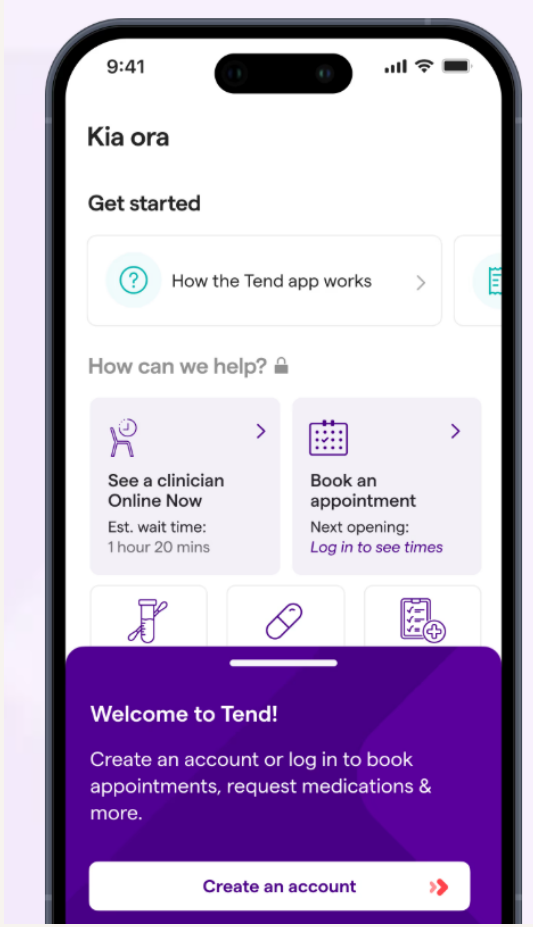
AA and NA meetings

Depression.org.nz

Banardos, PADA, Parent Help, Well Women, Bellyful NZ – parent and perinatal support

All Right? Small Steps – wellbeing tips and breathing practices

just a thought – **free online courses**, anxiety depression, CBT, AoD support courses



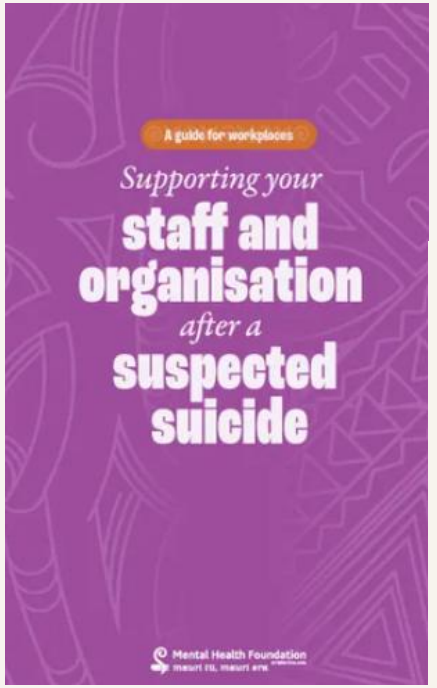
Workplace resources

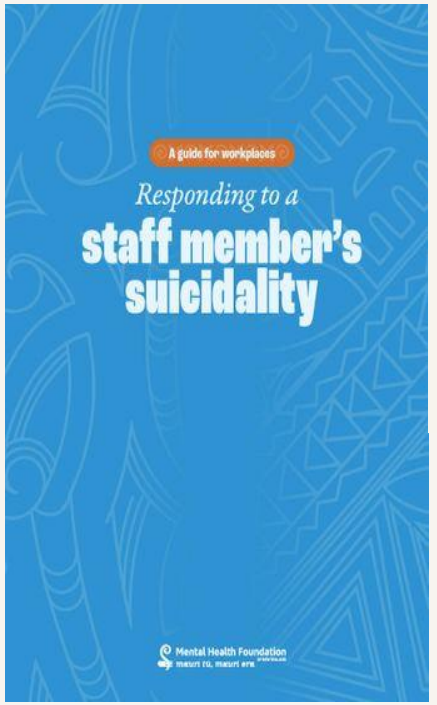
[Mental wellbeing]

[WorkWell]

[Work-related wellbeing: What good looks like | WorkSafe]

[Business Mental Health Toolkit | Find wellbeing support | Te Whatu Ora – Health NZ]





HIP and Health Coach

Overview of Health Improvement Practitioners, Health Coaches & Awhi Ora

A model that leads to advanced primary care; improving population health, enhancing patient experience, reducing cost and improving healthcare worker wellness.

