WHAT WERE THEY THINKING?  FACTS ABOUT SUICIDE AND GRIEF

It is very difficult for most of us to imagine the pain of a suicidal person. When one is poised on the brink of suicide, there is a strong sense of ambivalence. It isn't really that they want to die; rather, life's problems have stacked up so high that they just don't see any other way out. At this point, a tunnel-vision effect sets in; even though there are other ways out and people who can help, the suicidal individual can't recognize them. This tunnel-vision also may prevent the person from understanding the impact that their suicide will have on family and friends.

In 2003, statistics show there were 458 suicides in Alberta. There is usually a 25% margin of error allowed, bringing the number of possible suicides to 573. For every suicide, there are 1 to 100 attempts, making a total of 57,300 suicides and attempts. And for every suicide and attempt, one to five people are significantly affected. Therefore, 286,500 Albertans, were affected by suicide in 2003.

One very common reaction to suicide is a sense of guilt felt by the survivors left behind. Suicide is a very private, individual act and the motives for suicide are extremely complex. Seldom is one event significant enough to bring on suicidal feelings. Usually, it is a long history of problems where the person sees their own life steadily going downhill. Friends and family may think they "have it all", but the suicidal person can't live up to their own expectations.

William Srycon, in *Darkness Visible: Memoirs of Madness*, describes the resulting feelings of hopelessness for the future and helplessness to effect any change:

> What I had begun to discover is that, mysteriously and in ways that are totally remote from normal experience, the grey drizzle of horror induced by depression takes on the quality of physical pain. But it is not an immediately identifiable pain, like that of a broken limb.

> It may be more accurate to say that despair, owing to some evil trick played upon the sick brain by the inhabiting psyche, comes to resemble the diabolical discomfort of being imprisoned in a fiercely overheated room.

> And because no breeze stirs this cauldron, because there is no escape from the smothering confinement, it is entirely natural that the victim begins to think ceaselessly of oblivion.

Generally speaking, suicidal individuals are suffering from intense emotional and psychological pain. Their self-esteem is very low and there is a marked sense of sadness. Suicide is not a mental illness and is not genetically inherited. It is a devastating symptom of many complex problems and it can happen to anybody, anywhere, at anytime. It is not uncommon for the surviving friends and family to be left feeling suicidal themselves. Watch for marked changes in their personality, eating habits, sleeping patterns, appearance or sociability. Signs of suicidal feelings are present in 80% of suicides. If you are concerned, ask the person directly, “Has it been so bad that you have thought of killing yourself?” Listen non-judgmentally and direct the person to counselling or other resources, (i.e. the Distress Line: 482-HELP (4357)).

The bottom line in suicide as well as grief is that talking about it really does help.

Statistics from the Office of the Chief Medical Examiner.