



Death by Suicide  
Writings and Thoughts for Bereaved Parents

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By the Compassionate Friends Chapter, Katy, TX





## The Compassionate Friends

Marin County and San Francisco, California Chapters

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My beautiful, beloved son Philip died by suicide on August 16, 1994. He was 26 years old. As I struggled to come to terms with his death, I would tell myself that it was Philip's "choice" to die and that even though I did not understand it, I must respect his decision.

But as time passed, I learned that my son had shown the classic signs of bipolar mood disorder, also called manic depression. His first episode began shortly after his graduation from college. None of us close to him knew what was happening nor where the new behavior, the off and on compulsive talking and extreme irritability were coming from. We knew nothing about clinical depression. Because he was in a difficult job market (his major was creative writing), we thought Philip's depression was due to his not being able to find a job in his field. How woefully we underestimated the mental torture he was enduring. How deeply I regret my own lack of knowledge and therefore lack of action to help him. I no longer see his death as a rational choice, but rather as the terrible outcome of an unrelieved clinical depression that sabotaged his thinking and ultimately caused his death.

Philip's death forced me to learn as much as I could (and can, since the education is ongoing) about clinical depression and suicide. This newsletter is an attempt to share some of that information. With few exceptions, the articles and poems on the following pages are from parents or siblings who have had a daughter, son, brother or sister die by suicide. There is also an insightful suicide note from a young man who died (contrary to popular belief, most people who die by suicide do not leave notes). There are two pages of resources which list organizations, newsletters and books whose intent is to help grieving family members and/or help educate the public about suicide.

So many times over the past years, as people have learned of my son's death, they have approached me and in lowered voice, sometimes in a whisper, talked of a suicide death in their own family. I have been stunned by how many people have been touched by suicide — and I have been saddened by their shame and embarrassment at the word "suicide." The Surgeon General of the United States has declared suicide a "national health crisis" in this country. We simply cannot afford to remain ignorant nor to stigmatize an illness that is taking the lives of over 30,000 of our fellow citizens each year.

This newsletter is a one-time production; the regular newsletter, edited by Nanette Jacobs, will return later this summer. I thank the Marin County/San Francisco chapter of TCF for encouraging my desire to do this publication and for all the support TCF has given to me in my own healing. The newsletter is dedicated to all the beloved children and siblings who died by suicide. How we love you, and how we miss you.

With love,  
Kitty

In memory of Philip Ganote (March 8, 1968 - August 16, 1994)



The Compassionate Friends is a nonprofit self-help organization offering friendship and support to families who have experienced the death of a child. The mission of The Compassionate Friends is to assist families in the positive resolution of grief following the death of a child and to provide information to help others be supportive.

## Suicide: How Do We Say It?

© 1999 by Joyce Andrews, TCF/Sugar Land, Texas

From the moment we learned of our daughter's death, I knew that the word "suicide" had the power to erase her life while emblazoning her death in neon letters in the minds of her friends and colleagues. During the unremitting misery of those early days, I even toyed with the idea of telling no one she was gone, willing her to stay alive in the thoughts of those who knew her, forgetting that I'd already notified our family and closest friends. It was a fairy tale wish I contrived as a way of allowing myself a momentary escape from the unthinkable reality of her death. If her death were never acknowledged, would she still be here?

My fantasy vanished in the cold light of the days that followed. I knew that we could never dishonor Rhonda's memory by concealing her suicide. I wrote a letter to friends and relatives, informing them of the events leading up to her death. I hoped my letter would quell the inevitable whispers by openly acknowledging her depression and her decision to end her own life. I implored them to speak often and openly about her to us; to do otherwise would deny her existence.

I never intended to embark on a campaign to confront, let alone eradicate, the stigma of suicide. What mattered most was that we who loved Rhonda must not let the circumstances of her death diminish her memory or her accomplishments. I explained that she had "taken her own life" or that "she died of suicide." An expression I refused to use then and refuse to use to this day, is the despicable "committed suicide," with its implications of criminality. Historically, that term was an instrument of retaliation against the survivors, and it has no place in today's enlightened society.

Many people prefer to say, "completed suicide," but as a parent who witnessed my child's 20-year struggle against the demons of clinical depression, I don't care much for that, either. "Died of suicide" or "died by suicide" are accurate, emotionally-neutral ways to explain my child's death.

My first encounter with suicide occurred many years ago when my dentist, a gentle family man in his mid 30's, took his own life. Since that time, I have known neighbors, relatives, friends and other hard-working, highly respected individuals who died this way. I've facilitated meetings in which grieving parents declined to speak about their children because they couldn't handle the group's reactions to the dreaded "s" word. I've known parents who never returned to a chapter meeting because of negative comments about the way that their child died.

Rhonda was a gifted scholar, writer and archaeologist who, like my mother, suffered from adult-onset manic depression (also called bipolar disorder). She made a lasting contribution in her field, and a wonderful tribute to her life and her work appeared in *American Antiquity*, *Journal of the Society for American Archaeology* (October, 1994).

Both my daughter and my mother suffered tremendously in their struggles to conquer and conceal their illness. Neither of them won that battle, but my mother responded to medications that minimized the highs and lows, and she died of cancer at 87. Sadly, doctors never discovered a magic formula that could offer Rhonda the same relief. She ended her own life at age 36, after a year of severe depression that was triggered by life stresses beyond her control. I saw her battle firsthand, and I witnessed her valiant struggle to survive. She wanted desperately to live; she died because she thought she had no alternative.

