

Supporting Behavioral Health Providers: Creating Postvention Strategies for Healing After Losing a Client to Suicide



 **Suicide Prevention
Resource Center**



**Nevada Opioid
Center of Excellence**

CASAT | School of Public Health



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The Nevada Opioid Center of Excellence (NOCE) is dedicated to developing and sharing evidence-based training and offering technical assistance to professionals and community members alike. Whether you're a care provider or a concerned community member, NOCE provides resources to support those affected by opioid use.

Visit our website at www.nvopioidcoe.org!

Today's presentation was made possible in whole or in part by the Nevada Department of Health and Human Services (DHHS) Director's Office through the Fund for a Resilient Nevada, established in Nevada Revised Statutes 433.712 through 433.744. The opinions, findings, conclusions, and recommendations expressed in our courses are those of the author(s) and do not necessarily represent the official views of the Nevada Opioid Center of Excellence or its funders.

Radical Acts of Self-Love

This presentation includes material on mental health crises, substance dependency, injury, and suicide. Please proceed with great care as you engage.

Throughout the day:

- Take breaks
- Breath Work
- Share only what you want to share
- Ask for support



Supporting Behavioral Health Providers: Creating Postvention Strategies for Healing After Losing a Client to Suicide

This video series features providers sharing their personal and professional experiences of losing a client to suicide. These professionals emphasize the importance of practicing self-compassion, seeking support, and honoring the client's life. The accompanying fact sheet offers practical recommendations to help organizations support providers who have lost a client to suicide as well as a list of resources to support organizations in implementing effective support systems and postvention policies.

Supporting Behavioral Health Providers: Resilience and a Path Forward



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Culture, Safe Messaging, and Honoring the Client

Prompt 1:

Cultural norms shape how we talk about death and influence whether suicide, overdose, or violent loss is discussed openly or silenced. SPRC guidance emphasizes the need for safe, validating, and stigma reducing conversations after a client death, including practices that honor the person and support provider emotional safety.

How have your cultural experiences shaped your comfort with discussing different types of death, and how does this influence the language you use in professional settings after losing a client? Where do you see opportunities to shift these cultural patterns in ways that align with postvention best practices, reduce stigma, and create environments where providers and families feel supported in their healing journeys?



Confidence, Emotional Impact, and Self-Compassion

Prompt 2:

SPRC postvention guidance notes that providers often know the protocols for crisis and postvention but lose confidence when confronted with real emotional impact. Shame, fear, and self judgment can intensify after a client suicide or overdose, even when the provider followed appropriate care.

How have you experienced moments when you knew the protocols but did not feel confident executing them because of emotional impact? What postvention supports found in the Fact Sheet are readily accessible to you in your workplaces?



Supporting Behavioral Health Providers: Peer Support and Meaningful Connections

Collective Support and the Meaning of Suffering

Prompt 1:

SPRC highlights that supportive peer networks and shared emotional processing reduce isolation, shame, and disenfranchised grief. Losses can leave providers questioning responsibility, even when the cause is rooted in overwhelming suffering.

How does understanding the client's suffering as something that “overcame them” shift your interpretation of responsibility for death versus honoring a life?

How can collective support structures – dedicated healing communities for providers – reduce isolation and self blame which often follows suicide or overdose loss?



Survivors Remorse, Lived Experience, and Healing

Prompt 2:

Providers may carry their own histories with substance use, trauma, or suicidal thoughts, which can intensify grief when a client dies. SPRC emphasizes the need for compassionate environments that acknowledge lived experience without judgment.

How have your personal experiences influenced the way you would process a client death, and what culturally grounded practices or family centered healing traditions can strengthen your ability to engage in postvention and support communities after loss?



Supporting Behavioral Health Providers: Debriefing and Creating Safe Spaces



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Storytelling Over Time



Storytelling as History

- Collective Memory
- Empathy and Connection
- Countering Dominant Narratives

Storytelling as Healing

- Narrative Therapy
- Sense of Community
- Fostering Support
- Cultural Preservation
 - Vitality of Language
 - Expressions
 - Identity



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Reclaiming Identity After Trauma



Build Professional Support Network

Explore somatic (mind-body connection) and creative therapies.

