



The Lighthouse

Touched By Suicide
Survivors Gather

Volume 9 Issue 1 Summer 2011

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The Suicide Support group gatherings are open to all individuals who have been touched by suicide. The group meets year round on the first Wednesday of the month 7:00 – 8:30 p.m. at Hospice of the Rock River Valley, between Dixon and Sterling at 264 Illinois Route 2, Dixon.

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Newsletter of Touched by Suicide, Survivors Gather

Volume 9 Issue 1

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Out of Darkness Walk

The 2011 Sterling-Rock Falls Community Walk will be held Sunday, September 11 starting at the Dillon Home Museum in Sterling. Check in will begin at 1 pm and the walk will start at 2 pm. To register: <http://afsp.donordrive.com/event/sterling>

Monies raised from this event help fund research on suicide prevention and treatments for depression as well as many other resources and activities in Illinois.



From the Editor AS WE SEE IT: Why Oh Why?

Why is it that a person can have a certain set of life experiences and die by suicide while another person has the same or very similar life experiences and thrives? It is a puzzle as we look at lives unfolding over time and realize that there is no easy answer to this baffling question.

While there are many explanations and theories that attempt to provide a certainty that we "know exactly" the cause of a suicide, can we know enough of the circumstances? Or can we ever know "the rest of the story" as one long-time radio personality use to say.

What are the triggers that bring a person to the end of life with a gun, a rope, a knife, a jump, a breath of poisoned air, or a poisoned drink or pill? Before that "moment of decision" life must have become so painful, unbearable, confusing that relief had to be achieved by any means. And, yet, perhaps there are some incidents where a seemingly rational choice was made. "My time is up and I must go."

On the brink of death, where can one turn to find a way out of this finality? What last minute alternatives are available? Who can be turned to for help...if help is wanted?

Why, oh why, did it have to come to this moment of reality? Weren't there ample joys, pleasures, and positives to sustain life and point to a bright enough future? Was physical misery and degradation too great? Was mental ability too diminished? Was the support of significant others not there, or at least not felt? Was there an accumulation of emotional "hurts" that just couldn't be ignored or overcome?

I raise these questions because they bother me. And, I don't have good answers... just more questions that have to be unraveled as I struggle with the overarching question: WHY? ... OH WHY?

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Dave Duerson - Former Chicago Bear

Prior to Dave Duerson taking his life in February, there were five known suicides by professional football players between 1993 and 2007.

The Bears defensive back (a four-time Pro Bowl safety and twice member of Super Bowl winners) was aware of the risk of chronic traumatic encephalopathy (C.T.E.). This degenerative brain disease is linked to depression, dementia and possibly suicide.

The first time C.T.E. was found in brain tissue followed the November, 2006 suicide of Philadelphia Eagles defensive back, Andre Waters, who was 44 when this occurred. Some 20 cases of C.T.E. have been identified of players who died without knowledge that they had the disease.

Brain trauma and concussions in sports have been spotlighted as a result of player suicides and resent research and inquiry into the impact of head injuries occurring in the sport of football.

Duerson, 50, had requested in a text message that his brain tissue be examined for possible C.T.E.. It takes several months to conclude such a study, but the results will be of keen interest to current and former players who want to learn more about the condition and its possible effects on brain activity.

References:

- Alan Schwarz, "Expert Ties Ex-Player's Suicide to Brain Damage," *New York Times*, Jan 18, 2007.
- Ben McGrath, "Does Football Have a Future?," *New Yorker Magazine*, Jan 31, 2011, pp. 41-51.
- "Lasting Impact, New research on hits to the head," *National Geographic Magazine*, Feb, 2011, pp. 28,29,31.
- www.deadathletes.com

The Lighthouse is published quarterly at no charge. We welcome submission of news items, poems, reviews, and personal stories. Comments and suggestions to the editor are appreciated.

