



## Standard Operating Procedure for Postvention<sup>1</sup>

### POLICY AND DIRECTIVE

A Standard Operating Procedure (SOP) for postvention is included in Air Force Vice Chief of Staff's directed initiatives to improve suicide prevention, intervention, and postvention policies, procedures, and practices across the Air Force. SOPs are a leadership tool to execute the Department of Defense Instruction (DoDI) 6490.16, *Defense Suicide Prevention Program*.

### PURPOSE

Leading through postvention following a death by suicide is a challenge for leaders at all levels. The term leaders includes but is not limited to commanders, senior enlisted leaders, First Sergeants, and supervisors. This SOP provides postvention essential steps, key considerations, and resources.

- **Postvention** refers to supportive responses to maintain resilience undertaken for individuals, family members, and the unit following a suicide. Postvention may involve religious support, mental health support, leadership messages, and other actions to facilitate healing and decrease contagion.

Postvention activities may be undertaken following the death of an Airman or the suicide death of a spouse, significant other, or family member.

**Prepare:** A death by suicide is an extraordinarily stressful event and can be chaotic

- **Developing authentic relationships with the Airmen you lead is essential to prepare to effectively leading through a crisis**
  - This involves leaders at all levels getting to know their Airmen and creating an environment where people feel valued and secure
  - Set the example by getting out and getting to know Airmen in the field doing the job every day
- Prepare contingency plans with your leadership team and communicate to subordinate leaders about the plans before a death or crisis occurs to avoid missteps during the crisis
- Be familiar with Casualty, Mortuary, and Air Force Families Forever programs (all under the Force Support Squadron) at your base - before something happens.
- Develop an internal and external communication plan, including the event spokesperson, on suicide in advance
  - Things will happen quickly through social media—it often can't be stopped—so have social media and email templates ready to use. The most difficult time to create supportive messages for dissemination is in the immediate aftermath of the suicide
- Use situational exercises with your leadership team to prepare
- Build a close partnership with your unit Religious Support Team for personal advisement and spiritual care for the unit. When your RST is integrated into the unit and has your confidence, it will facilitate rapid and effective care and support when a crisis occurs. Chaplains and Religious Affairs Airmen may have significant postvention experience and insights to share
- **Seek out another leader who has experienced a suicide crisis to learn from their experience**

**Coordinate:** Contain the crisis by ensuring that law enforcement is able to preserve the scene of death for investigation and that next of kin are not inadvertently notified by informal means.



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- **Key Consideration:** Accidental or poorly executed notifications can have lasting negative impact on the family's healing and confidence in the Air Force.

**Get Centered:** Meet with a trusted helper to get emotional clarity and shape your message to those affected. Leaders must often process their grief more quickly than others in order to effectively lead through postvention. Briefly processing the loss immediately following the event will initiate this process and help you communicate clearly and compassionately.

- **Key Consideration:** Set a meeting with your unit Religious Support Team (RST). A core capability of the Chaplain Corps is to advise leaders on religion, morale, morals, and ethics. Your unit RST offers everyone privileged communication, including leaders.

**Notify:** Protect the privacy of the decedent by ensuring appropriate notification is made to the next of kin.

**Address contagion.** A suicide death can exacerbate suicidal risk in others. Address this risk by setting a respectful tone when communicating about the decedent without memorializing the decedent in sensational ways.

- **Key Consideration:** It is critical to the healing of a unit to honor the decedent's life and contributions; so, although care should be taken in commemorating the individual, memorials and other common ways of honoring a lost Airman should be conducted. Consult with other leaders and helping agents for support and guidance.

**Dispel Rumors.** Manage rumors by accurately, respectfully, and carefully communicating information about the death in a timely way. This can be challenging when some unit members witnessed the suicide or were involved in finding the decedent. Use communication plans that were developed in advance.

