

# can you hear me?



stories of people who have survived suicide attempts

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## The ER Visit

*Aspring local author Catherine Denton is working on a book about her struggles with mental illness. This is an excerpt of the first chapter, which she has graciously shared with TSPN.*

I walked into the ER with only an overnight bag for comfort. I knew if I didn't take this path and instead took another, I'd be dead by now. The nurse at the desk hastily shoved a clipboard in front of me and I scribbled my name and my reason for being there. How do you write "I want to die" and it not sound silly or melodramatic? I obviously didn't attempt anything harmful but the fear and the desire was so very real and so very there.

Everyone behind the desk was professional and courteous in their manner and after a time the triage nurse called me back to a small room. I sat on an uncomfortable plastic chair as the nurse took my temperature, blood pressure and pulse. Then the nurse turned to me after she had written down her numbers on the chart.

"Why are you here?" the nurse asked in a casual manner, as if there was no rush to answer. Now was the time to say it out loud, to make it real. I stammered, "I am depressed. I'm afraid I'll hurt myself."

"Do you have a plan?" the nurse questioned.

"An overdose, I suppose."

"Do you have the means to do that?"

"Yes, I have my medications at home, but I didn't try it," I was quick to point out.

There was no judgment in the nurse's voice or pity. She showed only concern as she wrote in the chart on the small desk. She asked me what medications I took and other health questions such as allergies and medical history. After that she led me from the room down a long hall to a larger room with curtained partition walls.

"This is where you will be, miss." said the triage nurse as she left me in the care of the ER attendant and the Security Officer.

The ER attendant spoke to me as I put my bag on the only chair in the room. "I'll need you to take off all your clothes except your panties and slip on these gowns. One over the front and one over the back like a robe. Then put all your clothes and shoes you took off into this bag. The Security Officer will put them in a locked room so no one will bother them for you. All right?" The Attendant took my silence as acquiescence and left me to my duty.

I was left alone to enjoy my fashionable hospital attire and clear plastic bag with only a curtain separating me from the rest of the hospital and prying eyes. Now that I was well and truly in the system, how could being here possibly help? No one could pick up the pieces of my broken life and glue them back together. Why did I come here? Now I had to strip down and become even more vulnerable baring my butt along with my soul.

Since there is nothing but time weighing heavy on your hands and only a curtain for a wall, you quickly find out what your neighbors are in for. Some had similar problems, some different but



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).

## The ER Visit (continued)

all in emotional crisis. I supposed that was why they were all herded into one large room so that one or two security officers could be available if needed close by.

There was a mother with a teen going through drug withdrawal and her only thought was for her "baby's" suffering and how to get her through it. A middle-aged man was having a psychotic episode where he was hallucinating and frightened about his future. His sister was with him offering soothing words and I could imagine the sister smoothing his worried brow. Another man was acting quite belligerent and loud claiming he was cold and no one cared. His words were slurred and he threatened harm to the other people in the room if his demands weren't met. The security officers had to come several times to calm him. He seemed to be a "regular" for everyone knew his name and were aware of his constant demands. It didn't seem long before he was taken away somewhere while the rest of us waited our turn. It seemed the squeaky wheel did get greased but I wasn't sure I wanted the same flavor he had gotten.

It seems the very place of safety, the emergency room, is also the place where, for most people, anxiety surfaces due to the interminable waiting to be done. Waiting for a doctor to pronounce judgment so you can get further help or send you home calling you a faker and not worthy of his attention. I feared I would be thought "not sick enough" since I didn't attempt a suicide. How do you prove you were thinking about it? How do you convince someone, a stranger no less, that you want to die but you were too scared to do the deed?

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At long last... the social worker came in my room. She was a petite woman in her mid 50's with the required clipboard nearly everyone at the hospital carried.

"So I hear you're not so hot these days," she looked over her reading glasses and addressed me as I lay in the bed. "Do you want to tell me what the matter is?"

"I just want to die," I choked out staring hopelessly at the ceiling as if trying to find an answer in the tiles above me.

"Do you know why living isn't appealing anymore?"

"My brain hurts and I just want the pain to stop." I shifted in my bed and tears were trickling down my cheeks. Explaining was so difficult because I had to use the very part of my body that seemed to be the cause of all my wretchedness.

"How long have you felt this way? How did it start?"

"I guess so many things were happening at once... it was overwhelming... everyone wants something from me. It seems like it has been going on forever," I let out with a sigh.

"Tell me about your life. Are you married? Do you have children?" the social worker asked.

"Yes, I'm married. I have 2 children, a boy and a girl," I answered with relief. Finally something I could say and not have to think about if the answer was right or wrong. Would I be judged harshly for wanting to die and leave them?

The social worker asked various things to try to get a more detailed picture of my life. Was I being abused by my husband? Did I try to hurt myself by cutting or drinking too much? Was I abused as a child? Did I hear voices? Did I work somewhere?