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Kevorkian Dies at 83

Dr. Jack Kevorkian, the controversial medical pathologist and physician-assisted suicide advocate, died June 3 in a Michigan hospital. His death was reported to have occurred without aid of a "planned death". He was hospitalized in May with pneumonia and kidney failure.

Kevorkian challenged social taboos about disease and dying, and claimed to have helped over 130 people die by suicide. In 1999, he was found guilty of second degree murder after giving an injection to a terminally ill man. He was sentenced to 10-25 years but was paroled after serving 8 years because of failing health and was no longer considered a threat to society.

His advocacy may have indirectly resulted in the Supreme Court upholding a lower court ruling that found Oregon's Death with Dignity Act protected a legitimate medical practice. The Hospice care programs have boomed in the United States and doctors are more aware and sympathetic with patients' suffering with pain.

Two New Toolkits Available

1. The Substance Abuse and Mental Health Services Administration (SAMHSA) now has available a free toolkit focusing on senior living communities. It contains resources for promoting mental health and preventing suicide. Contents include what facilities should do after suicide and suicide attempts, strategies to reduce risk factors, and materials to help create and implement policies and protocols. Hardcopy is in a very attractive user friendly loose leaf binder and can be obtained by calling 1-877-SAMHSA-7.
2. The American Foundation for Suicide Prevention has recently announced the release of "After a Suicide: A Toolkit for Schools", a free on-line resource to help schools cope with the aftermath of suicide. It was developed in consultation with national experts, and the kit may be downloaded. Contact AFSP for programs and resources for schools at: www.afsp.org/schools.

Suicide on Campus

Mental Health America reports that suicide is the second leading cause of death among college-age students. The organization estimates that there are roughly eleven hundred suicides yearly on college campuses. At many colleges the trend has been to screen for suicide risk while stigma of seeking help has been replaced by more students seeking counseling and treatment. Student suicide risk and depression are attributed to drinking, roommate conflict, relationship breakups and academic anxiety.

Excerpted from article in May 25, 2011 Rockford Register Star

Christopher's Suicide

On January 10, 2007 my 15 year old son, Christopher, took his life – eleven days before his 16th birthday. He had been diagnosed bipolar, was on medication, had previous suicide attempts, and three weeks prior, he returned home from a dual diagnosis treatment center. His father (my ex-husband) had taken his life in 2002 and my aunt in 2005.

Some say we should have known enough to prevent his suicide; we should have watched over him better. After his death, I had these very same thoughts. I know now that as a family we all did the best we could at the time.

Christopher was a very handsome young man with beautiful blue eyes, a masculine facial structure and a smile that lit up the room. He was incredibly gifted artistically and extremely creative. All the kids in the family loved to play with him. He was generous, thoughtful, loving and kind. He always had gifts for my birthday, Mothers Day and holidays. He encouraged me and loved me and our family very much. He was my soul mate.

Childhood was a tough time for Christopher and me. I struggled through the years with alcohol and drug addiction. While his father and I were married there was a lot of fighting in the home. My older son, Andrew, two and a half years older than Christopher, seemed to adjust to the environment differently. Chris was angry and cried a lot. As he grew older he threw many fits and had a temper. His rage was always followed by sadness and regret. He didn't feel good about himself and had very low self-esteem.

Over the years I got into a 12-step program and turned our lives around to a large degree, but, of course, the damage was already done. And then with their father's suicide in 2002, at ages 13 and 11, a whole new set of issues arose for the boys.

Losing Christopher has been devastating. I have experienced so many emotions, mainly a lot of guilt, sadness and regret. Thankfully, I have walked through the pain and continue to walk through it with the help of God, a suicide loss support group, reading books and creating a website to help others as they journey through their loss.

My full story is on my website, as well as stories by my parents and sister. Visitors can light a candle, write a memorial for their loved one, and find resources, links and articles at :

www.christopherscandle.com

**Tina Morris
Loves Park, IL**

Jo’s Story: From Rejection to Acceptance and Self-Love

Jo was born in a small town in the Midwest. She was described as a “good little girl” and attended church regularly. Jo remembers being attracted to girls when she was as young as ten years old. She also remembers being told that homosexuality was a “sin” and that all “queers” were going to hell. Later, she learned through movies and TV that “fags” were effeminate, and “dykes” looked and acted more like men than women.

