

*Hard Questions* Article from *AARP Modern Maturity*, by Terry D. Hargrave

## **The Shock of Suicide**

**When Jim took his own life, his family was wracked with guilt and anger, wondering who to blame. After a suicide, can a family ever be normal again?**

**by Terry D. Hargrave, Ph.D.**

**JANES STORY** I still can't imagine Jim doing this kind of thing. Jim sold his practice as a dentist two years ago, and I thought we would have a comfortable retirement traveling and spending time with our daughter and her children. We did travel some, but then we settled into a routine and mostly stayed at home.

I knew Jim had been down for a while. He seemed at loose ends. He would ask for stuff to do around the house, then not do it. He lost interest in things that he did all his life, like golf. I see now that he was withdrawing by watching TV or sleeping, but I thought he was just adjusting to having more time on his hands.

One day last month, after breakfast, he asked me if he had been a good man. "Of course," I said, and I told him how he was a good provider, father, and husband. He smiled and I thought he looked pleased. Later that morning, when I returned from the grocery, I couldn't find him anywhere. When I went out in the backyard, there he was, sprawled on the grass. He had shot himself.

I just don't know what to do with all this. I thought that I had been a good wife. What would cause him to want out so badly? I keep thinking that I should have been more attentive and not left him alone. Should I have realized he was getting ready to kill himself that morning? I've lost my husband and I can't help feeling like it was my fault.

**MARIA'S STORY** I don't know how you recover from the shock of your father shooting himself in the head. I'm an only child, and Mom and I have always been close. Dad was often working or playing golf, but even so we had a special relationship. He was my biggest cheerleader and the one who helped me get through a divorce. When he retired, I thought we'd have more time together and he could be a great influence on my kids. When Mom called and told me what happened, I thought it could not be. He was always the strong one. Now he has checked out. Mom is so overwhelmed with grief and guilt that she can't get through the paperwork, so it has all fallen to me. Instead of having time with this man I loved and respected, I was left to literally clean up the mess that he made. I feel deserted and betrayed. How can I get over these feelings?

**DR. HARGRAVES VIEW** Suicide always raises a flurry of ethical issues about individual rights and societal impact. In most cases, however, suicide is experienced by

loved ones as an insult to the relationships. It is a trauma that is difficult to heal. Jane, in addition to having the sadness and shock of losing her spouse, had to deal with a burden of feeling somehow responsible for her husband's death. Maria was faced with overwhelming anger toward her father for leaving in such an abrupt and irresponsible manner. Guilt and anger are common feelings associated with death, but suicide makes resolving these feelings especially difficult.

Suicides are almost always shocking experiences that leave loved ones in emotional turmoil, feeling the death was intentional and avoidable. In order to move past the emotional chokehold of a suicide and be able to grieve for the loss, family members need to resolve three key questions: Why, What, and Who. These were the issues Jane and Maria had to face when we met.

I started with the Why, saying, "From what you have told me, it seems that Jim was suffering from a major depressive episode." Jane and Maria agreed but said that they had seen it primarily in hindsight. It was far from obvious at the time. "I see now that he was having trouble sleeping, was drinking more, and was withdrawing," Jane said. Maria said she has always felt that "depression was something you could control, like a bad mood you could simply decide not to give in to."

I explained that depression is an illness, like cancer or Alzheimer's. In fact, it is often referred to as the "common cold" of mental illness because it is so prevalent. It was not Jim's fault he was depressed, but it affected him physically, cognitively, and emotionally.

"It is important that both of you realize why Jim took this awful way out," I said. "We wouldn't wonder why a person wasn't feeling well if the illness were cancer. It is surprising that we wonder why a person who is depressed would feel hopeless and commit suicide. Jim did this because his thinking was impaired by the depression."

After several sessions, I went on to the next issue and asked Jane what she felt her husband was communicating. Her response was frank. "Maybe if I had been there more, he

wouldn't have done this. I feel like I wasn't a good enough wife." I asked whether they'd had any problems in the 39 years they were married. "Of course," she said. "AD people have problems, and we talked them out."

"My guess is that, if Jim were not depressed, he would have talked it out as he had done a hundred times before," I said.

After several sessions, we came to the hardest question of all: Who was responsible? Jane was quick to respond. "Even though I can see he was depressed, I still feel I should have picked up on it and sought help."

I asked her gently, "When Jim was withdrawing from you, what do you remember? "

She paused. "To be honest, he wasn't pleasant to be around," she said. " Sometimes I wished that he was back at work because I just didn't know what to do with him."

At this point Jane started crying. I explained, "You knew something was wrong and you didn't confront it. Yes, that was a mistake even though it was understandable. But if it were you who was depressed and Jim the one who didn't come to you-if he had been going to work and playing golf-would you blame him?"

Jane thought and said, "No. There were times when he did leave. I never held it against him. " Jane drew a deep breath. "No, no, he wouldn't hold it against me either."

Jane and Maria eventually accepted that Jim was depressed, that he wasn't communicating something about them or about life, but was in so much emotional pain that he took this unfortunate way out. Though they might have done things differently to help him, this did not make them responsible.

After several months of regaining their emotional balance, Maria and Jane were able to grieve the loss of Jim in a more normal manner. The trauma left scars, and at times anger and guilt flared up. But they could miss him and enjoy good memories without the burden of guilt and anger over the way his life ended.

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## **Distress Signals**

Suicide creates emotional trauma that surviving family members may carry for life. Some thoughts on prevention:

**Be aware** People over 65 commit some 5,500 suicides a year-a 50 percent higher suicide rate than the general population, with white men being most at risk. The success rate for older people is also much higher, 1 in 4; for adolescents it's 1 in 100 to 200.

**Ask questions** It's a myth that if you bring up the subject of suicide, you will plant the idea in a person's mind. Most people will be honest with those they trust. If someone admits to thoughts of suicide, do not leave that person alone; seek professional help immediately.

**Call for help** Although suicide may follow a loss or trauma, depression is the single most common cause. Depression is treatable through medication and talk therapy. Contact your doctor or a professional therapist. Other resources: American Association of Suicidology's 24-hour hotline at 800-SUICIDE; [www.suicidology.org](http://www.suicidology.org) has links to other sites.

**Know your limits** If someone is set on suicide, he or she can find a way. You must try to help, but ultimately you are not responsible for the actions of another person.