Survivors After Suicide (SAS) helps people resolve their grief and pain in their own personal way, and helps them move forward in their lives, positively and productively.

Robert joined the Suicide Prevention Center about two months later when former director Lyn Morris became Didi Hirsch’s Vice President of Clinical Operations.

What brought you to the Suicide Prevention Center?

Two and a half years ago, I lost my former life partner of 15 years, Troy, to suicide. As a result of that loss, I deliberately began to search out resources and found Didi Hirsch’s Survivor after Suicide Group. Moved and inspired, I decided I wanted to work in suicide prevention. I was the director of a Home Health Program at St. Mary Medical Center in Long Beach when I began watching the employment openings at Didi Hirsch’s Suicide Prevention Center. I don’t think I would have pursued such an amazing opportunity based on where I was at that time in my life if it hadn’t been for Troy’s death. When the doors opened up so quickly, I realized the move put me exactly where I needed to be.

How does your experience as a survivor affect your work as SPC director?

As a survivor, I now understand the intense nature of grief associated with a loss due to suicide, and the necessary space that is required for healing. Like many survivors, I was left with feelings of immense loss and many questions, such as “Is there something I could have done, why didn’t I know this and could I have prevented it?” Although we cannot erase these feelings and questions, we can heal and change them. As the Division Director, I want my work here to be an example of a survivor who took a tremendous amount of grief, pain and loss and turned it into strength, hope, and a plan to make a difference. I want to enhance the already powerful mission of Didi Hirsch’s Suicide Prevention Center by creating a community of people who care and make a difference, and by creating a healing space for all of our survivors – those who have lost someone to suicide and those who suffer from suicidal ideation and attempts.

What do you envision for the future of the Suicide Prevention Center?

I am thrilled to be part of a plan to turn our crisis line into the most technologically advanced and clinically supported system in the country. We have an amazing staff and incredible volunteers. It’s my job to support them any way I can in continuing our mission of suicide prevention. My vision also involves enhancing the center’s counseling services so that we can bring in survivors of suicide and survivors of suicide attempts for grief counseling, as well as for individual, family, and group counseling. Our founders began this mission in the 1950s when they came to understand through their research that suicide is preventable. They wanted to build a treatment center but were ahead of their time and unable to fully realize that vision. So expanding our counseling services actually brings us full circle to carry out their original intentions.

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A Suicide Facilitator Experiences Delayed Grief

By Ken Danziger

For several years I have been co-facilitating Didi Hirsch’s monthly and weekly drop-in groups for survivors of suicide. It is the most difficult, most rewarding work I have ever undertaken. By rewarding, I don’t mean that it makes me ‘feel good about myself.’ Sometimes, the opposite is true. Group members bring in every permutation of grief that can be imagined: new loss, old loss, multiple losses and fears of additional or secondary losses. The work and attending emotions can be complex and overwhelming.

Death by suicide has an extra agony for those left behind. My beloved uncle killed himself in the 1970s. He emerged from a coma in the hospital, and immediately, violently, removed the life supports attached to his body saying, “They’re not going to make a guinea pig out of me.”

Family taboos being what they were, suicide was simply not identified, by any of us, at the time. Decades later, the truth surfaced and while I found myself recalling many elements of his life that must have contributed to his impulsive self-destruction, even so I could hardly begin to...

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Rick's Corner

Our grief is a part of our lives and just when we think we have attained control, it can wrap its serpentine body around us and with a violent squeeze, drop us to the floor with choking sobs or engulf us in a dark cloud of pain and tears.

It is not something we can predict and anything can trigger this frightfully strong emotion.

There is no timetable for these speed bumps on our path to healing. They can happen years later.

As British poet, Elizabeth Jennings has written,

"Time does not heal,
It makes a half-stitched scar
That can be broken and you feel
Grief as total as in its first hour."

I tell new survivors that their feelings are theirs and no one can take them away. It takes more energy to fight them than to accept, embrace and express them.

I wish I could live by the words I preach (no seminary for this old man) when I have a sudden and overwhelming need to cry.

I get sucker punched in the gut and try to force back the sob before it reaches my voice. The sounds that erupt from me are like the gulping croak of a frog on a lily pad, or the mewling whimper of a kitten.

Most times, I weather the pain. Other times, I reach out for help.

Know that you are not alone when your grief surges. Call a loved one, a friend or your clergy.

Better yet, call another survivor, for who shall know as well the tears and pain you experience?

Over time, we may learn what triggers our grief. We may be able to prepare for the wave before it hits or at least recognize and accept when it crashes into us. When we don't struggle against the waves, they wash over us more easily. This is life without our loved ones.

Live it safe. Live it well.

Peace and Love,

Rick Mogil has been program director of Didi Hirsch’s Suicide Prevention and Bereavement Services since 2007.