In his revealing book, *Telling Secrets*, the great theologian Frederick Buechner describes his father's suicide, which occurred when Buechner was just a boy. The conspiracy of silence that was imposed on Buechner and his brother had a profound effect on their development and their relationships with other family members. "We are as sick as our secrets," he concludes.

We whose children have taken their own lives must do all that we can to help eradicate the secrecy and stigma that surround their deaths. If we allow these to persist, we allow their lives to be diminished. We owe our children more than that.

## The Golden Gate Bridge: Still Beautiful

On May 23rd, 1995 my son jumped off the Golden Gate Bridge [in San Francisco]. Tempting as it is to believe he'd still be alive had there been a barrier, I think it would be naive. In my despair I wanted to blame the psychiatrist who refused to see him because he'd missed some appointments, the girlfriend who'd ended their relationship just two days prior to his jump, the crisis center at the hospital he'd gone for help and who could have kept him had they read the signs but didn't; myself, (especially myself), for flawed parenting. But never blame the bridge! In the end it was his decision. In his farewell note, he he was going to electrocute himself. What made him change his mind? I know, but I believe it was the deed, not the method, that he was deterred to execute. People who really want to die find a way. So while a barrier deter suicides on the bridge, it would hardly deter suicides. Should we nate tall buildings, parking structures, automobile exhaust pipes, ropes?



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In spite of very sad memories, I still appreciate the beauty of the bridge. People from all over the world enjoy the vistas from this compelling structure. Is it fair to impair the visibility in a futile effort to control deaths from the bridge? The bridge is for the living, too.

... Carol Sheldon, TCF/Marin County, California

September 14, 1999

How much have I learned since that horrendous day?  
I've learned that I'm not alone in my grief,  
That others have suffered, are suffering and will suffer  
The tremendous loss of losing someone they love to suicide.  
Two years later I also learned how grief can destroy  
When your father, who couldn't deal with his grief,  
Decided to end his pain and suffering too.  
I've learned I wasn't as guilty as I had thought at first,  
That your decision was yours alone,  
That once made nobody could change it.  
And I've learned to stop asking the "Why?" question ?  
That question to which only you have the answer.  
Some people said that I'd get over losing you in a year.  
After that first round of holidays, birthdays, etc. I'd be fine.  
Guess what ? I've learned just how wrong they were.  
It's now the 10th year - the 10th year of holidays, birthdays, etc.  
Certainly it's not as heart-wrenching as the 1st year or even the 5th .  
But I'm still not over losing you and I'm still not "fine."  
And I doubt that I'll ever get over losing you, that I'll ever be "fine."  
I'm certainly not the same person I was before this all began.  
I guess I've reached a "new normal" though and I'm going on with life.  
Even though it's been the most difficult thing I've ever had to endure,  
At least now I'm strong enough to help those who follow on this path.  
But, oh, how I'd give up all I've learned for just another hour with you.

.. by Karen C. Kimball, Hingham, Massachusetts

## Circle

How do you bear it all?  
The cry came from a mother  
Whose son had died only weeks before.  
We were in a circle, looking at her,  
Looking around, looking away,  
Tears in our hearts, in our eyes.  
How do we bear it?  
I don't know,  
But the circle helps.

... by *Eva Lager, TCF/Western Australia*  
(*Eve's daughter Milya Claudia Lager died by suicide on 4 March 1990.*)

## Life Can Be Good Again

by *Don Hackett, TCF/Hingham Massachusetts*

For nearly sixteen years, his voice has been silent. It is a span now nearly equal to the time it was heard. Never did I anticipate life without the sounds that marked his presence. Learning to survive that silence once seemed an impossible task, one so overwhelming I could find no hope or expectation of ever finding life once more.

He was our son, our only child. The tempo of his growing measured the cadence, the beat, for our own living. His passing left an existence without any value that I could immediately perceive. Ultimately, I came to recognize that I was wrong.

Life still had meaning, but it had fallen to me to find it, just as it had been in the years before his coming. Indeed, even as it had been throughout the time of his living, life still demanded my active participation, my own commitment to give it purpose and resolve.

Hindsight affords an ease in stating this realization that did not exist while struggling in the depths of bereavement. The steps taken to finally seize life again seem logical and ordered while intellectualizing the process but I know that this is much easier to write than it was to experience.

I confess, with both sorrow and gladness, that I can no longer summon the full measure of those savage feelings and the unremitting pain that engulfed me in those early years. Working through them was the most demanding challenge of my life, enacting tolls in physical health perhaps even greater than the long-term effects on mind and emotion.

Today, however, I can reflect with gratitude upon a decade of mastery over the sadness. Control of my thoughts returned to me, and I know freedom from the utter devastation of those early years. Looking back reveal essential turning points on the road to healing. Some would seem to generalize easily for anyone. Others seem to respond to personal strengths and weaknesses more particular to an individual. These points included:

- Self forgiveness for the many deficiencies found within on the endless soul journey that is our lot in the wake of our child's death.
- Forgiveness of others, relatives, friends and associates, who are less affected than are, who seem unable to help us in our time of deep trouble and need.
- The accepting, at last, of the finality of our loss, and that we must gradually unleash ourselves from our for-

mer lives and structure anew.

