



Journey to Healing

A Newsletter for Survivors of Suicide

First Quarter 2018

Empty Space

After a spouse's suicide surviving parents may look into the rooms of their home and see remnants of a family life that is upside down. As a family begins to acclimate to the disorder posed by the beginning of the grief journey, it might be useful to realize that a world where meaningful structure has been disabled by a traumatic loss adds an element of strangeness in familiar spaces. A teen told the story of a washing machine that was delivered on the day that his father died. (Silverman and Kelly, 2009). The washer was going to be installed by his dad. The boy said that after his father's death it sat in the hallway for months, and every time he looked at it, he wondered how his mother and siblings were going to manage.

This vignette speaks not only to disruption, but to stalled meaning. We don't think much about our washer as long as it keeps up with the pace of our family's needs. We count on it because we value our readiness to face the demands of our dynamic lives. But when a loved one dies by suicide, parents may feel too stunned to recall the meaning of the routines and activities, the tools that facilitated their lives and filled their days with a sense of purpose and accomplishment. The immediate aftermath of suicide includes the bewildering puzzle of time and meaning. What to do with it?

Another example is the dinner table. Children in grief sessions have been known to draw the empty chair that was left behind by the deceased loved one. The silence of this space at the table can speak loudly. In response, we can rotate our seats. Again, disruption, and it seems a little crazy. But we find ourselves doing such things as a rational response to the numbing void of loss and the unresolved state of our new lives.

Our bereaved children's grief processes are unpredictable. They have lost their innocence about the permanence of relationships. Their grief concerns the loss of the parent as well as a confrontation with their own mortality. And their grief is a little different at each developmental stage, but still does not conform to any patterns we can anticipate. A teen may want privacy around his or her grief, then later feel critical of you for not having spoken of her deceased father in a while. School-aged children may avoid painful feelings with constant use of video games or sports, but is their agenda to sideline their grief so that they can keep an eye on your stability? Younger ones may verbalize little about the loss, but react with a tantrum when it is time to turn off the TV. We learn that their little losses are really about this one life-changing loss. It stays just beneath the surface.

The absurd quality of a life that has been changed by an irrational act leaves the details that previously structured our lives to now feel burdensome and meaningless. We eat fast food, instead of preparing dinner. Our teens seem to find comfort outside of the house, rather than at home. Our rambunctious sons seem quiet now. We long for closeness with our children, yet feel slightly estranged as we come to grips with the change in

all of us. Few of us have coping skills for profoundly changed reality. Does it help if we talk about its strangeness? I think it can be helpful to acknowledge how different much of life is after loss as long as our children don't get the message that they are responsible for our confusion. The identification of contrast can be grounding. We must anticipate it as part of the grief process in order to feel normal and to console ourselves and our children.

Self-help literature for recovering addicts and co-dependent adults espouses the need for structure and order in personal spaces as a requisite for healing. It is one of the essential ways to focus on responsibility for our own well-being and growing awareness. I remember a judge directing one of my youth clients who had recently gotten into trouble that he must make his bed each morning, a minor, repeated task that became a metaphor for the new day and the young man's role in it. The point is meaning construction: "I am still here. I am slowly picking up one piece at a time of my family's life."

After we have begun to ground ourselves with rest, a support system and basic order inside the house, we can focus on the conundrum of our bereaved children's unique needs within their developmental moment. Joe Biden, in his recent TAPS talk about his grief, attested to his reluctant observation that good can grow out of tragic loss. He identified "bonds of steel" that developed between himself and his young sons after the death of his wife and baby daughter. He said that he knew he was going to make it only by noticing that his worst days were occurring farther apart. Reconstruction after loss of a loved one is arduous, focused, dedicated work. For ourselves and our children, disorder and void will be reshaped into meaningful order with remembrance and intention.

Fortunately, SOS offers services to adults and children of all ages. Fortunately, there is plenty of literature to guide bereaved families through the strange, unfamiliar terrain of grief. We can allow ourselves to "feel my way along the wall," (Rilke) and not give up on creating an understanding space for ourselves and our children to come to terms with profound loss in their own way. We are their witnesses.

