



By Nan Zastrow

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I never liked being referred to as a “survivor of suicide.” However, I accept the literal translation. The word “survive” is derived from two French words. One means “to live” and the second means “over or beyond.” To me, living beyond is more than surviving. It means rising above and beyond the dreadfulness that society associates with choosing to die. Learning how to survive after our son’s death was harder than any other loss we had ever experienced. We developed unique coping skills to deal with society and our own feelings of disbelief that something could go so wrong.

Suicide is described as the deliberate taking of one’s life. In some cases there is a cry for help, but sometimes suicide occurs without any warning at all. When that happens, families often experience a lifetime of searching that may never result in rational answers to “why?”

Our son, Chad, died in 1993 at the age of twenty-one, when suicide was considered taboo and wasn’t spoken about publicly. Families affected by suicide were often avoided, and whispers of “Did you hear?” were spoken quietly. Friends offered their sympathy without acknowledging how the person had died. Others chose to say nothing. A few churches considered the departed soul unworthy of Christian burial. Family survivors seldom spoke the stigma word “suicide” out loud; instead they used euphemisms such as “accidental death” to protect themselves, while they silently wore a cloak of shame.

Chad’s death was unexpected by those who knew him. Chad was a typical young adult, earning a living and planning a future. He paid his taxes just two

days prior to his death. He sent his fiancé roses and laid away a new fishing pole at a local store. Weeks earlier, he had made preparations to move home so he could save money to buy a longed-for boat. One of his commanders in the Army National Guard told us he teased and joked with them on a training maneuver. In addition to Chad's fulltime job, he enjoyed fishing, hunting and outdoor sports. These are signs of living life, not signs of someone designing his final moments or his death.

When we were faced with surviving Chad's suicide, we quickly tried to understand what had caused him to act with such a permanent result. We accepted that suicide was a beast, not to be feared but explored, understood and prevented. Through the information we read, we quickly learned that, in those years, suicide was generalized and fell somewhere between mild, mental instability and high risk for self-destruction. There didn't seem to be a category for "without warning" or unplanned. But we felt differently; we knew both sides of suicide intimately. Ten weeks after Chad's unexpected death, his fiancé took her life, too. Both suicides were distinctly different—one unplanned, without warning, and one precisely planned and carried out. Regardless, both left families crippled by the wounds and wondering how they would survive their losses.

I believe all suicide involves two prominent factors, *fear* and the absence of *hope*. When an individual is confronted with fear, whether real or imagined, it overrides the choice to die and all common sense. Therefore, it self-justifies the act. In addition to countless other reasons, fear may be founded on relationships, physical health, danger, financial insecurity, job loss, loss of identity, dread or something completely unknown. Loss of hope is the final blow when nothing seems possible to change the course of one's path or future.

In August, 2012, *USA Today* reported a twenty-two percent increase in suicide among active-duty soldiers. An Army analyst theorized that the higher rate may be due to the drawdown of troops from combat. Soldiers are spending more time at home and the emotional adjustments are a struggle. Former Green Bay Packer linebacker, George Koonce considered suicide when he found himself out of work and depressed. (Article, *Associated Press*, 6/9/2012). His forced retirement left him isolated and a hero in transition. He was unprepared for "life after." Fear of the unknown precedes some end-of-life choices.

Gratefully, we learned not to judge or generalize. Basically, there are two kinds of suicide: planned and unplanned. Planned suicides occur when a person has

contemplated the act, often in great detail. About eighty percent of those who are suicidal demonstrate through verbal or behavioral cues a cry for help, and they want someone to acknowledge their pain. For those suicidal persons, there is a window of opportunity when a caring person can help them choose life over death. However, there are also situations where no matter what interventions take place, the victim doesn't see an option for relenting, and that victim will complete suicide.

Unplanned suicides also rate significantly high. Stressful life issues, drug and alcohol dependency and some mental health issues such as bipolar can lead to unplanned suicides. I personally believe that unplanned suicides can sometimes occur as a result of single or repeated triggers, aggravations or social harassments. And finally, some unplanned suicides occur acutely, randomly and suddenly, without provocation due to an emotional trigger or aggravation.

We've listened to countless stories of suicides that weren't planned, and couldn't be verified by behavior or verbal clues. There was also no medical history of mental disease. For some reason, usually unknown, the individual makes a fatal decision in a nanosecond of time. It just happened, reason unknown. Such stories include:

- A person who took his life because of a devastating medical diagnosis;
- A person who suicided because of financial difficulties that were overwhelming and unfixable.
- A teen who died "accidentally" when using drugs
- An alleged criminal who suicided when pursued by law enforcement.
- A child who succumbed to suicide as a way to escape bullying.
- Military personnel who felt overwhelmed by their circumstances.

Suicides like these leave family wondering what went wrong. Prior to the moment of death, they perceive the beloved family member as being of sound mind, decisive and rational. There remains the possibility that there are "things" a family didn't know about the victim, but for the family experiencing the death without such knowledge, the grief aftermath is a nightmare. This article acknowledges those survivors. It's written for those who feel guilty, who believe that they "should have known." I'm sorry you didn't know; we didn't know either. Chad's death by suicide was random, a surprise and a mystery.

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In writing this article, I don't mean to suggest that unplanned suicide is any easier than planned suicide. Suicide death of any kind is a devastating experience for every survivor. I merely wish to acknowledge that society should not generalize that suicide is unthinkable, selfish or committed primarily by those who have serious mental disorders. Every victim has a unique story that should be honored. This is an important piece in the puzzle of suicide. If the story could be told, I believe that in every case we would sympathize with the victim and wish we could have resolved their plight.