Learn to communicate value to spouses, friends, surviving siblings, our love for whom seems shrouded behind the totality of our grief. Find ways to give expression to our need to somehow memorialize our child, be it through writing a book, planting trees, sustaining scholarships, or any number of ways. Our need to preserve and safeguard our child's memory is real and deserving of our attention. A time comes for many to find new homes, jobs and purpose. These are often part and parcel of any significant change in our lives. Surrender to time, giving ourselves space within it to do our work. Use time to foster healing within, to enable us tomorrow with hope.

No recovery will return us to life as we knew it while our child lived. That life is forever gone and, to a certain extent, we may well have to accept that, as we perceive life today. The finest days of our lives may well be a part of our past. Somehow, we must recognize that this is not unique to surviving our child's death, but is often a portion of the human condition.

Olin is dead. As much as I would wish it otherwise, it will never be. He is not forgotten. His voice, his laughter, his joy, and his shortcomings live on in me. No day passes without thinking about him. I am grateful for his touch upon my life.

Yet, joy is again mine. Pleasure is no longer a forbidden or guilt-producing element in daily living. I live, gladly and with purpose, with Olin both behind me in time, but with me internally.

Is this not our goal, to heal, to find the strength to love both yesterday and today? Our children have been the richest part of our lives and today should reflect the grace of that love in all that we are today.

\*\*\*\*\*

“Olin is with me still, but now of the heart and memory. No matter what my span of days, each moment will yield its love for him. He will stand waiting on the other shore. When the day is over, and life gives up the mortal for the eternal, there will I find him, with laughter in the air, joy in the moment, and with love in the heart.”

... by Don Hackett, writing of his son Olin in his book, *Saying Olin To Say Goodbye*. Olin died by suicide on July 6, 1982.



### *Sequel Stands Beyond*

This world is not conclusion;  
A sequel stands beyond,  
Invisible, as music,  
But positive, as sound.

*Emily Dickinson*

## You're Here, Now You're Gone

You're here.  
Now you're gone.  
It went just that fast.  
Where'd it begin? Where'd it end?  
Like a flash of lightning in the sky.  
So bright and full of life.  
Now gone and full of emptiness.  
How'd it start? Why didn't it stop?  
No one knows, but everyone cares.  
Your spirit is flowing in the air.  
You're not here, but you'll never be gone.  
You will always rise with the morning dawn  
You hold my heart  
It will never be torn apart.

*... by Catherine Ludlow, in memory of her sister,  
Cynthia, who died by suicide on June 24, 1993.*

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cation of Catholic Charities LOSS Program, Chi-  
cago, Illinois.*



from *Song of Myself*

All goes onward and outward,  
nothing collapses,  
And to die is different from what any  
one supposed, and luckier...  
They are alive and well somewhere,  
The smallest sprout shows  
there is really no death,  
And if there ever was, it led forward  
life, and does not  
wait at the end to arrest it,  
And ceas'd the moment life appear'd.

*...Walt Whitman (1819-1892)*

## As Long As I Can

As long as I can, I will look at the world for both of us.  
As long as I can, I will laugh with the bird, I will sing  
with flowers, I will play to the stars, for both of us.  
As long as I can, I will remember how many things on  
this earth were your joy. And I will live as well as you  
would want me to live, as long as I can.

.. by Sascha. (*Sascha's son Nino drowned at age 3; years later, her daughter Eve died by suicide at age 21.*)

## A Suicide of a Sibling

© by Susan Kim



Sometimes I wish my sister Amy had died of cancer. Or a car accident. Or something I could neatly explain. Instead, she died by suicide when she was 18 years old.

I realize that most people are uncomfortable discussing death unless it's about a great, great aunt who died in her sleep at the age of 107. But at least if your sibling dies of a disease or an accident, people will say something relatively appropriate and not feel too uneasy before moving on to a new topic. Not so with suicide.

When my sister first died, I was so in shock, I had no idea how to answer the incredibly insensitive remarks like, "Why did she do it?" "What kind of problems was your family having?" "How did she do it?" Even people who did not ask these questions looked at me with a mixture of pity and curiosity.

To compound the taboo of my sister's suicide was the fact that sex was mixed up in it. She was an extremely outgoing, creative, charismatic person with no history of mental illness. Everywhere she spent time—church groups, school, the neighborhood pool— she was the center of attention because it was so much fun to be around her. Two teachers of Amy's spoke at her funeral, which was standing room only, and shared what a lasting influence Amy had on people.

So at first the suicide was such a surprise that foul play was considered a possibility before the note was found. In that note, we discovered that she had recently been diagnosed with herpes. You would think that's not such a big deal in the age of AIDS. But the college she attended was quite conservative, and the health services department had some awful brochures supplied by the religious right. They basically said your life is over and you'll never be able to have a child. The nurse there said her diabetes had exacerbated her condition. To top it off, my parents, like most parents, never really discussed sex. That doesn't mean we kids didn't know about it, but it did mean that the last people in the world we would ever discuss sex with would be our parents.

Suicide mixed with a sexual disease. It doesn't make for very good cocktail party chit-chat. So, taking my cue from my parents and society in general, I stopped mentioning Amy. When people asked me how many siblings I had, I would say "two—my surviving younger sister and brother." It just seemed easier, and people didn't have to feel so squeamish talking to me.