"Do you want help in feeling better?" asked the social worker. "If you do, there is a unit here in this hospital where they can figure out what kind of help you need. It is on a locked floor so you would not be able to leave the unit any time you wanted and no one can get on the floor without permission. Do you understand what I am saying? Do you think this would work for you?"

"I understand. I do want help. I can't stay like this!" I say with pent-up relief in my voice. I was getting help. They believed me! Now if I can just make it to the unit without them changing their mind about helping me.

Another interminable period of time lapses while information is sent to the mental health floor and they get a room ready. I am convinced they have forgotten me but occasionally the security officer, which has changed to another person, checks on me. Other people come and go in the large curtain partitioned room where I am waiting and waiting.



## The ER Visit (continued)

After more than six hours since I first walked into the ER, a transport technician wheels in a chair for me to ride in to the mental health floor. I gather up my bag of clothes and my overnight bag that the security officer hands over to me and then we, the tech and I head upstairs. At this time of night there are few people about to see my embarrassment wearing the hospital gowns and clinging to my meager possessions. The tech doesn't speak much as we make our way down halls and corridors to the elevator.

As the elevator reaches the fourth floor, the tech presses the intercom button and a nurse on the other side of the glass doors answers. The nurse buzzes us in and I get up from the wheelchair. I hand the clothes and bag to a waiting nurse and breathe a sigh of relief. You see this is not the first time I have been here. This is a safe place to rest a weary mind and just finally *be* without the outside world asking "What's for dinner?" or "Will you help me with my homework?" or "Why do you cry all the time?" or "What's wrong with you?"

Now is the time to reboot the system. I will be able to peel a little more off of the onion of my life to get to the real cause of my illness. Now the work can continue.

## Reflections from the Staff of BuzzFeed

*The suicide death of Robin Williams on August 11 prompted many survivors of depression, mental illness, and suicide to share their stories in hope of explaining the problem to the general public. Staffers at the online news media company BuzzFeed were among those responding to the call. Below are some of the stories shared by reporters, contributors, and others at BuzzFeed in order to illustrate the complexity of the fight to stay alive and how many people are fighting it.*

*The full collection of stories, "20 Stories Of Depression And Suicide And Living Our Lives" is available on the BuzzFeed website (<http://bzfd.it/1ruO9cb>).*

When I was 9, I was the victim of a vicious sexual assault by a friend's older brother. For years after that I was depressed. I kept it a secret, and was afraid to tell anyone for fear of being ostracized and treated differently. I felt alone, and since I had no one to talk to about it, I suffered in silence. When I was 15, I made a conscious decision to take my own life.

I knew that my dad kept a revolver in his nightstand. It was a Saturday in the spring, and my parents went to the local fair for the afternoon. I took my dad's revolver to our back patio and readied myself. As I was taking the gun out of its sheath, I heard a car pull into my parents' driveway. This spooked me, so I hid the gun, and found out it was my aunt coming to drop something off. After she left I put the gun back, went into the house, and cried. I saw it as a sign from God that I was not meant to die that day. I was still extremely bothered by what had happened to me as a child. A few years later, with the help of a friend, I was able to tell my parents about the assault. What helped me the most through my feelings and stages of utter despair was talking to other survivors who had been the victims of similar attacks.

There are many people who have been assaulted as children, I came to find out. I initially talked to a friend's sister who had been sexually abused as a child, as well. Over the years I have talked to many other people, and it was so uplifting to know that I was not alone. For me, the cure was talking to others. No matter how bad it may seem, or how alone you may feel, others are there to help. By the grace of God and good people, I was able to get through that trying time in my life.

—Anonymous

One of the hardest things was learning I was worth recovery.

Demi Lovato (from the MTV documentary "Demi Lovato: Stay Strong")

## Reflections from the Staff of BuzzFeed (continued)

One of the saddest things in the world is to feel broken, and although you've somehow been figuratively ripped apart, you feel like can never be put back together again.

There are days when I ask myself, What are you staying here for? Most times I don't even have an answer. Sometimes I just don't want to be here anymore, and those are the toughest thoughts to deal with. But the days that I truly cherish are the ones where I'm so overwhelmed with happiness that it feels like I can beat this depression. That happiness comes from friends and the jokes we share with one another, it comes from family members and their unconditional love for me. I love when friends and family are able to penetrate the barrier of lies and insecurities that depression creates, allowing me to feel love. Those are the days that make life worth living, and those are the days that keep me fighting. The extremes of depression are the worst. One minute you could be on cloud nine and in the next you can feel like you've hit rock bottom.

I will be seeing a therapist soon. One day, however, I would like to get to a place where I can know for certain, without a doubt in my mind, that I belong here without the validation that comes from external forces.

