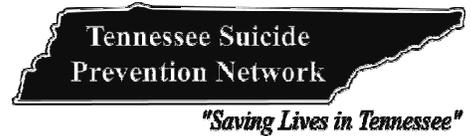


# can you hear me?

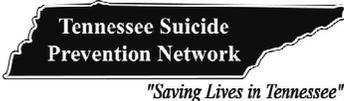


stories of people who have survived suicide attempts

june - july 2014

issue 5

In this issue:	
Spotlight: "A Voice at the Table"	3
Cutting and Self-Injury: Finding Better Ways to Cope	3
Waking Up Alive	4
Suicide Anonymous	5
Crisis Resources in Your Area	6
Need Help Right Now?	6



TSPN works across the state to eliminate the stigma of suicide and educate communities about the warning signs of suicide, with the ultimate goal of reducing suicide rates in the state of Tennessee.

TSPN's continued success is due in large part to volunteers willing to donate their time and energy.

If you would like to volunteer with TSPN, please call (615) 297-1077 or e-mail [tspn@tspn.org](mailto:tspn@tspn.org)

## You Had To Keep It Together

*Ebonie Freeman of Texas contributed to this essay to "What Happens Now", a blog for survivors of suicide attempts ([www.attemptssurvivors.com](http://www.attemptssurvivors.com)), this past November. She recently began graduate school.*

*In the preface to her essay, she acknowledges that she is one of the few African-Americans active in the developing attempt survivor movement. "I do want to make it clear that my story is just one Black woman's perspective/experience with mental health as it relates to self-harm, suicide and depression.. It's a taboo topic in society, and within the African American/Black community it's even MORE taboo! I can only share what my Black experience has been."*

I believe that each person is given a purpose in life and that we are given talents, abilities and personality traits that make us who we are. But I have experienced struggles that challenged me on multiple levels and made me question, "Why?"

There's a line in a song called "Shout" by Kirk Franklin: "The pain was preparation for my destiny." Those words eventually brought me a new and comforting meaning. All the pain and confusion—as well as the victories I have experienced—have been preparation to serve others. It was because of people who were strategically placed in my life, and knowing a sovereign God, that I was fortunate to make it through those dark times. I have had to endure those times so that I could come out on the other side and be a voice for the next person who may face them. I strongly believe that I have been given the gift to serve others.

In my work, I have encountered youth who are from broken homes, who have low self-esteem, who are in the juvenile probation system, who are sexually active and who engage in self-injury. Many of the girls were facing challenges that I had gone through. I soon came to realize that if I had not faced my own challenges, I would not have been as effective.

Early in life, I struggled with not knowing how to love or accept myself. I grew up with very low self-esteem. That led to my battle with depression, binge-eating and self-injury. I did not know until I was older that I suffered from various forms of mental illness. While growing up, I had believed that mental illness was specific to certain cultures. I did not know of anyone else who looked like me who experienced mental illness.

Growing up, I believed that you did not cry in front of people, because that was a sign of weakness. You did not show people that you were hurting. You had to be strong and keep it together. We started going to church when I was in middle school. I once believed that as a "Christian," I should not be depressed because good Christians who had a strong faith did not suffer from depression. I thought that if I was depressed, it was because I was not praying enough or I was not doing something right.

I was 21 and at a crossroads in my life. One night, I was in a very dark frame of mind. I was living with a friend from college and her husband. Something inside me was trying to convince me that I would be better off dead. I wanted to punish myself for not being good enough. I felt tired of trying and failing.

I took an eyebrow shaper and pressed it as hard as I could into my left wrist. At first it hurt, and I did it again. Then I swiped the eyebrow shaper across my wrist and began to cut in different directions. It was like an out-of-body experience. My friend and her husband found me passed out on the floor. This was the beginning of my battle with depression, self-injury and suicide.

(continued on page 2)

## You Had To Keep It Together (continued)

That life-altering experience has given me a desire to help people who are facing, and have faced, the stigma and debilitating pain that mental illness can cause. People are naturally scared of what they do not know, and therefore they judge and criticize. I was one of them. Out of a lack of understanding, it did not make sense to me how someone could want to hurt themselves or kill themselves.

Although I have struggled with thoughts of suicide, severe depression, binge-eating and low self-esteem, that does not mean that I am a bad Christian. Seeking help is not a sign of weakness; in fact, it is a sign of great strength.