But two events changed that. One was a conversation I had with my mother about Amy. I thought, at least with a family member, I could discuss her. We were talking about travel—Amy's passion was traveling to Greece—and I was reminiscing about how enthusiastic Amy was about traveling and how much fun it would have been to see Greece with her. My mother said she just couldn't talk about it. It made her too sad. This was years after Amy's death. What the heck did she mean we couldn't talk about it? If I couldn't discuss Amy

with my mother, then who could I? I turned to her and said, “If I die before you, I hope you won’t refuse to talk about me.” I told her that I knew Amy would want us to remember her — and there are so many incredibly great memories. I called my brother and sister afterwards and told them the same thing: “If I die, please don’t pretend I didn’t exist. I’m telling you here and now that I want to be remembered.”

The other event happened very recently. I’m on a nonprofit board for an organization that helps women working in the Internet industry with career advice. We had a speaker who talked about women over 40 working in the cyberbiz. She talked about working as a chat host and said that one of the chats she hosted was about suicide. She mentioned her son who had died of suicide. I thought, “Here’s a woman my mother’s age who is telling a room full of strangers about her son’s death.” It was immensely comforting to see how she handled the topic. You could tell she had a wonderful relationship with him.

The board asked her to join our organization. I pulled her aside and asked about the suicide chat. I told her that my sister had died that way. She told me how sorry she was and asked her name. It’s the first time in my life I was completely at ease discussing Amy’s death. I knew the look she gave me was of empathy, not of pity, not of curiosity. She wasn’t being judgmental, thinking, “What kind of dysfunctional family do you come from?” Unless you have an immediate family member who died of suicide, no one can ever know the incredible pain and emotional baggage that come with it. I told her later that I get frustrated when people tell me they know what I’m going through because their grandmother died of heart disease recently. I am sorry, but it is not the same. A grandmother has lived a full life. She is not leaving behind middle-aged parents and young siblings who ask, “What could I have done to prevent this?”

I suppose there will always be extra emotional baggage tied to a suicide of a family member. But not discussing it isn’t going to make that baggage any lighter. In fact by not talking about it, I was contributing to the taboo associated with it. Of course this doesn’t mean I’ll introduce it into every casual conversation. From now on, however, when people ask me how many siblings I have, I’ll let them know the whole truth—I have a younger sister and brother, and I had another wonderful sister named Amy, who died of suicide.



### When Someone Takes His Own Life *by Norman Vincent Peale*

In many ways, this seems the most tragic form of death. Certainly it can entail more shock and grief for those who are left behind than any other. And often the stigma of suicide is what rests most heavily on those left behind.....

And my heart goes out to those who are left behind, because I know that they suffer terribly. Children in particular are left under a cloud of differentness all the more terrifying because it can never be fully explained or lifted. The immediate family of the victim is left wide open to tidal waves of guilt: “What did I fail to do that I should have done? What did I do that was wrong?” To such grieving persons I can only say, “Lift up your heads and your hearts. Surely you did your best. And surely the loved one who is gone did his best, for as long as he could. Remember, now, that his battles and torments are over. Do not judge him, and do not presume to fathom the mind of God where this one of His child is concerned.”

A few years ago, when a young man died by his own hand, a service for him was conducted by his pastor, the Rev. Weston Stevens. What he said that day expresses far more eloquently than I can, the message that I’m trying to convey. Here are some of his words:

“Our friend died on his own battlefield. He was killed in action fighting a civil war. He fought against adver-

saries that were as real to him as his casket is real to us. They were powerful adversaries. They took toll of his energies and endurance. They exhausted the last vestiges of his courage and his strength. At last these adversaries overwhelmed him. And it appeared that he had lost the war. But did he? I see a host of victories that he has won!

“For one thing, he has won our admiration, because even if he lost the war, we give him credit for his bravery on the battlefield. And we give him credit for the courage and pride and hope that he used as his weapons as long as he could. We shall remember not his death, but his daily victories gained through his kindnesses and thoughtfulness, through his love for family and friends, for animals and books and music, for all things beautiful, lovely and honorable. We shall remember not his last day of defeat, but we shall remember the many days that he was victorious over overwhelming odds. We shall remember not the years we thought he had left, but the intensity with which he lived the years that he had. Only God knows what this child of His suffered in the silent skirmishes that took place in his soul. But our consolation is that God does know, and understands.”

“There is no suffering greater than that which drives people to suicide; suicide defines the moment in which mental pain exceeds the human capacity to bear it. It represents the abandonment of hope.” - John T. Maltzberger, M.D., past president of the American Association of Suicidology, practicing psychiatrist, and teacher at Harvard Medical School.

.. from Obelisk, Vol. 15, #45, reprinted by permission from Loving Outreach to Survivors of Suicide (LOSS), The Catholic Charities of Chicago, Illinois. April 1994.



Two years ago, TCF officially adopted the terms “died by suicide” or died of suicide” to replace the commonly used “committed suicide” or “completed suicide” language. In its press release encouraging other organizations to adopt the new language, TCF noted that “... many suicide deaths are the result of brain disorders or biochemical illnesses such as clinical depression, but the stigma associated with suicide often forces family members to choose between secrecy about the death and social isolation. Their hesitancy to seek the support of the community increases their pain and makes their healing more difficult. Families who have had a child die by suicide are helped in their grief by the use of nonjudgmental language.”