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A Gentle Reminder:

Fortunately, the Greenville area has a self-help/support group called Survivors of Suicide, "SOS", for family members and friends of persons who have completed suicide. This free and confidential group is sponsored by Mental Health America of Greenville County.

Groups meet on the first and third Tuesday of each month at 7:00 - 8:30 PM at St. Michael Lutheran Church, 2619 Augusta Street, Greenville, SC 29605. If a family is too fragile to attend group, we will work with them to meet privately and gently guide them into the group. Additionally, CRISISline is available 24/7 at 864-271-8888 and a callback can be returned by a survivor of as close to the type of death you have experienced.



Inspirational: Engage with Life

By Becky Kay

In January, as we begin a New Year, many of us have New Year's resolutions: losing weight, getting more exercise, or doing something positive to improve our lives, such as being more understanding towards our loved ones. Former Vice President Joe Biden recently came out with a memoir detailing events in his life and what he learned from the tragedies. You might recall that he lost his first wife and baby daughter in an automobile accident in which his two sons were very seriously injured. Joe Biden raised these two boys as a single parent, and one of his boys recently died from brain cancer. Joe Biden, in his book, makes a very poignant observation when he says, "by engaging with life, as bewildering as this may seem after a tragedy, we can thrive again." Truer words were never spoken, especially coming from someone who has known a few tragedies in his life.

In the immediate aftermath of a completed suicide, it is very normal to want to retreat into the safety of one's home and stay there because it is safe. Survivors seek to surround themselves with loved ones who will support and comfort them. This is okay in the immediate aftermath of the suicide, but it is important that survivors eventually move beyond those comfort zones and begin to "engage with life." In the beginning this can seem like a very painful act, but engaging with life is one way to attempt to rebuild a life that has been shattered by the completed suicide of a loved one. This should be done very slowly and deliberately, for example, by going out shopping for groceries with trusted loved ones who can serve as a buffer for the survivors. In the immediate aftermath of a completed suicide survivors may feel as if they are wearing a sign that says with big letters "FAILURE." Very often this word is labelled by the survivor and not by the world at large. It really has no bearing on reality. People are a lot more understanding than we give them credit. Engaging with life gives people the opportunity to offer condolences as well as support.