HELP LINES

Didi Hirsch Mental Health Services Suicide Prevention Crisis Line Los Angeles and Orange Counties: (877) 7-CRISIS or (877) 727-4747

National Suicide Prevention Lifeline: (800) 273-TALK or (800) 273-8255

TEEN LINE: Confidential telephone helpline for teenaged callers staffed by trained teens. Open 6-10 p.m. (800) TLC-TEEN

Trevor Helpline: Suicide hotline for gay, lesbian, bisexual, transgender or questioning youth (800) 850-8078

RESOURCES

American Association of Suicidology (AAS) (202) 237-2280 www.suicidology.org

American Foundation for Suicide Prevention (AFSP) (888) 333-2280 • www.afsp.org

Didi Hirsch Mental Health Services: Eleven sites in Los Angeles and Orange County provide mental health care for people with mental illness in communities where stigma/poverty limit access to care. (310) 390-6612 • www.didihirsch.org

Suicide Prevention Resource Center (877) GET-SPRC (438-7772) www.sprc.org or www.sprc.org/thespark

Full resource list at www.didihirsch.org

NEWSLETTER

A publication of Survivors After Suicide, a program of Didi Hirsch Mental Health Services that provides support groups for those who have lost loved ones to suicide.

SAS Program Numbers: LA: (310) 895-2326 OC: (714) 547-0885

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OC Holiday Drop-In Group
By Jacquelyn Rivera, LCSW, PPSC

The holidays are a time for joy, rest and relaxation, celebrating, and spending time with loved ones. There is holiday music in the air and decorations galore to enhance what is supposed to be a “wonderful time of year.” But for people who have lost a loved one to suicide, the season is full of triggers to remind them that they must go on living their lives without their important person. For many survivors, the holidays can be a very difficult time. Here at Didi Hirsch, we understand and acknowledge how hard it is for survivors to face the holidays without their loved ones.

Orange County Survivor Support Services holds monthly drop-in meetings for adults throughout the county who have been through one of our survivor support services and are looking for ways to stay connected with other survivors. Our holiday drop-in group is typically our largest and we use this time to recognize survivors’ extra need for support. It can seem as though there is never enough time to remember the important people who will always be in our hearts. That is why we create time to remember and to reflect upon our loved ones during each holiday drop-in session.

On December 5th, 2013, we had our annual Orange County drop-in group. The group was small, but its intimacy grew throughout the session. Group leaders offered space for the members to greet one another, to reflect upon the holidays, the support systems that we have in place, and our favorite memories of our loved ones. Survivors each received a small piece of paper on which they had the opportunity to write messages to their loved ones. They enclosed their messages in clear, circular-shaped ornaments that they also had a chance to decorate. These ornaments were not holiday specific, but merely symbolized the thoughts and feelings that survivors have when they miss their loved ones during the holiday season.

Nothing can take away the pain and sense of emptiness that many survivors feel during the holidays. But Orange County survivors who attended our holiday drop-in session left knowing they were not alone and had support from their fellow survivors.

Funded by the County of Orange Health Care Agency, Behavioral Health Services, Prevention and Intervention Division, Mental Health Services Act /Prop. 63.

Robert Stohr, continued from page 1

What was it like to participate in your first Alive & Running event in September 2013?

I was incredibly excited to be part of such a revolutionary event. It was wonderful to see Didi Hirsch bring together so many people who care about preventing suicide. The number of survivors who turned out to walk, run and raise money for the cause was so impressive. They have tremendous courage and strength and are a shining example of what is possible when people choose to take their pain and turn it into something meaningful.
More than 1,700 walkers and runners crossed under the big balloon arch at Didi Hirsch’s 15th annual Alive & Running 5K Walk/Run on Sept. 22 to raise awareness and money for suicide prevention services. The 2013 event included a record number of teams and sponsors who raised more than $240,000 for the Suicide Prevention Center’s ever-expanding services, such as innovative groups for suicide attempters and text crisis counseling for the deaf. Didi Hirsch’s CEO Kita Curry (yellow T-shirt) takes the stage with Survivors After Suicide Advisory Board Member Ester Bryant (red T-shirt) to thank participants for their support.
From my beach chair in the sand, I notice a little girl who tries to outrun the water chasing her up the shore. Waves sometimes knock her down, but she gets up for the chase. Then a rogue wave grabs the girl’s legs and drags her along the jagged rocks as the water retreats to the sea. Shocked, she sits covered in heavy wet sand. “Get up,” I whisper, but she is too afraid to move. That little girl was once me.

I arrived home from work one day and Frank wasn’t there. It seemed odd that his phone was off and that he hadn’t responded to my call, especially since we had dinner plans. I vacillated between anger and concern, wanting to strangle him and willing to give anything to get a call or a text. After six hours panic overtook me. I drove from a coffee house to a movie theater, but couldn’t find him. I called home and his cell phone. No answer. I left another text. No response. I checked Facebook and email and called family and friends. No one had heard from him. I turned on the news to see if there were any major accidents. None. I paced the hallway and listened for his truck. It never pulled up.