## Suicide Note

*The following letter was written by David John Bernreuter before he died by suicide on May 12, 1987. David, an astute 22-year-old, was unusually well-informed about his illness. By his own description of his feelings, myths and assumptions about suicide are shattered, and we are allowed an insight into his motivation to end his life. In granting permission for its use, it is the hope of David’s family that the loved ones of other victims may find comfort in David’s words.*



Dear Mom, Dad, and Stephany:

First, some facts:

1. I LOVE YOU VERY MUCH.
2. I KNOW YOU LOVE ME VERY MUCH. If love alone would have made me better, I would be the most well-adjusted man on earth. Please don’t feel that you neglected to tell or show me how much you loved me.
3. YOU WERE NOT TO BLAME FOR MY CONDITION. I believe my mental illness was the result of a chemical imbalance in the brain. A certain percentage of people, from all types of family situations have a major mental illness. It was just the luck of the biological draw that I happened to be one of them. Whether it was

Major Depressive Disorder, Schizoid Personality Disorder, Manic Depressive Disorder, or Schizophrenia, my mental illness made my “life” unlivable. But you are not to blame for that. So please don’t let yourselves feel guilty.

4. I KNOW THAT YOU WILL MAKE IT THROUGH THIS. It won’t be easy, but you will have a lot of support from a lot of friends and relatives. Don’t be like me, the ultimate schizoid loner. Count on the support of your friends and relatives.

If you only knew what goes on inside my head. I know you will say that I “didn’t try long enough or hard enough.” I have been emotionally disturbed since late childhood. I now have a major mental illness. I tried as long and as hard as I could.

I’ve had all sorts of suggestions, like: “Repeat positive phrases over and over again. Don’t eat foods with yeast. Take Haldol. Don’t take Haldol. Accept Jesus as my ‘personal Savior.’ Quit smoking. Get a girlfriend.” And the list goes on and on...

I know that the above suggestions were made with the best intentions, but they lack an understanding of what mental illness is all about. That’s why I found something in common with other people who are mentally ill. When they told me how being mentally ill affects their life, I understood, because my illness affected me in the same way.

If I were to tell Uncle Ray that I had bought a gun, that I felt suicidal, he would have no alternative but to call the hospital and the police. And before you know it, I’d be back in the hospital. I’d rather be dead.

It’s not like I killed myself because I didn’t get an A on an exam or because I broke up with my girlfriend. Those are the kinds of depression that have a reason to happen. My depression comes without any help from the outside. Nothing bad has happened to make me depressed except my depression.

It’s not like I did this “on a lark.” I’ve had over a year to think it over. But I can hardly expect you to understand about something I myself don’t understand. I don’t know why I am the way I am. ‘The man who didn’t see it through.’ That is what this is. If given a chance to choose between an eternity in heaven or another go-round as a human of earth, I’m certain I would choose the latter.

And now for the business part of this suicide note: Cremate and scatter me (I don’t care where). All my money goes to you. Everything else, too. Do with it what you will, but may I suggest sending a portion of my worldly goods to a mental health research foundation of your choice.”

*As David requested, the family sent a donation to a mental health organization in hopes that someday a cure will be found.*

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## Resources: Organizations and Internet Links

TCF National Office  
P. O. Box 3696  
Oak Brook, IL 60522-3696

Phone: 630/990-0010  
Toll free: 877/969-0010

Fax: 630/990-0246

email: [TCF\\_National@prodigy.com](mailto:TCF_National@prodigy.com)

TCF National Web Site: <http://www.compassionatefriends.org>



## Resources: Books

Below is a selection of books, divided into two categories. Because medical research shows that suicide is strongly linked to clinical depression and that depression has a strong genetic influence, one category includes books about depression, including bipolar mood disorder. These books will not only educate you about the illness that probably afflicted your child or sibling who died, but they will also give you important information for other family members, should they develop clinical depression.

The second category includes books from bereaved parents, siblings and others who share how they dealt with the death of their loved ones from suicide.

### Books on Depression and Suicide

1. *On the Edge of Darkness*, by Kathy Cronkite (Doubleday, 1994)
2. *You Mean I Don't Have to Feel This Way?*, by Collette Dowling (Scribner's, 1991; Bantam, 1993)
3. *Moodswing*, by Ronald Fieve, M.D. (Bantam, 1989)
4. *An Unquiet Mind*, by Kay Redfield Jamison (Alfred Knopf, 1995)
5. *Night Falls Fast: Understanding Suicide*, by Kay Redfield Jamison (Alfred Knopf, 1999)
6. *Touched with Fire*, by Kay Redfield Jamison (Simon & Schuster, 1993)
7. *Why Suicide?*, by Eric Marcus (HarperCollins, 1996)
8. *The Noonday Demon: An Atlas of Depression*, by Andrew Solomon (Scribner, 2001)
9. *Darkness Visible*, by William Styron (Random House, 1990)
10. *Suicide Why?: 85 Questions and Answers About Suicide*, by Adina Wrobleski (SAVE, 1994)