**Support:** Provide practical assistance to those affected, including unit members and family members.

**Link affected individuals to support resources.** Consult with base support services – Mental Health, Chaplain, Airman and Family Readiness Center, and others – to identify methods to provide support. Provide a list of local and national resources and crisis hotlines, including the Employee Assistance Program. Foster a culture of help-seeking. Stay in close communication with the Casualty Assistance Representative (CAR), Mortuary Affairs Officer, Air Force Families Forever representative, Office of Special Investigations (OSI), and the Family Assistance Representative (FAR) to ensure all staff supporting the family has the latest information on the case and the family members.

- **Key Consideration:** Airmen experiencing other life stressors may be particularly vulnerable following a death by suicide. Ensure that these individuals are aware of and have access to support services. Check in with them regularly to monitor their service usage and well-being.
- **Don't forget...** responders, support staff, and frontline service members who may have been involved in photographing the death scene or in death scene clean up may require additional support. Check in with them and/or their leaders (if in a different unit) regularly to monitor their service usage and well-being.

**Comfort:** Grief processes are individualized and complex. A wide range of emotions may be experienced. Normalize the grief experience, provide guidance on healthy coping mechanisms, and check-in with members more often than usual. **Model healthy grieving.**

- **Key Consideration:** Research has shown that unit and family members believe that a suicide death is often handled differently by leadership than other deaths. They are often unsatisfied with the leadership response compared to other deaths. This means that leadership teams must be mindful of the bias to handle suicide deaths differently and focus on promoting a healthy grief process, communication, and healing within the unit.



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**Restore:** Allow Airmen space to grieve and heal and move the work center back to stability and productivity. To make this transition, leaders must be attuned to their own self-care and that of their teams. Exercise flexibility where possible to help your teams return to optimal functioning.

- **Key Consideration:** Leaders may choose to conduct a memorial service for the deceased Airman as a means of closure and restoration for the unit. Memorial services following a suicide must be managed with great sensitivity to balance the honoring the life of a fellow Airmen with the dangers of memorializing the suicide event itself. Leaders should consult with their unit Religious Support Team and the installation Senior Religious Support Team prior to making the decision for a memorial service and throughout the preparatory process.

**Lead:** Reinforce and build trust in leadership by making unit members feel cared about, supported, and secure. Leading competently and compassionately through a crisis increases unit cohesiveness.

**Honor:** Prepare for milestones and anniversaries of the death. During these times, those affected may be more likely to experience negative emotions or traumatic memories. Preparation helps prevent negative reactions. If key leadership will PCS before a milestone, ensure that incoming leadership is aware.

- **Key Consideration:** Honoring and celebrating the life of an individual who died by suicide can facilitate healing for those affected. Activities should follow safe memorialization practices, such as not glamorizing the death, not erecting a permanent structure, giving unit members a safe space to remember without reliving the death. Unless customary to include the entire unit in an anniversary-related event, those most affected, including family members, should conduct such events privately.

**Foster a Culture of Resilience:** Consult with your installation helping agencies about effective steps you can take to foster a culture of resilience, help-seeking, and suicide prevention in the unit.

- **Key Consideration:** Ensure that helping agencies receive feedback about the quality and timeliness of the support that was provided to ensure that postvention responses are improved and optimized over time.

**These related resources are available on the Resilience website at [https:// www.resilience.af.mil](https://www.resilience.af.mil)**

- Post-suicide checklist
- Beyond Surviving
- Postvention as prevention
- Casualty Operations: <https://www.afpc.af.mil/Benefits-and-Entitlements/Casualty-Operations/>
- Guidelines for Memorials
- Communication Templates
- Reserve Component Suicide Postvention Plan: [https://dmna.ny.gov/r3sp/suicide/resources/Suicide\\_Postvention\\_Toolkit.pdf](https://dmna.ny.gov/r3sp/suicide/resources/Suicide_Postvention_Toolkit.pdf)
- The Air Force Families Forever (AFFF) program provides long-term support and outreach to family members. Each active-duty installation's Airman and Family Readiness Center (A&FRC) is the point-of-contact for NOK to receive long term support. <https://www.afpc.af.mil/Benefits-and-Entitlements/Air-Force-Families-Forever/>

<sup>1</sup> Content adapted from *A Manager's Guide to Suicide Postvention in the Workplace: 10 Action Steps for Dealing with the Aftermath of Suicide*