During a counseling session, my counselor shared something that deeply resonated with me. In Greek mythology, Chiron was the archetype of the "wounded healer." He was wounded with an arrow and suffered in eternal torment. In Chiron's search for a cure, he discovered how to heal others of their suffering. I was able to relate. This was someone who could reach beyond personal hurt to help others. I believe that healing can be a possibility through helping others heal their pain.

I have learned what it truly means to have empathy for someone and sincerely want to help them heal. The Buddha once said, "Our sorrows and wounds are healed only when we touch them with compassion."

I aspire to help erase the stigmas that surround mental illness, as well as to educate those whose loved ones are affected by it. I want to help take the shame and fear out of seeking help for mental illness and help bring resources to families and communities that are unaware help is available. The particular populations I wish to reach are the African-American community, the religious community and youth.

A soldier who just returned from his fourth duty tour in Iraq. A young boy who is getting bullied and is too afraid to tell anyone. An employee who received notice that they no longer have a job. People of all ages are in need of resources and education on how to cope with all kinds of challenges. We live in a society where pop culture rules and women are bombarded by the media's standard of beauty. Self-esteem issues manifest themselves through self-harm, drinking, anorexia, bulimia, overeating and unprotected sex. Programs and mentors are needed not only for young people but also for adults who struggle with the same issues.

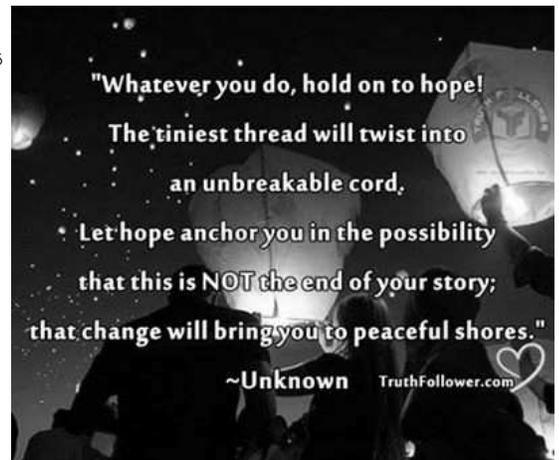
My husband is a blessing. Throughout my struggles, he was by my side. He hurt when I hurt and cried when I cried. Even though at first he didn't understand why I would feel like I didn't want to live, or why I would want to hurt myself, he was willing to learn and understand. He would take me to counseling sessions and even sit in to better understand what I was going through.

Once I was able to lift my head above water, I could see how my struggles affected him. How much he hurt. The love he showed me made me want to try to get better, for him as well as for myself.

I didn't share with very many people when I tried to kill myself, to cut or things of that nature. For one thing, I was ashamed. And when I did try to open up, I felt misunderstood and went back into my shell. Lastly, I thought that I would be doing people a favor by not being here anymore. People would not have to put up with my being sad all of the time.

A huge part of my recovery was going to my county mental health center, seeing a crisis counselor regularly and having a handful of super-supportive friends and family, my husband and my faith. I didn't have insurance or financial means, but I was very blessed to have my counselor help me find resources that were free or very little cost. I was on depression medication for a while, and I personally didn't like it, so we came up with a plan to help me stop my medication successfully.

I've come a long way! Each and every day, I pray and ask God to help me use my experiences to help others and to help myself become a better person. I'm here for a reason, and God knew that.



## Spotlight: "A Voice at the Table"

A group of amateur filmmakers has released a short film on the attempt survivor movement intended for use by both mental health professionals and survivors in building local attempt survivor educational efforts.

"A Voice at the Table" premiered at the Massachusetts State Conference for Suicide Prevention in April to an overwhelmingly enthusiastic response by the clinicians and mental health professionals in attendance. Several reviewers have recommended the film as a training tool for mental health professionals working with survivors of suicide attempts.

The film's Executive Producer is Annemarie Matulis, director of the Bristol County Regional Coalition for Suicide Prevention headquartered in Taunton, Massachusetts. Craig Miller, motivational speaker and author of *This is How it Feels: A Memoir of Attempting Suicide and Finding Life*, served as writer and producer for the film. It includes interviews with four attempt survivors—one of whom, Dese'Rae L. Stage, was profiled in the previous edition of *can you hear me?* Additionally, Phil Rodgers, vice-president of the suicide prevention education company LivingWorks, and John Draper, Ph.D, project director for the National Suicide Prevention Lifeline, provide commentary during the film. It was made on a zero budget—all time and services for the project were donated.