Statistics say that for every suicide, there are at least six people affected by that death. I argue that those numbers multiply rapidly, when the death of a loved one occurs without warning. By nature, we are compelled to seek answers, and as we investigate the situation, we touch the lives of others who can't imagine our loss. It is very much like those who seek answers after other senseless deaths such as homicide and abuse. Answers that lead to reconciliation may never be attainable.

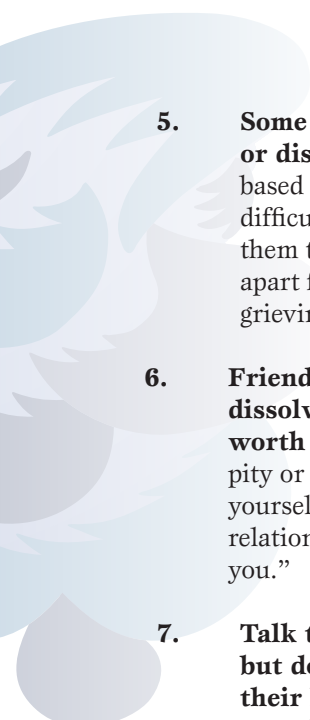
After a suicide, family and friends have some unique challenges that require special coping skills to heal their pain. Here are a few suggestions that may help in the aftermath of uncertainty:

1. **Ask questions and seek answers for as long as you feel you need to.** Planned or unplanned? Only you and a few may want to know, but it can aid in relieving guilt or anger with the loved one. Answers will not take away grief, but, it's sometimes necessary to exhaust the human brain with a lot of analytical information when trying to understand why. It's likely there are no plausible answers that will ever be satisfying.
2. **Remember, suicide is just death by another name.** Disengage yourself from the ugliness of statistics and media reports about suicide deaths. Too many details and too much information can lead to many sleepless nights and unsettling thoughts. Every human will die in some way. It will not change the fact that your loved one will not be coming home, so why cause unnecessary stress over how he died.
3. **Expect that during the first few years you will experience emotional disorder in your life.** Your imagination will be your enemy



and may punish you mercilessly. You may feel isolated from family and friends, often as a result of your personal guilt and thoughts. Find a place where you feel safe or someone you feel comfortable with to help you during these troubling times.

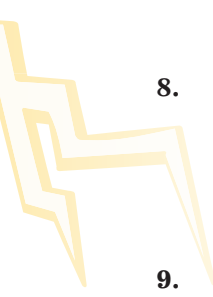
4. **Don't make excuses for your loved one's actions.** You don't need to defend your loved one's death. Tell your story based on your comfort level. It's not necessary to tell everyone the details of the death, even if they ask. With some people, you may feel comfortable revealing intimate feelings. None of us know what the victim's thoughts were at the very moment when he/she took their life.



5. **Some family or friends may express shock or disbelief.** Their response may be genuine based on the person they knew. It may be difficult for them to understand, too. Allow them to integrate their feelings with their story apart from your personal analysis. They are grieving in their own way.

6. **Friendships that imply judgment or that dissolve based on the cause of death are not worth trying to salvage.** You do not deserve pity or assumptions. You will only frustrate yourself by trying to maintain a one-sided relationship. A genuine friend walks “with you.”

7. **Talk to others with similar experiences, but don't expect their interpretation of their loved one's death to parallel yours.** It may give you comfort to know their story and what to expect in the days ahead. It may even help you to accept that you are not alone. But their story is theirs, and yours is still evolving. In time you will acquire your own story that you believe to be true.



8. **Tell personal stories about your loved one.** Every person has a legacy that tells who they were and what they meant to you. Share the stories about how s/he lived, not how s/he died. Love is unconditional and it never dies.

9. **Accept that you will grieve differently.** Your relationship to the person who died was individual and unique. Your feelings of grief will be measured by the depth of your relationship. No one's grief will be quite the same as yours.

10. **Let God in when you are ready.** Traumatic death challenges the belief system and may temporarily interrupt your relationship with church and God. Faith is there to protect you. It can't prevent bad things from happening, but, it can help you pick up the pieces and restore your life again.

11. **Turn away from guilt.** Guilt implies that you control the situation. You had no control over your loved one's action, whether planned or unplanned. After the fact, some people find a way to take control by becoming an advocate or a companion to others going through loss.

12. **Get help from professionals if you need it.** You've experienced a traumatic death. Find a professional certified in dealing with trauma to coach you. Join a support group that feels right to you. It can't take away your pain, but it can educate you about what is normal grieving. It can also help you connect with others who have also experienced loss.

13. **When you are ready, speak the word “suicide” when talking to family and friends about your loved one who died.** The word is not something to be feared. I found that I'm not afraid to talk about suicide anymore. There are all kinds of death, many with stories just as troubling, and I am a survivor who is willing to talk to others about suicide which personally affected me.

14. **Live vicariously in honor of your loved one.** Finish something s/he started. Rally around a cause that enriches the lives of others. Do something s/he would have chosen to do. Take up a hobby, start a business, write a book, create a memorial. Live your life purposely and fully. Allow his or her memory to live through you.

15. **Teach others about suicide.** Expel the myths and share the facts about suicide, in general. If we don't talk about it, we can't teach others about our grief. When you live as a true survivor—who lives beyond—you live as an example of triumph over tragedy. It will heal your scars and honor life and the living.

It has taken two decades for me to learn to live beyond the consequences and the taboo of suicide and to fully accept Chad's death. There are days when unresolved and lingering thoughts still urge me to seek more answers, but most important I've learned that no one can ever assume who is at risk for suicide. Suicide does not represent the rich or poor, young or old, educated or uneducated. It occurs in any religion. Suicide is not a disease, nor can it be inherited. Suicide can be planned. Suicide can be aggravated and result from certain triggers. Suicide can be unplanned, random and occur without warning. One nanosecond in time changes countless lives forever.