	Health Coaches (HCs)	Health Improvement Practitioners (HIPs)	Awhi Ora Community Support Worker (AO CSW)
HOW they work	Based in practice Includes individual, whānau and group sessions Leads pathways	Based in practice Includes individual, whānau and group sessions Leads pathways	Awhi Ora workers provide support in the community – everything outside the practice.
WHAT presenting issue can I refer?	**Long term conditions and lifestyle changes** • 18yrs + • Support and education to understand, manage, reduce LTC's • Lifestyle change • Focus on healthy eating, physical activity, taking medication as prescribed and managing stress • Action plans/goal setting • Medication reconciliation • Outreach and engagement • Referrals to smoking cessation support/green prescription **Not clinical or mental health trained.**	**No wrong referrals** • All ages, all matters affecting someone's wellbeing - generalist • Stress, sleep, grief, • Depression, Anxiety • Alcohol and drugs • Chronic pain, treatment Issues • Health choices (eating/exercise/tobacco) • Fatigue/ Headaches • Family violence • Medically Unexplained Symptoms • Long term conditions • Relationship problems • Children with behavior issues **Not a counsellor or co-located therapist or clinical psychologist.**	**No wrong Introductions** • 18yrs + with some flexibly • Emotional health & mental wellbeing • Physical health or healthy lifestyle • Housing/WINZ • Social engagement • Paid work • Money matters • Family/whānau issues • Managing drug use, drinking or gambling • Cultural reconnection

Tuwhakaruruhau – Akld wellbeing collaborative (overseeing PHOs supporting HIPS and Health Coaches

Access and Choice – free self -referral wellbeing support

By Pacific For Pacific

For Pacific By Pacific

MISSION

"To provide quality support that enhances holistic wellness"

Te Kāwanatanga o Aotearoa
New Zealand Government

Health New Zealand
Te Whatu Ora

Support for Pasefika Communities

- Community-based, culturally grounded approach
- Mental health & addiction support services
- Support for individuals, families & whānau
- Includes suicide postvention support

We offer:

Primary Mental Health
- Awhi Ora
- Ora'anga
- Perinatal

Community Living (Secondary)
- Youth
- Adult
- Cultural Support

Whānau & Specialist Support
- Family Support
- Suicide Postvention
- Kia Ora Ake

Addiction & Rehabilitation
- Residential Rehab
- AOD Training & Development

AOD WORKSHOPS & TALANOA SESSIONS

- *Monthly full-day AOD workshops*
- *Next: May Workshop Date TBC*
- *1–2-hour talanoa sessions available*
- *Tailored for teams or groups*
- *Flexible delivery (After hours or weekends available)*

Book or enquire: AOD@peninatrust.org.nz
Coordination support: Lanuola.Tamaseu@peninatrust.org.nz

Te Kāwanatanga o Aotearoa
New Zealand Government

Health New Zealand
Te Whatu Ora

Training and upskilling

- Le Va – Lifekeepers (for front line community, non clinical)

UPCOMING – WAIUKU 2 December

- Blueprint for Learning - Mental Health and Addictions 101, workplace wellbeing, rainbow, rural, Aatea Disability 101
  UPCOMING – Pukekohe and Tuakau 2026
- ASSIST/AOK (cost)
- ABACUS: Counties Manukau only w/ AOD focus
- Xabilities | Neurodiversity Centre
- Asian Family Services – Asian suicide prevention
- Te Pou – e learning
- The Grief Centre! Webinars
- Te Pou – Youth Mental Health First Aid (cost) + MHF

Youth MHFA workshops cover a range of topics including depression, anxiety, eating disorders, psychosis, problematic substance abuse, non-suicidal self-injury, suicidal thoughts and behaviours, panic attacks, traumatic events and other situations.

Northern Region PLD series health and education collaborative

schoolwellbeing@middlemore.co.nz

In a crisis or emergency

If someone has attempted suicide or you're worried about their immediate safety, do the following:

Call your local mental health crisis assessment team (numbers are on page 10 of this booklet) or go with them to the emergency department (ED) of your nearest hospital

If they are in immediate physical danger to themselves or others, **call 111**

Stay with them until support arrives

Remove any obvious means of suicide they might use (e.g. rope, pills, guns, car keys, knives, poisons).

If they live in a high-rise building, help them find somewhere to stay in single-level accommodation.

