



# The Lighthouse

Newsletter of Touched by Suicide, Survivors Gather

Volume 7 Issue 1

Summer 2009

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**From the Editor**

## **AS WE SEE IT: CHOOSING TO LIVE, CHOOSING TO DIE**

A good friend took his last breath this past January. He chose to live a long and adventurous life and he chose to die one day after his 102nd birthday. Ten years ago he asked me to be his Power of Attorney and Co-Trustee of his estate. Indeed, I have served in both of these roles.

Reflecting now on this remarkable man, born in 1907, one might wonder how he could have possibly kept mind, body and spirit active and engaged for so long and how could he have arranged to die on a given date. We can surmise that he must have drawn on some remarkable and unknown "powers" that resemble the intricate workings of a very complex and complicated entity known as "life-space" or "life-force" or "life-cycle".

If this friend could manage his space, force and cycle to the extent briefly described, does it not follow that a person's life ending in suicide - at age 16 or 37 or 55 or 82 - might also have a chosen length of life and time of death? Or could there have been so many other determinants that signaled a time to cease existing that we are left befuddled and confused by the results?

Many times we hear survivors say that their loved ones didn't want to die, they just wanted the pain to go away. Other survivors admit that they had no clue as to why suicide was the option chosen.

Trying to understand the nature of longevity takes effort. Understanding death by suicide also takes effort. Examining my friend's life and death has caused me to more honestly appreciate all of life! And it has also given me the incentive to delve further into the mysteries of lives cut short by suicide - at any age. With understanding, along with compassion and empathy, we can come to realize the choice of suicide is also within the realm of being human.

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## **MY STORY NEVER SHARED BEFORE**

### **Introduction**

Although I enjoy expressing myself in writing I have never shared such personal experiences for others to read. So I really don't know how to start. But whatever comes is from deep in my heart.

I am a Moslem and in our religion taking your own life is a big sin. We believe that you go directly to hell when you desire to die by suicide, because God gives us life. He should be the one to take it back whenever He wants; and that would definitely be the right time.

However, sometimes we are tested too much and too often so that we cannot help thinking about the easiest way of handling our problems. You suddenly make up your mind to take life in the way you choose; either by shooting, jumping off a bridge or other means. I am the kind of person who would be scared of such acts and would prefer taking as many pills as I could and going into a deep sleep and never waking up.

### **My Story**

I suffered throughout my whole childhood and my first suicide attempt was when I was only 12 years old. I had a great mother; she was so smart, beautiful and so strong. While she had suffered a lot, she never thought of killing herself, but I was not that strong. I needed love and there was no one to give love because everybody needed love in our household. My father was the kind of man who was so nice to everyone and couldn't say no to anyone except his family. With us he had no patience, no time, no love, but for every other child around he had something to give.

When I tried to take my life the first time it was because I thought I was making mom unhappy; and she had enough troubles with dad. She was not in love with him plus they didn't have enough money for a comfortable life. There were arguments every day because life was difficult with someone whom you can neither talk with nor trust. Mom needed to feel like a woman and be treated like a woman, but this never happened. When you are in such a mood, children can make it worse because they always need attention.

So I thought if I died life would be much easier for her. However, when she found out what I had done she couldn't help crying and said, "My life is worth nothing without you. All I have done would be a waste of time and strength because I have suffered a lot and I want my life to be worth something." I can never forget that, and I miss her so much. She was the only one who really cared for me and my brother.

The second time I attempted suicide I was at the university and my mom treated me as if I were still a child. I really felt good being on my own and making my own decisions. I felt like an adult and found self confidence. I was loved by all the people around. Back home everything was the same and I thought all my life will be unhappy and I will go on suffering. So why should I live? I loved my mom but I always thought I upset her. Though she loved me so much neither of us knew how to show it.

***Continued on page 7***

## **THREE-DAY SUICIDE TRAINING AT FORT CAMPBELL**

The U.S. Army recently shut down Fort Campbell, KY, for three days of training - the second one held this year. The 19,000 soldiers - from corporal to general - were addressed by the commanding officer to make sure they knew what help is available.

At least 11 deaths of soldiers in the 101st Airborne Division were confirmed or suspected suicides this year out of 64 suicides in the entire army. A spokesperson at the base explained that soldiers often refuse to admit they are having problems because of a "military culture" that includes the stigma of asking for help. "Soldiers need to understand that there is strength and honor in asking for help," the spokesman added.

In 2008 a record number of Army suicides occurred, at least 133. This total included active duty soldiers and activated National Guard and Reserve Units. Long deployments, combat stress, lengthy separation from families and the stigma associated with asking for help are said to be factors contributing to the suicides.

"Military suicides are also a top concern of leading veterans organization," a spokesperson for AmVets said, "the Army needs to do more to prevent suicides."