### Books on Surviving the Suicide Death of a Loved One

1. *My Son, My Son ... A Guide to Healing After Death, Loss or Suicide*, by Iris Bolton (Bolton Press, 1983)
2. *Telling Secrets*, by Frederick Buechner (Harper, 1992)
3. *Stronger Than Death*, by Sue Chance, M.D. (Avon Books, 1994; Replica Books, 1997)
4. *Saying Olin to Say Goodbye*, by Donald Hackett (Old Cedar Publications, 1986)
5. *After A Suicide: Young People Speak Up*, by Susan Kuklin (Putnam Publishing Group, 1994)
6. *Knowing Why Changes Nothing*, by Eva Lager with Sascha Wagner (Options Publishing, Perth, Australia, 1997)
7. *Suicide of a Child*, by Adina Wrobleski (Centering Corporation, 1993)
8. *Suicide Survivors: A Guide for Those Left Behind*, by Adina Wrobleski (SAVE, 1994)



## Books on Grief That Include Deaths by Suicide

9. *After the Death of a Child: Living With Loss Through the Years*, by Ann K. Finkbeiner (Johns Hopkins University Press, 1996)
10. *A Broken Heart Still Beats: After Your Child Dies*, by Anne McCracken and Mary Semel (Hazeldon, 1998; paperback, 2000)
11. *In the Midst of Winter*, by Mary Jane Moffat ((Vintage Books, 1982)
12. *The Worst Loss: How Families Heal from the Death of a Child*, by Barbara Rosof (Henry Holt, 1994)



## Other Resources



### **Bipolar Network News**

National Institutes of Mental Health  
10 Center Drive MSC 1272  
Bldg. 10, Room 3N212  
Bethesda, Maryland 20892-1272  
Phone: 800-518-7326  
Fax: 301-402-0052  
E-mail: [info@bipolarnetwork.org](mailto:info@bipolarnetwork.org)

### **Suicide Bereavement Support**

SW Washington and NW Oregon  
Metanoia Peace Community  
United Methodist Church  
2116 NE 18 th Street  
Portland, Oregon 97212  
Phone: 503-699-8103

### **Friends For Survival, Inc.**

P.O. Box 214463  
Sacramento, CA 95821  
Phone: 916-392-0664  
Website: <http://www.friendsforsurvival.org/>

### **Loving Outreach to Survivors of Suicide (LOSS)**

Catholic Charities LOSS Program  
126 N. Desplaines Avenue  
Chicago, Illinois 60661-2357  
Phone: 312-655-7283

### **Suicide Prevention Advocacy Network (SPAN)**

5034 Odins Way  
Marietta, Georgia 30068  
Phone: 1-888-649-1366  
Fax: 770-642-1419  
E-mail: [act@spanusa.org](mailto:act@spanusa.org)

Website: <http://www.spanusa.org/>

SPAN is a not-profit national organization that links the energy of those bereaved by suicide with the expertise of leaders in science, business, government and public service to achieve the goal of significantly reducing the national rate of suicide by the year 2010.

### **American Association of Suicidology**

4201 Connecticut Avenue, NW  
Suite 408  
Washington, DC 20008

Voice: (202) 237-2280  
Fax: (202) 237-2282  
E-mail: [ajkulp@suicidology.org](mailto:ajkulp@suicidology.org)

Website: <http://www.suicidology.org/>

AAS is a nonprofit organization dedicated to the understanding and prevention of suicide. The website is a resource for anyone concerned about suicide, including AAS members, suicide researchers, therapists, prevention specialists, survivors of suicide, and people who are themselves in crisis.

## Suicide Awareness\Voices of Education (SA\VE)

7317 Cahill Road, Suite 207  
Minneapolis, MN 55439-0507

Phone: 952-946-7998

Toll Free: 888-511-SAVE

E-mail: [save@winternet.com](mailto:save@winternet.com)

Website: <http://www.save.org>

The mission of SAVE is to educate about suicide prevention and to speak for suicide survivors. Includes answers to frequently asked questions about suicide and depression, a suggested reading list and links.

## American Foundation for Suicide Prevention

120 Wall Street, 22nd Floor  
New York, New York 10005

Fax: 212-363-6237

Toll free: 888-333-2377

Phone: 212-363-3500

E-mail: [inquiry@afsp.org](mailto:inquiry@afsp.org)

Website: <http://www.afsp.org/>

Dedicated to advancing knowledge of suicide and how to prevent it. Includes suicide facts, support information and re-search articles.

## Remember Life

I do not ask that you forget your dear departed. I want you to remember. I only ask that you remember more than the moment of death, more than the funeral, more than the house of mourning.

Remember life! Remember the whole life, not the final page of it.

... *Rabbi Maurice Davis, TCF/Baltimore, Maryland*



## A Sibling Dies by © L. Nicole Dean

For Don

It is January first. My heart twinkles once again because the holidays are over.

How can a season of light bring so much dark? Thirty years ago, on Christmas morning, my brother died in our home by suicide in a very violent manner. He was 23; my other brother was 24; and I was 19 years old. Our family of five was irretrievably shattered.



Don, my brother who died, was so much a part of us. He brought so much joy in his living and then so much pain in his dying. Who am I to grieve him still? The memories well up every December like a deep dark night unbidden. Anger, sadness, rejection, guilt become my Christmas ornaments. "Give me back my family - give me back my Christmas, you creep. Give me back your laughter," I want to shout at him.

Who am I to miss him? Who am I to rage when he was the one in the grips of a pain so untenable that he could not speak of it, but only act upon it? Who am I to cry?

Well, I'm entitled. I'm a survivor after all. One doesn't get there on a water slide, if you know what I mean.

When Christmas rolls around, I do my dance with grief once again. Some years, it's a waltz; other years a tango. It doesn't seem to matter if it's two, twenty or thirty years since my brother died, I get out my dancing shoes. I don't go looking for pain like some wacky masochist. It finds me.