Try to stay calm, take some deep breaths. Let them know you care

Keep them talking: listen and ask questions without judging

Make sure **you are safe**

1737 – free text or call
Youthline - 0800 376 633, 234 + webchat
Lifeline – 0800 543 354
Suicide Tautoko

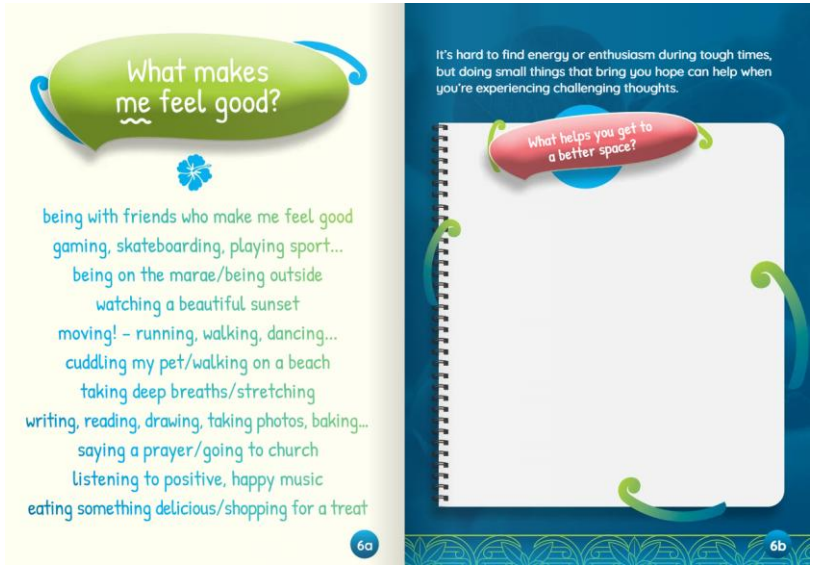
CRISIS
Counties 0800 775 222
Auckland - 0800 800 717
Henderson - (09) 822 8501
09 265 4000 (Mauri Oho)

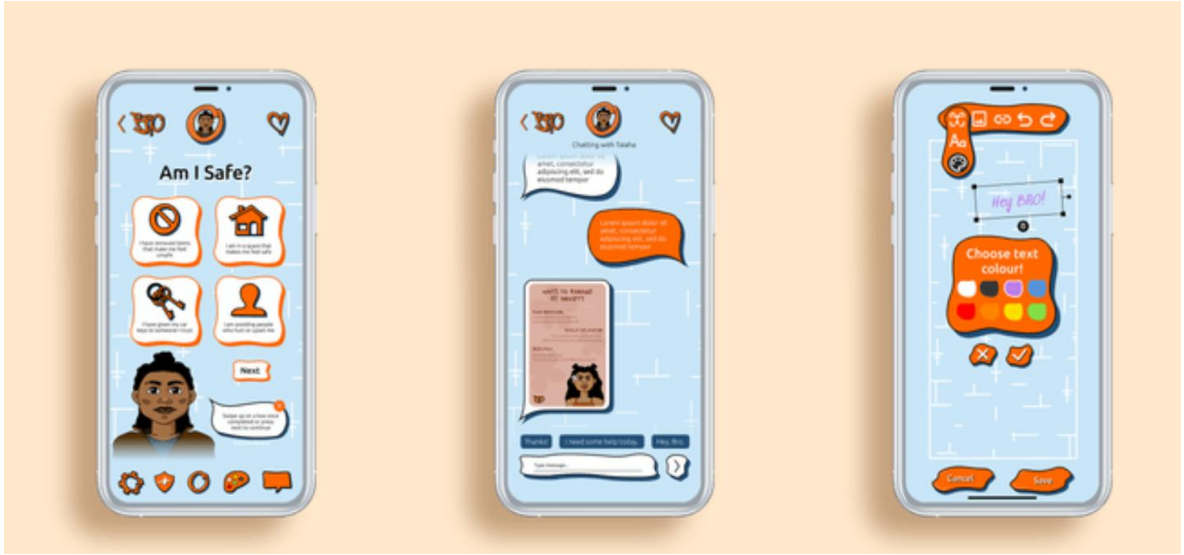
this includes removing/restricting access to alcohol

View this resource here includes lists of helplines and supports great for schools to have at hand

Manawa
My Own Survival Plan

Ko Whai Ahau? BRO





Taiohi/youth suicide safety planning

Focus on protective factors

Lists lots of suggestions

Encourages sharing or completing with trusted support people and whanau

Bro – codesigned with rangatahi

‘wall of strength’

Gender Minorities Crisis Safety Plan

[print] Getting help - Gender Minorities Aotearoa, 2024

Manawa mai te mauri nuku

Manawa mai te mauri rangi

He mauri tipua

Ka pakaru mai te pō

Haumi ē

Hui ē, tāiki ē!

Embrace the life force of the earth

Embrace the life force of the sky

A life force that has stood the age of time

To break through all the darkness

Together we affirm

Final slide

Tamariki and rangatahi Grieve and their voices matter. Remember WITH them

Look after your own wellbeing – you are important too!

Ngaa mihi nui ki a koutou
Thank you for your mahi!

Te Kāwanatanga o Aotearoa
New Zealand Government

Health New Zealand
Te Whatu Ora