Matulis, pictured at right, is the director of "A Voice at the Table" (photo courtesy of [attemptsurvivors.com](http://attemptsurvivors.com)).

The video is available for free viewing at <http://bit.ly/lm4ilGN>.

## Cutting and Self-Injury: Finding Better Ways to Cope

*The following article is taken from the website of ULifeline (<http://www.ulifeline.org>), an online mental health resource center designed for college students. It is a project of the Jed Foundation ([www.jedfoundation.org](http://www.jedfoundation.org)), a non-profit that promotes emotional health and prevent suicide among college and university students.*

We often hear about cutting on TV and in movies, but it isn't the only kind of self-injury. Other types of self-injury include burning and scratching. When someone harms themselves in these ways, it's usually because they're trying to cope with a stressful event or strong emotions. It can seem like the only activity that will make them feel better. Reasons why self-injurers hurt themselves can vary. Sometimes, self-injurers are unable to experience and express their emotions. But self-injury rarely works as a stress-reliever. After self-injuring, people frequently feel worse, and the emotions don't go away. Plus, there are also the devastating complications of embarrassment, regret and scars or other permanent damage.

Fortunately, there are many healthier ways to cope. If you or a friend are self-injuring, use the list of suggestions below to find better ways to deal with emotional issues.

- **See a counselor.** The best way to find better ways to cope is to see a professional counselor. Therapy helps individuals to reduce self-injurious behavior, process and express emotions and feel better about themselves. Many times, people who are self-injuring are also dealing with treatable conditions like depression or anxiety. If you do seek help, be sure to be honest with your counselor, attend all sessions and stick to your treatment plan.
- **Explore why you self-injure.** Finding out why you self-injure and what purpose it serves for you can help you stop this behavior. Consider why you started self-injuring in the first place. What are the triggers? How do you feel right before you self-injure? Is it always the same emotion? What are you doing before you self-injure? This is important information to share with a counselor or mental health professional. Keeping a journal can help you answer these questions and serve as a positive emotional release.
- **Choose healthy coping activities.** Often, if people delay self-injuring behaviors, the feelings will pass. Pick a healthy activity that you like that makes you feel better. This could be exercise, calling a friend, going for a walk, listening to music or a hobby like painting or writing. When you feel the urge to self-injure, immediately start one of the healthy alternatives instead.
- **Create a coping skills box.** In a box, put your list of coping options, a favorite movie, a few good books, an exercise DVD, soothing music, drawing supplies and your journal. Whenever you're experiencing the urge to self-injure (or a negative emotion), get the box out and choose a healthy option.
- **Avoid anything that promotes self-injury.** This might mean avoiding Internet sites or even friends who glorify intentionally injuring yourself.
- **Call a hotline.** If you're having an emergency or just want to talk to someone anonymously, call 1-800-DONT-CUT or the National Suicide Prevention Lifeline at 1-800-273-TALK (8255).

## Waking Up Alive

*Waking Up Alive* by Richard A. Heckler, Ph.D., an early work on the subject of suicide attempt survivors, is available in Kindle and NOOK formats in an updated and expanded edition.

Originally published in 1994 and currently out of print, *Waking Up Alive* was one of the first books to present recovery from suicide attempts from both a clinical and personal perspective. The original included interviews from 50 attempt survivors across the country, following them from the origins of their death-wish through the actual attempt (or attempts), the recovery process, and ultimately to their decision to live. Heckler's discussion of the "penetrating hopelessness-the loss of faith" associated with suicide attempts and the stages of attempt recovery were considered particularly ground-breaking. At the time of its release, the book was profiled on NPR, "Good Morning America", and "20/20".

The late Edwin S. Shneidman, Ph.D. founder of the American Association of Suicidology, had this to say upon *Waking Up Alive's* original publication twenty years ago: "Remarkable and exciting; a pleasure to read and a treasure to contemplate. It reminded me, simultaneously of Poe's 'Descent into the Maelstrom' and Selzer's 'Raising the Dead'. The book is about recovery and the fructifying role of realistic hope. Abraham Maslow-the patron saint of this book-would have had a peak experience reading it. I enthusiastically recommend it."