Some years I announce - around November 25th, "I'm over this." I act accordingly. I shop for Christmas Cards and don't go near my dancing shoes. It doesn't matter. They find me.

It's not like I didn't have therapy. I've had dance therapy, art therapy, regular therapy, travel therapy, friend-

ship therapy, biofeedback/hypnosis therapy, creampuff therapy, swimming therapy, forgiveness therapy, spiritual community therapy, law school therapy . . . Law School therapy? The fun had to end somewhere.

Seriously, losing a sibling is heart wrenching and no laughing matter. It took me ten or fifteen years to truly laugh again, let alone make light of myself. That just happened this year. No doubt, because I am writing of it, rather than speaking of it, which I rarely do. It feels safer to write. Other than to therapists, I've spoken of his death to three people in thirty years. Who could understand, I felt, and why diminish his being or expose myself?

I adored my brother Don - he made me laugh like a monkey. I adore both my brothers; as a child they were my world. Not very healthy perhaps, but it worked for me. Home life was chaotic and quite frightening because my father was more than a little nuts. My mother's energy was spent containing his insanity and keeping our bodies and souls together. She was part steel, part angora.

We never spoke of Don after his death. The community ostracized us; my father took a trip down devil's lane, and my mother mourned my brother until the day she died. I'm sad to say that we never had Don's picture in our home again, because the pain was too severe. It seems we could not get past it. We went to our separate corners and quietly mourned. It was different years ago; so much remained hidden. Self-healing groups were non-existent, shrinks were stigmas, and the Catholic Church unforgiving.

I couldn't save him. I was the last person he talked with on Christmas Eve. For months, I barely spoke and relived the shock daily. I ate a lot. Death by mashed potatoes. That was sure to bring him back. I retreated into a private world for several years where if I wasn't dead, I'd sure like to be. This is grief. And it does soften over time. It softens like water softens rock, in its flowing, gentle, rushing, mysterious way. It softens like a sweet whisper of a memory that lulls you to sleep, knowing that love knits the bones of despair together, tighter, stronger, more curious, more delicious than ever before. Knowing that the fires of your being burn the dross of despair. Knowing that the chamber of the heart is strong beyond measure and can take it and transform the pain into joy.

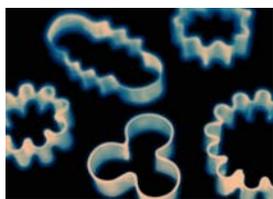


Joy for having known this person, for a day or ten years or two months. Joy for having the courage to be. For knowing yourself in many garments. For taking a risk to love anyone again: a neighbor, a friend, a cat, a lover, a stranger, yourself. The broken heart opens and mends itself. In the middle of the night, when no one is there but many are listening. Joy seeps into me. After all, I'm entitled. I'm a survivor.

## Stereotypes and Suicide

by ©Letizia Grasso

One of my deep sources of pain and sadness is my inability to vividly convey the essence of my son to those who did not know him in life. His vitality, his vivacity, his talents and charisma - not even two thousand words can come close to portraying the exact quality of his brilliant smile; his characteristics, his quirks, his uniqueness keep evading my best efforts. Should I ever be able to find the eloquence to capture him in words, I know the world would stand still and grieve, for the loss IS monumental.



To have him blanketed by stereotypes and dismissed as a suicide statistic, is one aspect of suicide survival I cannot accept. His was not a disposable life. So, I brazenly speak of my son's suicide, to break down the wall of silence and misunderstanding that surrounds this taboo subject. I sadly understand those parents that will not admit publicly the cause of death.

My first encounter with the public reaction to suicide was three months after my son's death. I attended my first "bereavement support" meeting. It was a group for bereaved parents. I entered that room and watched it fill with about thirty persons. The meeting started, the clockwise introduction began: "name, child's name, date of death, cause of death." As I heard parent after parent introduce their child and the many causes of loss, the litany was chilling: drowning, cancer, murder, car accidents, physical abnormalities, and finally more than two thirds around the circle it was my turn - at the word "suicide" the collective gasp that echoed in my ears will never leave me. I physically felt alone in this room where I had come to seek solace, understanding, help. Even in my semi-comatose state of those first few months, I knew I could find no identification and support within this group.



As time has passed, and I've regained some consciousness - I am constantly tripping over the stereotypes that envelop suicides. As I review my school's "crisis" policy in regard to suicide, the words "drug abuse, conduct problem, problems with the law, broken homes" leap out of the written page. As I read clinical studies regarding suicide and suicidal behavior, the same words can be found. In looking over prevention leaflets, the sentence "loving, supportive families" leap out resounding with accusation. In speaking with "professionals" I've heard their bias as they speak in amazement of those in a social class they do not easily identify with suicide. The director of "Family Services," in speaking of a recent suicide, actually used the phrase, "he was a member of the tennis set, not one you would think of as a likely suicide." A religious finally whispered to me how he saw suicide as cowardice. Our churches and established religions nervously skirt around the issue. I have never heard a sermon on suicide from the pulpit.