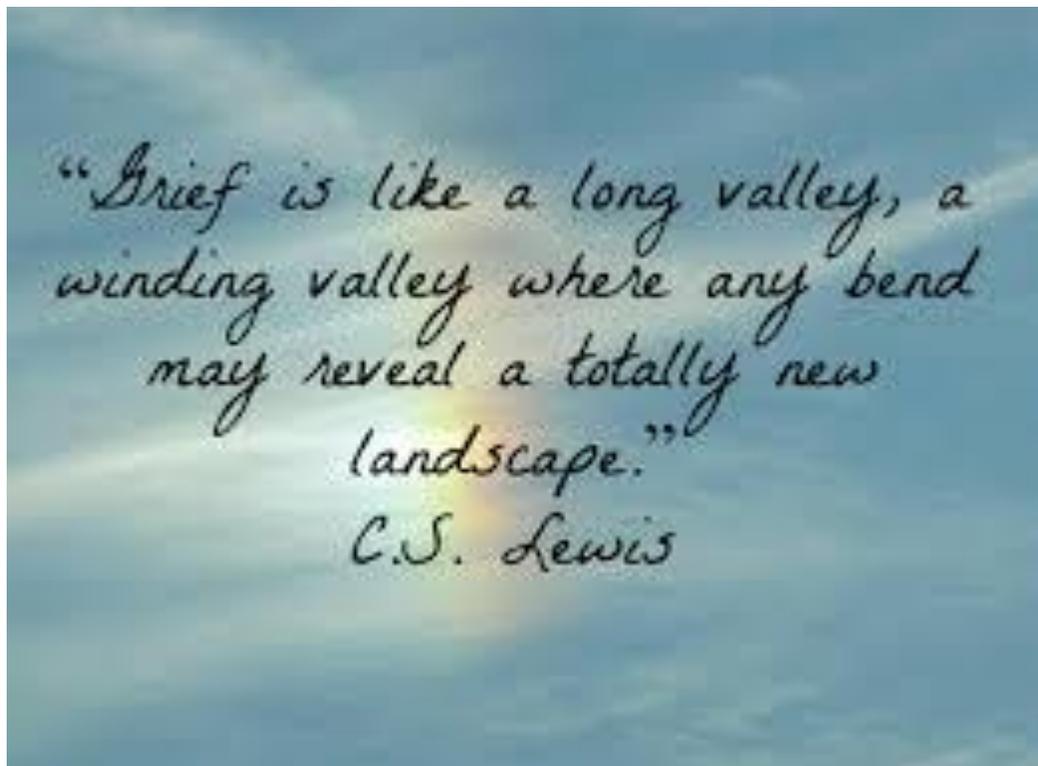
Going back to work is another action of engaging with life. Survivors don't know what to expect when they return to work after a period of absence. Engaging with life in the workplace provides survivors the opportunity for co-workers to offer support and condolences and to welcome the survivor back to the work environment. It takes real courage for survivors to return to a job after such an absence. There will be a lot of questions and in some instances a lot of erroneous speculation. In engaging with life, it very important to share information from an honest standpoint. Also, it is important to share only information that the survivor is comfortable in sharing. Suicide is a different form of death. It is very clear when a death occurs as a result of cancer or a heart attack or an automobile accident, but it is not always that clearcut when the death is by suicide.

There are a lot of misunderstandings about people who complete suicide, such as that it is a cowardly or selfish act. It is neither. It is an act of desperation and a clear statement that the pain in someone's life has become intolerable and there is no other way out except to end one's life. This is a position that is difficult to explain or understand, but that is the state in life in which this person found himself or herself in at the moment that fateful decision was made. No one can understand the pain of mental illness unless they have been there. Survivors often hear comments such as, "They had everything to live for. Why did they ever do this?" Survivors often feel the same way and ask the question, "WHY?" It is okay to respond that the survivor themselves are asking the same question. As survivors engage with life, nothing is more important than to respond with an honest answer. That is one way to dispel rumors and other speculative reasons as to why someone would end their life. Again, that is one of the great mysteries in grieving the loss of a loved one from suicide. Survivors are

challenged to live with mystery with the question: Why did my loved one do this? In many instances there is no one precise answer to that question. It is okay to respond in like manner.

As survivors engage with life, they might encounter people asking inappropriate questions about the suicide. Survivors should never be in a position where they feel uncomfortable in responding to insensitive questions or details surrounding the death. A simple response such as “that is too painful to talk about at this time,” should be an appropriate response to someone who is seeking information about the death. Again, survivors should always feel comfortable in responding to questions.

As we begin a New Year these have been a few suggestions for survivors who struggle with engaging with life. If there is to be a life after losing a loved one from suicide—which there will be most definitely—it is important to engage in life at the appropriate time and not put off this engagement too long. Survivors’ lives, future and happiness depends on how well they engage with life. One of the safest statements to be made in the aftermath of the suicide of a loved one is that the life one had with the presence of this person is over and not to be retrieved. How well a survivor engages with life will directly determine his or her future, including the goals and happiness that await in the time of healing. It takes a great deal of courage to engage with life, but the rewards can be unimaginable and very fulfilling. Such a life will not happen automatically. But it will, if the survivor makes the conscious choice to *engage with life*, as unimaginable as it may seem in the aftermath of a suicide.