Jo dated a couple of boys in high school but her true affections were hidden from her best friend. At age 17 she became increasingly anxious and depressed. She was hospitalized after what was later deemed a “panic attack”. She was told by her mother that the doctors found nothing wrong, that “it”, whatever it was, was all in her head. That same year she discovered marijuana and found it to sooth her anxiety and reduce her depression. She went away to college feeling more in control.

In college, Jo experimented with more drugs and found that when combined with alcohol, she could actually manage quite well. When she thought she might have a problem with drinking and drug use, she quit everything for three weeks. Her grades fell and she became anxious and more depressed. The only thing to do was to resume her “medication”. She didn’t date in college and secretly, silently feared she may be “gay”. She started being sexual with men in order to prove to herself that she was “straight”. She found sex much easier while under the influence.

After one night of particularly heavy substance use, Jo became suicidal. She believed that God had forsaken her. She had been praying for years to have her feelings for women removed and it wasn’t happening. As a matter of fact, she had fallen in love with a woman but couldn’t tell her. She felt “damaged” and alone at age 23. The feelings were so overwhelming and so powerful that she couldn’t imagine they’d ever go away. She tried to overdose with pills and alcohol that night. A friend found her and she was hospitalized and placed on a 72 hour hold.

Jo went into therapy and after a few years of intensive work, came out to friends and family. Two close friends stopped talking to her, while others applauded her courage. Her mother said she didn’t “believe” in homosexuality and refused to discuss it. One brother stopped talking to her. Her father said she was “going to hell” and would not allow her into his house. Another brother embraced her, as did an aunt.

Jo continued drinking and using drugs, trying to ease her own internalized homophobia. She felt different, less than, abnormal, unattractive, and alone. She tried suicide one more time by overdose, but only passed out and woke up two days later. It was then that she had a spiritual awakening and asked a friend to take her to an AA meeting. Through more therapy, 12-step, and the loving support of friends she began her journey toward self-love and recovery.

Jo is now a licensed therapist; directs an outpatient program for adolescents; teaches courses on chemical dependence and mental illness at several local universities; and is currently working with the state of California to develop treatment standards for youth with co-occurring disorders.

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Back In Time

In the 1960s United Fruit controlled nearly 700 million acres of land in Central American countries. In 1969, AMK Corporation CEO, Eli Black, bought 733,000 shares of United Fruit and merged it with other holdings to create United Brands Co., a billion dollar conglomerate. Its holdings included Chiquita brand bananas, Baskin-Robbins, A&W root beer and others.

In 1975, Black leaped to his death from his office in the Pan Am Building in New York City . What happened in the years leading up to his suicide is a story of white collar exploitation, corruption, scandal and high pressure lifestyle.

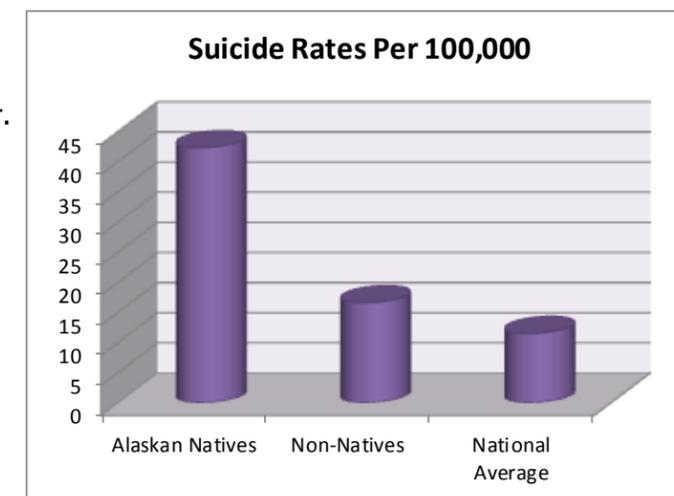
Following an anti-trust lawsuit in 1973, Black shifted from growing bananas to transporting and marketing. His new operation was successful but then a series of events – hurricanes, taxes on exported fruit, and finally a \$1.25 million bribery to the government of Honduras created a unbearable situation.