At a recent conference of the Compassionate Friends, in one of the sharing workshops, I encountered a mother whose child died of drug overdose. She came to the suicide workshop wanting us, the suicide survivors, to confirm for her that she did not belong there. I had met others who were just as defensive and insistent - "my son's death of drug overdose was clearly an accident not a suicide!!!" - and these very people would be shocked if I told them how insensitive and hurtful their words are. Most people want to be kind, they want to be understanding, they want to be supportive. The actual reactions, however, often fall short of these goals. I have come across the "curiosity seekers," the "accident gapers," the fearful, the "gregarious emotion" seekers and finally the defensive. Death is a reality most do not care to deal with. Our society has sanitized it as much as possible and removed it from the home to the hospital and funeral parlor. The only way to "Saran Wrap" suicide and render it "politically correct" for a society squeamish about life issues, is either to render it irrelevant or disposable.

So I find myself introducing my son to strangers with a mini-resume. My 20-year-old son, Alexey, an extremely intelligent, sensitive, talented, gifted young man, with many friends and strong family ties, hanged himself. I am not trying to be cruel in removing the security and luxury of people to distance themselves and dispose of my son's act. I am convinced that until these stereotypes are removed, the status quo will continue even when the statistics scream for attention. There is something wrong, very wrong, occurring. Until we can look at suicide clear-eyed, we will not be able to reach the understanding necessary to lower its occurrence.

A wise Rabbi said, "A person cannot offer hospitality, if s/he is not at home." So, I speak out, so that our society can finally feel at home with suicide and only then can it offer hospitality. All people within a society are affected by the stereotypes. No one is immune, not the professionals, not the well-intentioned nor the well-disposed. We, the suicide survivors, are left with the task to educate. Our loved ones have made us "the experts," and if we don't lead - how will anyone ever follow?



I just got back from a river rafting trip, where I found myself thinking about my brother a lot. He died 16 months ago of an overdose of morphine. I don't know why it happened; it happened. I didn't see the beginning of his life—he was three years older, but I saw the end. I can look at it now and see it in its entirety—his 33 years of living that I so much counted on and expected to last another 70 or 80 years. I thought I would always have him to talk to—about life, about family, and about ourselves.

The river was a meditative place for me. The rhythm of the oars, the gentle motion of the raft, the shore gliding by, the gurgle of the water as it seeped into and back out of our raft—all of this provided just enough stimulation and was hypnotic enough that I didn't want to do anything but sit and think. For a few days on the river, I floated without any of my day-to-day concerns, without the usual level of tension standing behind me.



What rose to the surface, visible in the clear water of my mind after the silt of all my worries sank to the bottom, were thoughts of my brother. Nat would have liked this trip. The rough beauty of the terrain and the quiet power of the water would not have been lost on him. He would have noticed the beauty of the full moon and the light on the canyon walls as the sun rose and set.

I have felt a lot of anger at him for dying, for taking his own life, for engaging in an activity so dangerous, for playing Russian roulette, for committing suicide. He left no note, he didn't say good-bye; he left a wife and two sons whom he loved very much but who, like me, were not enough to keep him alive.

It wasn't the anger, though, that I felt on the river. I just remembered him. Grief is at its sharpest when, after a death, he all of a sudden flashes into focus so real and so present that I can hear his voice as if he has just spoken to me. I can imagine the scent of his hair, remember the texture of his face as I touch it, and I can see him walking and talking as if he were only there a moment ago. At these times, the grief flares up; the wound feels fresh and sharp with memories of the love, the charm, and the grace.

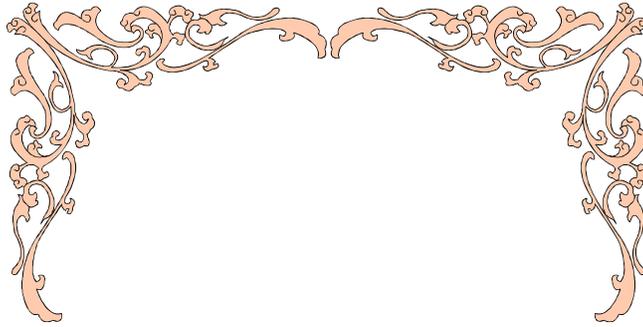
I realize, both with gratitude and with anguish for the wound this reality carries, that he is not someone I can let go. These memories will come to me for the rest of my life. He is truly a part of me. He is mixed up in my blood and my bones and the electrical impulses of my brain. And in whatever way all of these things go together to form a soul, he is a part of that too. There is no escaping him. This is the gift and the price of love-- it doesn't end.



My brother was there in the river's sand and mud, in the full moon, the constantly flowing cold water, the clear dry air, the red canyon walls, and the blue sky. And he was there in me. And I was there, alive and more appreciative than I would have been before he died. I was more aware of my connection to my surroundings—that one day my body will be river mud, water, and bones like driftwood. What form

my love will take then, I don't know. Maybe if there is a river and desert light offering delight to someone's senses, that will be enough. I don't know.

... Emily Moore, TCF/Los Angeles, California



### *I don't Know Why*

I don't know why.  
I'll never know why.  
I don't have to know why.  
I don't like it.  
I don't have to like it.

What I have to do is make a choice about my living.

What I do want to do is accept it and go on living.

The choice is mine.

I can go on living, valuing every moment  
in a way I never did before,  
or I can be destroyed by it and,  
in turn, destroy others.

I thought I was immortal.

That my family and my children were also.

That tragedy happened only to others.

But I know now that life is tenuous  
and valuable.

So I am choosing to go on living,  
making the most of the time I have,  
valuing my family and friends  
in a way never possible before.