Acknowledge & Grieve Experiences

Acknowledge trauma without letting it become your identity. Allow yourself to feel.

Reconnect with Your Values

Identify core values and set new goals.

Cultivate a Supportive Environment

Build a safe support system, set healthy boundaries, resist avoidance in connecting with others

Perform Acts of Self Love

Use grounding techniques, engage in creative expression, practice self-compassion

Vulnerability as a Pathway to Compassion

Vulnerability

- Fosters understanding
- Encourages reciprocity
- Requires empathy

Compassion

- Mitigates fear and shame
- Builds a safe environment
- Enhances resilience



Supporting Behavioral Health Providers: Recovery and Strength



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Recovery, Meaning-Making, and the Full Story

Prompt 1:

SPRC outlines the importance of ongoing supervision, peer support, and therapeutic spaces for providers who experience client loss. Many providers question their competence or consider leaving the field after such events.

How have client deaths shaped your sense of identity in this work, and what postvention supports such as therapy, mentorship, structured supervision, or organizational acknowledgment have helped you regain clarity, purpose, and confidence?



Blame, Family Reactions, and the Whole Person

Prompt 2:

Fear of judgment from families or colleagues is a known barrier to provider recovery. SPRC guidance stresses validating the provider, avoiding blame, and remembering the client in their full humanity rather than through the lens of their death.

How have you navigated fears of family blame or organizational scrutiny following a client death, and what practices help you honor the full narrative of the person rather than reducing their life to the circumstances of their death?



Root Cause Analysis (RCA) Activity

1. Identify the sentinel event
2. Gather a multidisciplinary team
3. Describe the event/create a timeline
4. Identify contributing factors – Fishbone Diagram
5. Identify the root cause(s) – 5 WHYS
6. Develop an action plan
7. Share lessons learned
8. Measure the success of corrective actions

Figure 1
Example of fishbone diagram for suicide in a correctional facility

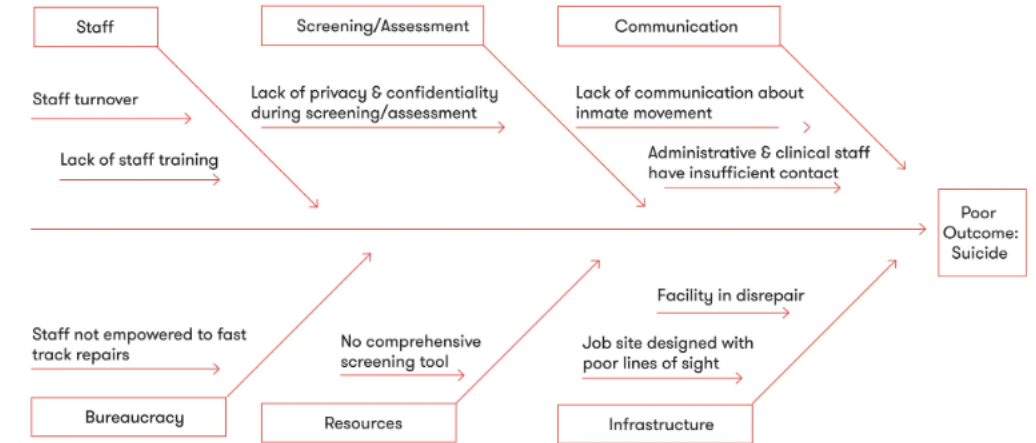
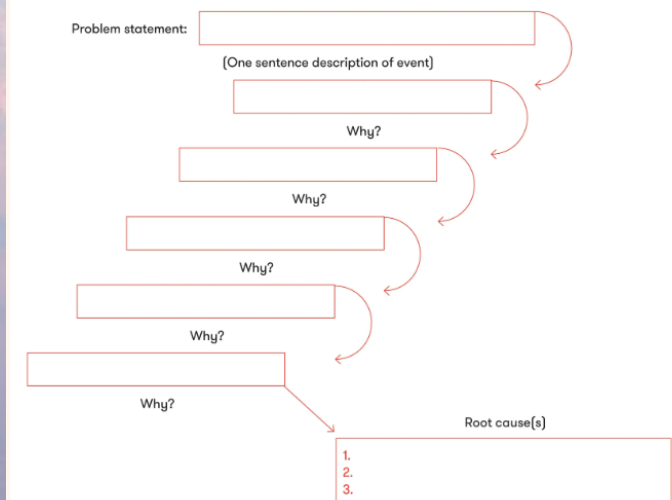


Figure 2
Five Whys tool





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Supporting Nevada communities in the fight
against opioid misuse—here's how we can help.