## **IN THE NEWS**

### **MORE HEADLINES:**

In The Spring Issue six newspaper headlines were cited demonstrate that a headline can reveal enough of a story to give the reader a mental picture of the concern and what is significant. Here are four more:

- |                |  |
|----------------|--|
| March 17, 2009 | "26 year old man didn't want to die"                       |
| March 30, 2009 | "New spotlight on child suicide"                           |
| May 3, 2009    | "The high price of depression: A rise in the suicide rate" |
| May 22, 2009   | "Poll: Most college students stressed, some depressed"     |

### **SUICIDE NOTE LEFT BY SOUTH KOREA'S EX-PRESIDENT:**

Roh-Moo-Hyun died May 23, 2009, after apparently taking his life by jumping from a high cliff near his rural home. A brief suicide note indicated that life was "difficult" and he apologized for making "too many people suffer". The ex-president had been involved in a corruption scandal and had been under investigation for taking bribes during his term.

Roh's note said, in part, "I can't imagine the countless agonies down the road. Don't be too sad. Isn't life and death part of nature? Don't blame anybody. It's fate. And please leave a small tombstone near my home."

## **MENTAL HEALTH SERVICE AT THE COUNTY LEVEL: THE 708 BOARD**

In 1968 the citizens of Ogle County, IL, passed a referendum that provided local tax dollars for the care of county residents in need of mental health services. As a result of the referendum the Ogle County Community Mental Health Board (referred to as the 708 Board because of House Bill 708) was established as an advisory body. Each year, their funding recommendations go to the Health, Education and Welfare Committee which makes final recommendations to the full Board.

The services rendered by the six agencies, funded in part by actions of the 708 Board, are effective, efficient and comprehensive. In every case the agencies are licensed, certified and accredited by all appropriate regulatory bodies to meet or exceed all standards.

The goal of these services is to provide cost-efficient care that will frequently lead to greater independence and productivity. The county's six agencies have continued to wisely use mental health dollars for the betterment of those county residents in need. The 708 Board is continually vigilant in monitoring the county's mental health services.

Agencies currently funded are: Easter Seals Children's Development Center, H.O.P.E. of Ogle County (women's shelter), Lutheran Social Services of Illinois, Ogle County Hospice Association, Village of Progress (disabled), and Sinnissippi Centers (mental health).

The 708 Board provides a Human Services Directory to Ogle County physicians, attorneys, city and township governments, churches, and other interested parties. In addition to the six agencies, the directory lists crisis services, government and court services, mental health and counseling services, and others; all with phone numbers. The Suicide Prevention National Helpline (800-273-8255) is also included.

The 708 Board is committed to recommending and obtaining tax dollars for non-profit agencies which can provide the best possible care at the most affordable price. Agencies that are funded tend to have sliding scales of payment so those with little income can afford to receive treatment for emotional pain and troubles. The 708 Board provides information to the general public that describes the services offered so that more people in need can know their options.

Many Illinois counties have 708 Boards, or their equivalent, who let those in crisis know "there is help when you need it!" The Boards hope that more people will look for that help before crises surface and they pledge to help provide services when needed.

**Kathe Wilson**  
**Oregon, IL**

***Editor's Note:*** *Kathe is the 708 Board president for Ogle Co*

## CHECKING IN AT THE V.A.

Recently, I received a notice to report for my semi-annual check-up at the Veterans Administration regional clinic in Rockford, IL. The first visit was for a lab appointment to draw a blood sample. Two weeks later I returned to see my assigned physician, Dr. Pope.

I look forward to these appointments because I look forward to seeing Dr. Pope, getting results of the blood work and renewing prescriptions that can be ordered from the V.A. as needed throughout the year.

At check-in, veterans are given a Patient Health Questionnaire to fill out in the waiting area. This is intended to provide the physician with a quick overview of any problems or conditions that need addressing. It seems that in the last year or two a page of the questionnaire has been added that contains items to check-off using the following criteria: "Over the past 2 weeks, how often have you been bothered by any of the following problems?" The scale is: Not at all, several days, more than half the days, nearly every day. Here are the items:

- ◆ Little interest or pleasure in doing things
- ◆ Feeling down, depressed or helpless
- ◆ Trouble falling or staying asleep or sleeping too much
- ◆ Feeling tired and having little energy
- ◆ Poor appetite or overeating
- ◆ Feeling bad about yourself or let yourself down or your family down
- ◆ Trouble concentrating on things, such as reading a newspaper or watching TV
- ◆ Moving or speaking so slowly that other people could have noticed or, the opposite, being so fidgety or restless that you have been moving around a lot more than usual
- ◆ Thought that you would be better off dead or of hurting yourself in some way

"If you checked any of these problems, how difficult have these problems made it for you to do your work, take care of things at home or get along with other people?"