—Michael Blackmon

There are times when my depression has made me feel like I'm not doing anything right in my life. That's a tough thought to fight against, because it feeds itself: Once you're convinced that you're worthless, you stop doing anything worthwhile. And suddenly you've become the person you already thought you were, someone who naps for hours just to make the days go by faster, and who looks for any excuse to avoid getting up or even turning on the light. But you're not worthless, even if your depression is keeping you from being an active member of society. When I got help and began to start feeling like a human again, I was able to reflect honestly on my achievements and the paths I have taken. And one of the things I'm proudest of, which is something I cling to when the depressive tendencies creep back, is that I've always been open about my struggles. I know how much it helps me to be reminded that I'm not alone. If I can do the same for others, I know I'm doing something right.

—Louis Peitzman

I've been fighting depression and anxiety for years. And it is a fight. Every day I battle my own brain. Some days I feel like I am winning, but many days it feels like a fight I will inevitably lose. Especially when I see others lose their own battles. When someone takes their life, it's tragic for their own sake and for the sake of their families, but on a personal level it is terrifying. Because if someone like that — someone talented, successful, beloved, seemingly with everything to live for, someone who has battled in the past and apparently won — if someone like that loses their fight, then what hope do I have?

I try to remember that I do have hope. I hope that I can win this battle. I hope that I will have many more good days than bad days. I hope that everyone struggling knows they're not alone. I hope that in their darkest hours, people can fight their way through. I hope for understanding. I hope for compassion. I hope for happiness. I hope.

—Jenna Guillaume

### **Stones and Sticks**

Cut me deep and I will bleed  
But hate me and I am damned.  
Bruise me and I change colors like the seasons  
But mock me and I am destroyed.

Poke out my eyes and night will fall  
But keep me ignorant and I will never see.  
Rip out my heart and I will sleep  
But steal my soul and I will die.

by Anonymous

"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 "CYHM 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).

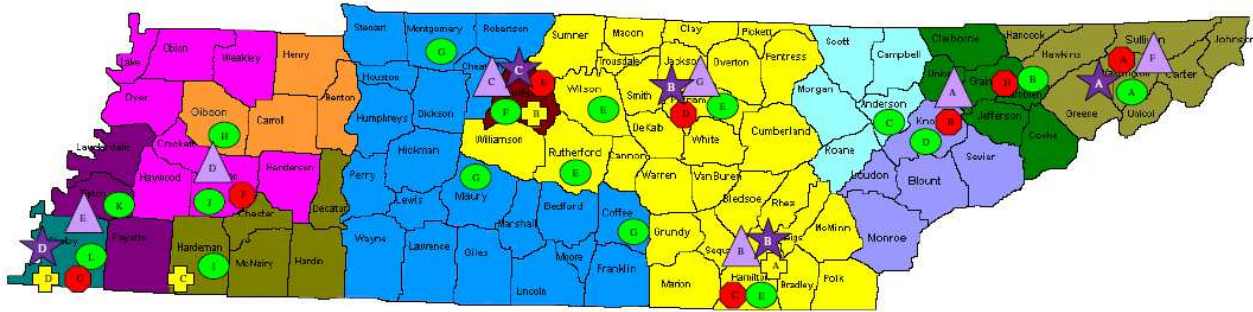
Available Skype sessions:

| 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

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|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><b>Mobile Crisis Teams</b> ●</p> <ul style="list-style-type: none"> <li>A Frontier Health</li> <li>B Cherokee Health Systems</li> <li>C Ridgeview Psychiatric Hospital &amp; Center</li> <li>D Helen Ross McNabb</li> <li>E Volunteer Behavioral Health</li> <li>F Mental Health Co-Operative</li> <li>G Centerstone Community MHC</li> <li>H Carey Counseling Center</li> <li>I Quinco Community MHC</li> <li>J Pathways of Tennessee</li> <li>K Professional Care Services</li> <li>L Southeast Mental Health Center</li> </ul> | <p><b>Crisis Stabilization Units/Walk-in Center</b> ●</p> <ul style="list-style-type: none"> <li>A Frontier Health</li> <li>B Helen Ross McNabb Center</li> <li>C Volunteer Behavioral Health – Chattanooga</li> <li>D Volunteer Behavioral Health – Cookeville</li> <li>E Mental Health Co-Operative</li> <li>F Pathways of Tennessee</li> <li>G Southeast Mental Health Center</li> <li>H Cherokee Health Systems</li> </ul> | <p><b>RMHI</b> +</p> <ul style="list-style-type: none"> <li>A Moccasin Bend Mental Health Institute</li> <li>B Middle TN Mental Health Institute</li> <li>C Western Mental Health Institute</li> <li>D Memphis Mental Health Institute</li> </ul> | <p><b>MMCD</b> ▲</p> <ul style="list-style-type: none"> <li>A Helen Ross McNabb</li> <li>B CADAS</li> <li>C Buffalo Valley</li> <li>D Pathways</li> <li>E Serenity</li> <li>F Frontier</li> <li>G Volunteer</li> </ul> |
| <p><b>Respite Services</b> ★</p> <ul style="list-style-type: none"> <li>A Frontier Health</li> <li>B Volunteer Behavioral Health</li> <li>C Mental Health Co-Operative</li> <li>D Southeast Mental Health Center</li> </ul>                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                        |

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)