The Nevada Opioid Center of Excellence (NOCE) offers free education for everyone in our community - whether you're a concerned family member, healthcare provider, educator, or community member who wants to make a difference.

Topics include:

- How to spot when someone needs help who uses drugs
- What to do in an emergency
- How to talk to someone who's upset
- Ways to keep loved ones safe from dangerous medicines
- How to properly store and get rid of medicines
- Where to find help in your community

Why Participate?

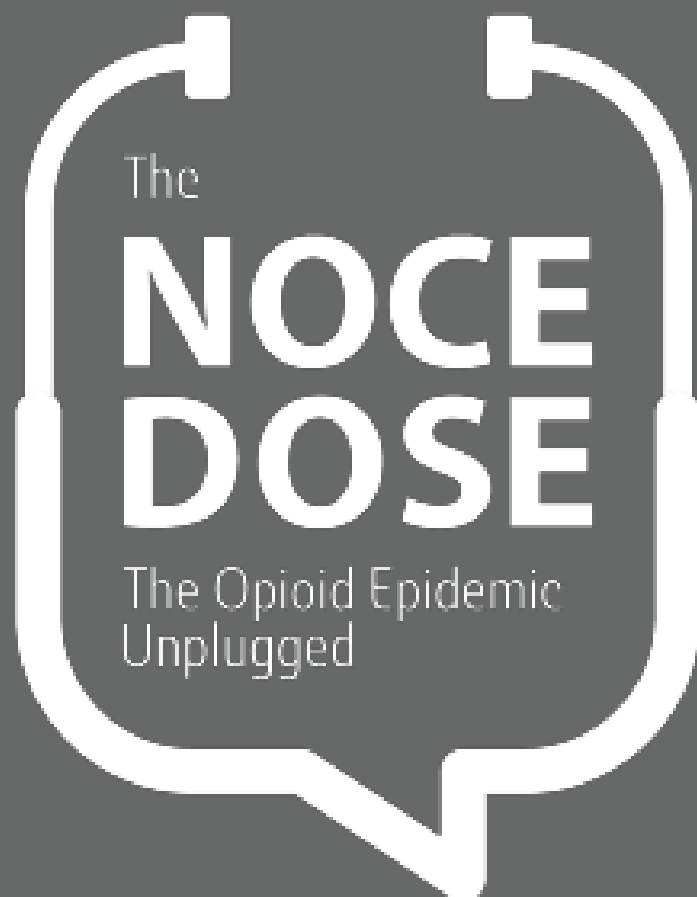
- All training is completely free
- Led by experts in the field
- Flexible scheduling options including in-person and virtual
- Interactive, practical learning experiences
- Take-home resources and materials provided
- No experience needed - come ready to learn



Take action today and request your free session. Together, we can build a safer, healthier Nevada.

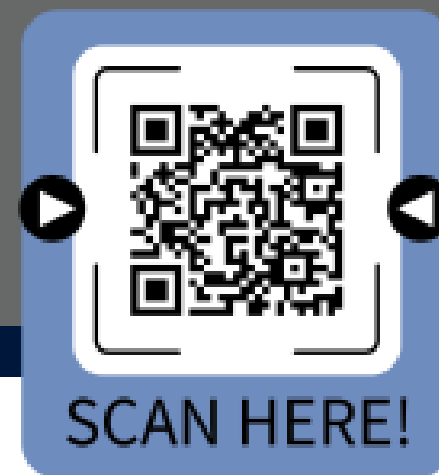
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The NOCE Dose: The Opioid Crisis Unplugged is a concise and insightful podcast offering a deeper dive into the realities faced by professionals and champions combating the opioid epidemic within Nevada. Join us as we reconnect with expert panelists from our Listening Sessions, providing a behind-the-scenes look at their work and insights into the pressing issues of prevention and diversion, harm reduction, opioid use treatment, recovery, and reoccurrence prevention.

AVAILABLE ON





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Thank You.

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