I checked "Not at all" for the nine items, but I wonder now what would have happened if I had checked "Nearly every day" for numbers 2 and 9. Would I have been sent to see a psychiatrist at the V.A. hospital in Madison, WI? Also, I wonder if this page was added to the questionnaire as a result of P.T.S.D. and suicides resulting from combat service in Iraq and Afghanistan, and how were these nine items determined and by whom?

Has the form been helpful and resulted in positive actions for veterans? Are there unique problems for World War II veterans in their 80s and 90s that are age related and not necessarily mental health conditions? What about young veterans recently back from overseas duty? Has this form been helpful as an initial screening device?

The next time I see Dr. Pope, I think I'll discuss these issues with her.

**Bud Wiener**  
**Served in Korea**

## BACK IN TIME

Kurt Vonnegut, who died in 2007, was well known for his novels: Perhaps his most famous being Slaughterhouse Five. He was born in Indianapolis in 1922 and enlisted in the army in 1942 in the midst of World War II. In 1944 he came home on leave to discover his mother had died by suicide. He was a prisoner-of-war in Germany and survived a massive Allied bombing of Dresden by hiding in the basement of a slaughterhouse.

Vonnegut struggled with depression and he attempted suicide in 1984. He died a literary celebrity having published 14 novels and various short story collections, plays and works of non-fiction.

## SUICIDE RATES IN ILLINOIS

From 2001 to 2006 the suicide rate in Illinois declined from 9.1 per 100,000 persons in 2001 to 7.9 in 2006. The national rate has fluctuated between 10.74 and 11.1 during that same six year period.

## ASSISTANCE IN DYING

One of the headlines quoted in the spring issue of "The Lighthouse" and the headline in a recent local newspaper bothers me: March 5, 2009, (as quoted) "Assisted Suicide Legal in Washington State," and May 23, 2009, "First Death Under New Suicide Law."

It is assistance in dying, not suicide. The person has no desire to live. Two doctors have determined they are terminally ill. The choice is to die with dignity and to not spend months in suffering while their families agonizingly stand by.

It is the humane service for a person, still able to make a decision, that is told he/she is terminally ill and has a short time to live. I think we need to stop calling it "suicide" when the person cannot choose life. He/she is dying and is asking for assistance in dying with dignity.

**Mary Zeller**  
**Normal, IL**

## MY STORY NEVER SHARED BEFORE

*Continued from page 2*

One day I lost my dear mom. She was my soul and the only person I was scared to lose. She died nine years ago and when I recall the last twenty days of her life I feel the wound deeper. I was twenty-four years old then and I had my dear brother who needed me more than ever. He lacks lots of abilities but has as much goodness in his heart as a normal person.

### Conclusion

Before, I was really ashamed of what I had done, but I am not ashamed any more. I just feel sad and wish I had never thought of such things. I have been married for five years and I have two lovely kids, a baby girl and a three year old boy. They are such great gifts of God to me and my husband, and I hope God forgives me for what I tried to do years ago.

From all of those experiences I now understand that children need love and care. Family problems are too heavy for them to carry, too complicated for them to understand and too difficult for them to struggle with. Let them just be kids.

**Banu Uslu**  
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## A CALL FOR YOUR POEMS

Poetic expression of thoughts, reflections and visions taps the creative instincts within us all. And, it connects with readers in a different way of seeing the world through the eyes of another person.

I think that our readers would appreciate having more poetry in this newsletter; poems that reflect on any aspect of suicide, such as survivor realities, prevention, personal feelings and emotions, future hopes or being there for others.

Won't you please be a contributor?

**Note: The deadline for submissions for the Fall issue is September 15.**



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## Touched By Suicide Survivors Gather

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Layout

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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## A LONG JOURNEY IN THE DARK

Daphne Merkin's cover article, "A Journey Through Darkness," in The New York Times Magazine, May 10, 2009, is an extensive personal story of her life-long battle with chronic depression. This memoir of an individual's revelations detailing her experiences, thoughts and treatments over forty years tells how one person responds to crises in a life dominated by mental illness.

An old friend who recommended this article to me suggests that her description of severe depression is much like that of William Styron's. Merkin speaks of "the thick black paste of it, the muck of bleakness," and of her recurring thoughts of suicide.

After her discharge from a psychiatric hospital, she knew that depression would return; "sneaking up on me when I wasn't looking. But meanwhile there was bound to be a glimpse of light if only I stayed around and held fast to that perspective."

Merkin's story is enlightening to anyone unfamiliar with a life in crisis due to depression. For suicide survivors, it provides another piece of the puzzle as we search for insight and understanding of our own situations; past and present.

***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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