Reflections by Becky

When people first come to our support groups, we sometimes hear them say, "I know I'll never 'get over' this." Or they might ask, "Does anyone ever 'get over' this?" We also hear these same worries from people who are in individual counseling. Because this is such a commonly held belief it may be worth a bit of examination. When we hear this, we think we understand what is meant, but we probably should not assume that we know with certainty because everyone grieves differently. So, it is worth considering who is making the statement, how recently their loss occurred, and the meaning this may have at the time. Perhaps this is within the first six months when the loss is very fresh, and the grief is unbearably raw and painful. In the early weeks and months, we know that survivors often feel so thoroughly consumed by the depth and magnitude of the pain that they simply cannot imagine it subsiding or that they could ever feel better. We understand that early on many people are consumed by disturbing questions and thoughts about their loved one's last moments, about details of the manner of death, and what could have driven their loved one to do such irrevocable harm to themselves and to their closest relationships. And because suicide is sometimes interpreted as a message to the survivor about the meaning of their relationship, thoughts and accompanying feelings are overwhelming and difficult to regulate, and survivors may feel that they are at the mercy of an out-of-control rollercoaster of emotions.

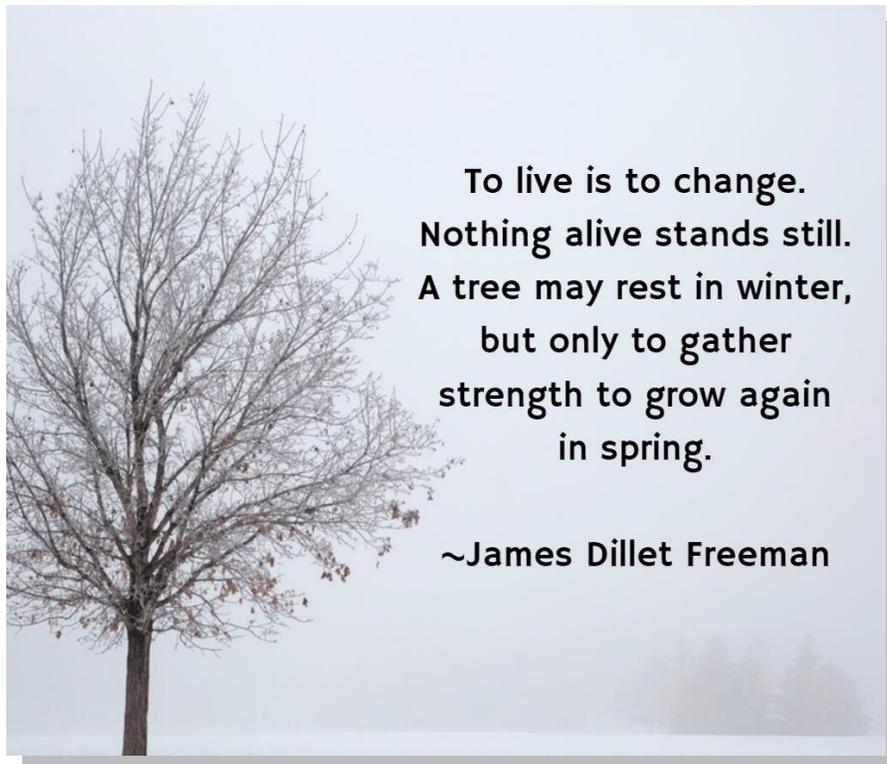
People come to SOS in part because they cannot see an end to the inner turmoil but also because they feel that they cannot go on if it doesn't stop. The group process helps when survivors who are farther down the path intercede to assure the newly bereaved members that the rollercoaster will gradually slow down and that regaining a sense of equilibrium is not only possible but likely. In a recent monthly group, a newly bereaved mother expressed a sense of anxiety over changes she had begun to experience in her pain. She had started to notice that she was feeling just a little bit better in some moments, and then she worried about the meaning of feeling a tiny bit better. She seemed quite surprised to notice sporadic relief, and then she expressed her worry, Could getting better mean that she might forget her child? The fear of forgetting one so dear can present an element of distress that may make the grief feel somehow comforting, as evidence of the importance and the ongoing centrality of the relationship. What did it mean that she was starting to feel better? In the beginning many people worry that feeling any less pain might mean that their love is fading, or that their bond is loosening, or that their memory is fading or that they aren't as loving or as supportive as they wish they had been. And when survivors attach these negative self-appraisals to the experience of healing, then the questions about the diminishment of grief take on a new meaning.