Heckler is on the faculty of the School of Professional Studies within John F. Kennedy University in San Jose, California, where he worked when he first wrote *Waking Up Alive*. He has served as Department Chair, Co-Director of the university's counseling center, and Coordinator of the Buddhist Psychology Emphasis program within the college's Counseling Graduate School. He founded the Hakomi Institute of San Francisco and was its director for 21 years, training therapists across the United States and United Kingdom in the Hakomi method of experiential psychology.

*Waking Up Alive* is available via most major-market e-booksellers. Hardcover and paperback versions of the original book are available from select retailers.

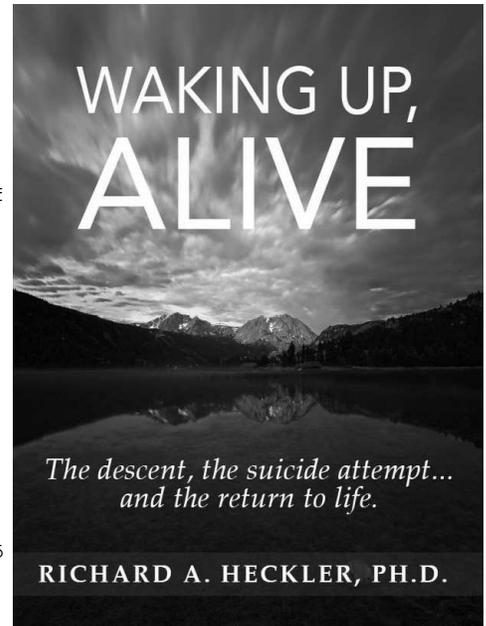


Image courtesy of Dr. Heckler's website  
(richardahecklerphd.com)



"can you hear me?" wants your articles, poetry, prose, and artwork for the next issue and the ones to come. We'll also need suggestions and recommendations on how we can make it better.

If there's a piece you want to submit to the newsletter, send it to [tspn@tspn.org](mailto:tspn@tspn.org) with the subject line "CYMH Submission".

Feedback and suggestions can also be sent to this address with the subject line "CYMH Feedback".

## Suicide Anonymous

Suicide Anonymous (SA) is a self-help program based on the model of Alcoholics Anonymous. It provides a safe environment for people to share their struggles with suicide and to develop strategies for recovery from suicidal preoccupation and behavior.

Suicidal people do not have safe places to talk honestly about their struggles with suicide. The stigma towards suicide pervades every segment of our society, including religious organizations and even the mental health field. SA, therefore, exists to offer a support system for survivors, to make a distinction between the suicide attempt and the person involved, to cast off the societal stigma that too often plagues the survivor, and to develop strategies for mutual support and healing.



During each meeting, a chairperson presents topics and members share their experiences or simply listen. Members also provide updates about how they are dealing with their suicidal impulses. Talking openly about suicide with people who understand the problem lessens the shame and stigma, combats isolation, and shows that it is safe to reach out for support in a crisis. In sharing their stories, members overcome the shame and stigma of a life of struggle with suicide. Meanwhile, listeners identify with the story or break through denial of the extent of their own struggles.

New participants pick experienced members to guide them through the Twelve Steps model. They also exchange phone numbers with group members as a resource for crises between meetings. Members learn to reach out to fellow members for support in a suicidal crisis. They also get to experience the other end of a suicide crisis.

Members also select bottom-line behaviors for themselves. These are component behaviors of suicidality like hoarding pills, suicidal fantasies, compulsively driving through cemeteries, etc. Members commit to stop bottom-line behaviors one day at a time, and these behaviors may change with progress in recovery.

