

Help Sheet For Those Impacted By Violence Or Murder Of A Colleague Or Loved One:

Loss By Murder Is Not An Event, It Is An Indescribable Journey Of Survival

Those who lose a colleague or loved one to violence or murder are survivors. Homicide survivors have meaningful connections to the victim. Meaningful connections arise through enduring relationships and sometimes just through a brief encounter with the person. All survivors grieve.

Survivors of homicide react in complex ways as the death provokes grief reactions. The violent act also evokes many feelings because the homicide survivors are also secondary victims of the crime.

Dealing with a death always evokes something poignant and can be painful even if considered “natural”. Homicide is an unnatural death. It is committed by another person and this results in intensified feelings.

Some important considerations:

Unexpected: Homicide is always unexpected. There is no preparation for such a loss of a colleague or loved one. There is such a sharp distinction between this new reality from normal day to day activities. It is perhaps one reason why the disbelief, denial and shock are so prominent.

Violent: That the murder was an act of violence and was inflicted by one person on another is very difficult to comprehend. The question of “why?” and the worries for family that survive are powerful. That the victim would be killed by someone, someone in our profession makes it much more unreal.

Rare: Homicide is a rare occurrence. In the medical profession it is exceptionally rare. This can be challenging for the survivor to perhaps know what to do, and it is perhaps more challenging for those who are positioned to help (supporters, therapists and leaders) to know how to effectively help.

Common emotions:

- Shock, disbelief, sense of unreality, denial, numbness
- Sadness, pain, guilt, despair, terror, guilt, anguish, irritability, anger, rage, helplessness, hollowness

- Feelings coming in waves or paroxysms
- Intruding thoughts or images of the person, particular moments or events, or images
- Disturbances in sleep, appetite, concentration and energy are common.

Common behaviours:

- Reviewing the last moments and wondering what might have made a difference. The “what ifs”.
- Guilt and sense of responsibility can feel overwhelming.
- Grief Spasms – intense feelings triggered by a memory, reading something or inadvertently from watching a movie or seeing a photo. These are often paralyzing in their intensity and are powerful moments in the grieving process.

Other impacts:

Physical: Survivors can feel physical pain or feel unwell, have trouble eating, sleeping, lethargy, muscle tension, GI symptoms, dizziness, headaches, startle response.

Thinking: Often is preoccupied with thoughts of what happened. Difficulty with concentration, decision-making and attention to typical and needed details of life.

Social: Often even with others around the individual can feel isolated and alone.

Spiritual: Homicides often challenge one’s beliefs and the sense of meaning in one’s life. Others find much comfort in turning to religion, spiritual centers or prayer.

What can I do?

- Allow yourself time and the space to grieve – you need time to express the emotions you are having. Medicine trains us to focus on what is required of us and not our emotions.
- Grief has its own timetable and cannot be rushed. It is also far from being linear and predictable in its course – other than it does have a course over time.
- Family, friends, community are crucial supports for grief as all share in the shock and distress.
- Be mindful of your energy. Ensure that you eat well and sleep well. It is important to have time to rest other than sleep (bath, walk, listen to music etc). Plan the time you spend with family, with supports, and doing the necessary activities (including work).
- Try to keep some routine in your life.
- Maintaining routines is particularly important when you have children who are also impacted by the loss.
- Reach out for professional assistance. Keep this in mind for children as well.

- Take part in debriefs and community get togethers. Events that seek to meaningfully remember the person are often helpful.
- Facilitated support groups can help decrease the sense of isolation.

How can I help as a friend?

- Be a good listener – just listen and be present.
- Make time for your friend and check in.
- Be non-judgmental if your friend expresses difficult emotions or thoughts.
- Do not try to fix it – you can't – simply being there for someone is most helpful and supportive.
- Help find resources and have them ready at hand (see end of this handout).
- Help connect your friend to supportive resources if necessary.
- Help them out with basics in their life as well as, if possible, with work.
- Do not tell the survivor you know what they are feeling or that it will get better.
- Be wary of suicidal thoughts or expressions and get the person to help.
- Do not blame your friend or colleague for causing or failing to prevent the crime.
- Let your friend dictate his or her needs and the pace that they need to go at.
- Do not speculate (or gossip) about the circumstances of the event.

Supports for Physicians Impacted by Homicide/Domestic Violence

Physician Health Program: 1.800.851.6606

PARO Help Line (Professional Association of Residents of Ontario), Available 24/7:
1.866.HELP.DOC (866.435.7362)

University of Toronto, Resident Wellness Office: 416.946.3074 or pgwellness@utoronto.ca

University of Ottawa, Faculty of Medicine Wellness Program: 613.562.5800, ext. 8507, or
<http://www.med.uottawa.ca/Wellness>

Assaulted Women's Helpline, Available 24/7: 416.863.0511

Toronto Distress Centre, Available 24/7: 416.408.HELP (416.408.4357)

Ontario Online & Text Crisis Services: <http://dcontario.org/ontx.html>, or text 741741 (available 2:00 p.m. - 2:00 a.m. daily)

Additional Supports are available through Employee Assistance Programs or through your own Family Physician

Summary

There is no ‘getting over’ or coming to terms with murder. There is a lessening of the intensity and the rawness with time.

No two people grieve the same and no emotion or thought is unnatural in grief. Do not feel embarrassed or confused by these feelings.

Source: Physician Health Program, Ontario Medication Association, 2016 as adapted from <http://www.victimsofviolence.on.ca/victim-information-library/a-survivors-guide-to-homicide-and-grieving/>