In February, 1975 Black knew that the bribery charges would be made public exposing corruption and his role in the scandal. Rather than face disgrace, he took the elevator to the 44th floor and smashed his briefcase through the window of his office. It was reported that more than 500 people attended the funeral.

Suicide Remains Epidemic in Alaska

A Statewide Suicide Prevention Council report reveals that in 2010 Alaska’s overall suicide rate was twice the national average. Alaska Natives account for an even more disproportionate number. With less than 18% of Alaska’s population, Alaska Natives had a suicide rate of 42.32 per 100,000 compared with a rate of 16.6 for non-Natives.

There is a lack of support groups in the state with only six active although 176 communities were directly affected by the 1,369 confirmed suicides between 2008 and 2009. The Council is launching a multi-year suicide prevention plan including increasing access to support for survivors.



In Memoriam

*Three words comprise the frame my son last made:
his soft "Hey, dad" to greet me on the phone,
his single, loving "Papa" with our last embrace—
and in between?.....just Mark, the man to fill
a thousand frames invisibly in love
that clings unbound to arms, to blood, to tears...
who threw his history away unowned
and paid for it with memory alone.*

*Eleven years are here to testify
that sweetness in the settlement was not
enough, that though the picture glows
with spirit timelessness, it shuns the touch,
the laughter, the uncertainty that spears
the mind, seizes on the unexplored,
and must rejoice inside the now.*

*It is for you who read, to intercede
in the rejoicing...I must let it go
a little while, although I know
there is no need to pray
that Mark and I will follow through
within the morning's deathless day.*

Bob Ludden
Chatsworth, CA

Finding Peace and Understanding

In the Spring, 2011 issue, Kent Svendsen related ways suicide had touched his life. Now, he continues by describing three steps that he has taken.

1. There is a tendency for others to take blame for a person's actions. Those left behind almost always think there is something they overlooked and could have done that would have prevented the suicide. Walking in guilt and shame only creates open wounds that slowly drain your spirit and bring harm to you and your relationships. Saying to yourself, "it wasn't my fault" does not justify or detract from the seriousness of the tragedy. It does provide you with a way of finding healing. By doing so you come to be a source of strength and healing for others who have experienced similar tragedies.
2. Successfully ending the self-blame game provides a means to finding both peace in your heart and understanding. By shifting the focus away from yourself, and how suicide affected you, healing can begin. You consciously shift from being the victim to becoming a helper. You begin to gain understanding of how and why these things happen and you become part of the solution which will help prevent future tragedies. By working towards preventing future suicides, joy will slowly replace sorrow and peace will replace despair. One major source of emotional pain survivors often experience is the seemingly selfishness of the act by the other persons. "How could they do such a thing when they should have realized what this would do to those left behind?" While not being able to rewind life and do it different, this allows one to move forward into the future rather than held prisoner to the past.
3. I have found that one of the ways that can help move both of these actions forward is to conduct a "service of healing" in which participants are given the opportunity to let go of past traumas such as suicide. Believing in a God who can do anything, I invite those attending to let go of the negative and allow God to take it from them ... the guilt, shame, un-forgiveness, pain, memory and anything else that prevents finding peace, joy, love and contentment. Using guided imagery, I paint a picture of an eagle flying above the storm. I quote from Isaiah 40:31: "But those who trust in the Lord will find new strength. They will soar high on wings like eagles. They will run and not get weary. They will walk and not faint." We declare to ourselves that while the storms of life are swirling and raging, we will not be harmed by them. We rise above the storm and go forward in peace. And we are also observant of opportunities to help others find that same sense of peace and understanding.

Kent Svendsen
Forreston, IL