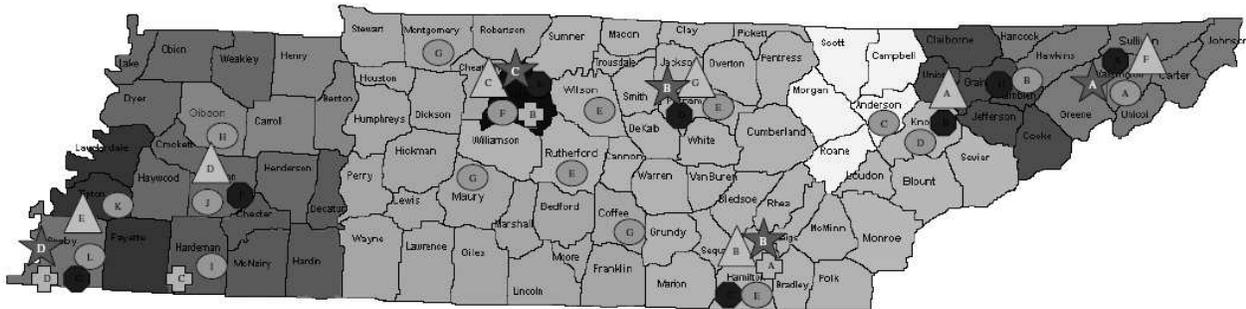
Several SA groups are available for viewing and participation via Skype. More information is available at [suicide.anonymous0811@gmail.com](mailto:suicide.anonymous0811@gmail.com).

Available Skype sessions:

Meeting time	Meeting name	Host city
Every Monday, 10 AM Central / 11 AM Eastern	World Wide Meeting	None
Every Tuesday, 6 PM Central / 7 PM Eastern	Grateful Blossom	Westmont, New Jersey
Every Sunday, 6:30 PM Central / 7:30 PM Eastern	Hope Group	Cordova, TN
Second and Fourth Thursdays, 6 PM Central / 7 PM Eastern	Rise Above	Lumberton, NJ

The SA website ([suicideanonymous.net](http://suicideanonymous.net)) features more information about the group, such as details about its World Service Committee and about the Little Book, the guiding document, which discusses the problem of suicide addiction from the viewpoint of the person affected. Interested parties may also contact the group directly at [info@suicideanonymous.net](mailto:info@suicideanonymous.net) or (901) 654-7673.

## Crisis Resources in Your Area



CRISIS TEAMS – CRISIS STABILIZATION UNITS – REGIONAL MENTAL HEALTH INSTITUTES – MEDICALLY MONITORED CRISIS DETOXIFICATION

**Mobile Crisis Teams**

- A Frontier Health
- B Cherokee Health Systems
- C Ridgeview Psychiatric Hospital & Center
- D Helen Ross McNabb
- E Volunteer Behavioral Health
- F Mental Health Co-Operative
- G Centerstone Community MHC
- H Carey Counseling Center
- I Quinco Community MHC
- J Pathways of Tennessee
- K Professional Care Services
- L Southeast Mental Health Center

**Crisis Stabilization Units/Walk-in Center**

- A Frontier Health
- B Helen Ross McNabb Center
- C Volunteer Behavioral Health – Chattanooga
- D Volunteer Behavioral Health – Cookeville
- E Mental Health Co-Operative
- F Pathways of Tennessee
- G Southeast Mental Health Center
- H Cherokee Health Systems

**RMHI**

- A Moccasin Bend Mental Health Institute
- B Middle TN Mental Health Institute
- C Western Mental Health Institute
- D Memphis Mental Health Institute

**MMCD**

- A Helen Ross McNabb
- B CADAS
- C Buffalo Valley
- D Pathways
- E Serenity
- F Frontier
- G Volunteer

**Respite Services**

- A Frontier Health
- B Volunteer Behavioral Health
- C Mental Health Co-Operative
- D Southeast Mental Health Center

This map of crisis response teams and facilities is provided to TSPN courtesy of Melissa Sparks, Director of the Office of Crisis Services and Suicide Prevention within the Tennessee Department of Mental Health and Substance Abuse's Division of Mental Health Services. More information about these facilities is available from Ms. Sparks at (615) 253-4641 or [melissa.sparks@tn.gov](mailto:melissa.sparks@tn.gov)

## Need Help Right Now?

Feelings of hopelessness, feeling trapped, feeling like a burden to others, increased alcohol or drug consumption, sleeping too little or too much, and withdrawing or feeling isolated from others are signs that you or a loved one may need help now.

If you or a loved one are feeling suicidal, please seek help immediately. Call the National Suicide Prevention Lifeline at 1-800-273-TALK or visit [www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org)

**NATIONAL**  
**SUICIDE PREVENTION**  
**LIFELINE™**  
**1-800-273-TALK**  
[www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org)