People hesitate to express these questions openly in groups, but you can hear the questions just beneath the ones that are voiced. *What does it say about me as a parent if I begin to heal? What does it say about me as a spouse, as a child, as a sibling? What would my husband think about me if I got better? What would I think about myself if I get better?* When survivors believe that in healing they are violating their standards (or others' standards) of what it means to be a loving, dedicated parent, spouse, child, or sibling, it will be much more difficult to experience the healing as beneficial when it starts to happen, and it will be more difficult to just allow it to be. And if there was conflict in the relationship with the loved one, survivors may feel that they do not deserve to heal. In the same way that people often do not recognize themselves when they cannot stop crying, or when they lose their concentration and put a gallon of milk in the oven, when longer stretches of relief begin to come together they may also wonder, *Who is this person who doesn't like to go to the cemetery anymore? Who is this person who can laugh at a dumb joke?* Please understand that I do not mean to make light of the process of getting better. I certainly don't mean to suggest that "it just happens," because it does require work. For most survivors it involves a good deal of mourning, life review of the loved one, examination of the relationship with the loved one, self-examination, and more. A central factor involves the degree to which the loss challenges how

we understand who we believe ourselves to be, that is, our core identity. Some relationship losses seem to challenge identity more than others. We have seen that talking openly about multiple angles of the tragedy and examining the meaning one makes along the way appears to help people make progress. Suicide loss is a tragedy that still carries a great deal of stigma, so people need permission to be fully “out” somewhere. SOS is a place where survivors do not have to be “in the closet” about the suicide or about the struggle to heal. At least this appears to be true of the survivors we see. A therapist recently received a letter from an SOS member expressing surprise that she was beginning to feel hopeful. This was someone who had openly expressed all lack of hope for a future when she first attended the group. She stated this in such a way that others worried for her.

She explained in the letter that she had been in such a state of shock and dismay at the time that nothing would have made her believe things could ever be different. She also admitted her ambivalence about whether she should get better. But this letter was sent to let her therapist, and fellow group members know that despite her initial total despair she had benefitted from the group and was starting to feel hope and to believe that things could change. And she wanted to express her gratitude for their support.

We don’t claim to have any magic formulas here. But we do see people reconstruct meaningful lives in the wake of tragedy. This is part of why we do this work. Of course, we only know about those who choose to come to us. I don’t doubt that there are other ways to survive this loss and to heal. But we see people giving expression to their grief, examining, questioning, connecting and sharing openly with others in groups and with their therapists. And we do see healing. In fact, I think it would be safe to say that we see most people healing. Does that mean they “get over it”? It may be more accurate to say that they are leaning in and moving through their grief with the support of their fellow survivors. As our letter-writer said, listening to others share their healing process helped even when she didn’t realize it was doing anything, and she now believes that it was the “strength, courage and understanding of her fellow” survivors that gave her the courage to keep moving forward.



**To live is to change.
Nothing alive stands still.
A tree may rest in winter,
but only to gather
strength to grow again
in spring.**

~James Dillet Freeman



Inclement Weather/National Holiday Policy

We are in full winter ~ with that comes storms and cancellations. Your well-being is always the most important thing to us. Please make certain that we have all your contact information so we can keep you up-to-date. In the event of inclement weather or a major National Holiday, you may look on MHA's website at www.mentalhealthamerica.org or feel free to e-mail or call either Alice or me if you are uncertain of our meetings. Becky's cell is 864-616-9413 and Alice's cell is 864-884-3283.

The main priority is to care for you, and you to care for yourself.

Your Facilitators,

Becky

Alice

Deb