Finally, Captain Scott of LAPD called my cell at 2 a.m. “We’re on your front porch and need you to come open your door,” he said.

In that instant, the life I knew – my family, my dreams, my future – was over.

In the first days and weeks after Frank’s suicide, friends, family and neighbors rallied around me, bringing food, cards and support. My phone now had an endless supply of calls and messages, but I felt as though a sea of sympathizers had swallowed me. I couldn’t be angry with Frank, so I became frustrated by the intrusion.

As weeks turned to months, the visits and phone calls dwindled as people returned to their own lives. When people stopped coming, so did the food. The thought of shopping sickened me, but I had a daughter to feed. When I walked into a market for the first time in months, I saw a woman put a package of hamburger buns in her cart, as if preparing for a family BBQ, and someone else carrying a case of soda. I wanted to shout out, “Doesn’t anybody care that Frank is dead?”

Working with a counselor and making connections with others helped me re-engage in life. I eventually joined a support group specifically for survivors of suicide and became part of a community of people who made me feel safe sharing feelings of vulnerability. I learned to reach out and to be there for others, which gave me a sense of purpose. I made new friends and experienced new adventures.

With hard work and self-nurturing, I got out of the sand. Occasionally, I find myself back in it, but I’ve learned patience for my grief and myself. I see the horizon ahead with more waves for me to conquer. I may get knocked down again, but I’m eager to discover new shores.
The literature for suicide survivors tells us to lower our expectations of other people’s response to our pain and accept that what they say or do is what they are able to offer. We are told that if we can accept this, we will not be so easily disappointed. Everyone, including family members, grieves in his or her own way. I see the truth in this. But head and heart are on different tracks after a visit with relatives.

A friend advised me to have zero expectations for the visit, and I tried. I enjoyed seeing everyone and the usual family banter. Later, I realized the strain I had been under. No one asked how I was feeling four months after our son’s suicide, unless questions about work are code for that. No one shared any memory of Noah, even in passing, although my husband and I signaled it was okay to talk about him by mentioning him several times. When we made a toast at dinner to Noah, “who should have been here with us and who we all love and miss,” there was awkward, shocked silence.

It felt as if our 21-year-old son had never lived and as if the tragedy of his death had never happened. This made me furious. I know I’m supposed to understand people’s need to keep sorrow and discomfort at bay and have empathy for their not knowing what to say. But we parents of the child who is gone are the chief mourners. Why should we have to worry about other people’s needs? Why don’t they show more concern with our needs?

Of course, my needs continue to change, so how can I expect others to understand? In the early weeks, I needed someone around every day who could listen and provide comfort. I needed to unburden myself at least twice a week with major, 25-tissue crying fits, followed by a need to hold someone. Gradually, I realized I didn’t need so many people around; too many people trying to have coffee or take walks with me became draining.

After about six months, I learned that as long as I can freely express my grief with a small number of friends and family, in therapy, and in my SAS support group, I do not need to talk about it with everyone I see. I do not need to talk about our son and our loss at every social encounter. I am grateful for the precious few people who can talk about it, but I do not resent those who cannot.

I know my relatives are hurting, too. Yet, instead of having zero expectations of others, I ended up with zero tolerance during our visit. Maybe zero expectations are too much to expect of suicide survivors. We need to own all the conflicted feelings that come with this unpredictable journey, and hopefully have a safe space, like a support group, to vent and explore them.

Susan Auerbach completed an SAS support group in August 2013. This article is adapted from her blog, http://afterachildssuicide.blogspot.com.

I have read that people experience the grief of each loss differently. I can attest to that when, comparatively recently, after a long and valiant struggle, a friend made the decision to die by suicide. ‘Knowing’ about suicide, and its effects on those left behind, in no way lessened the gaping hole his death has left inside those who loved him.

The hard truth for survivors is that there is no way ‘around’ the pain of loss. When we choose, for whatever reason, not to deal with loss, it nevertheless stays with us, influencing our lives. We co-facilitators often hear how years of unexamined grief affects multiple areas of a survivor’s life.

I believe reconciliation can only be found, and here words become frustratingly imprecise, by finding ways to walk ‘through’, not ‘around’, grief. I salute those who attempt this hard journey by attending a survivor’s group. To me, survivors are heroes and, as a co-facilitator, I am honored to be in the room with them.
SAS Group Meetings

Everyone who has completed an eight-week Survivors After Suicide Support Group is invited to attend scheduled monthly meetings at any of the locations listed below. There is no charge.

**Drop-In Groups**

**San Gabriel Valley**
Meets the 4th Wednesday of each month, 7:30 – 9:00 p.m.
Meeting dates: Jan 22, Feb 19, Mar 26, Apr 16.

**San Fernando Valley**
Meets the 2nd Saturday of each month, 11:30 a.m. – 1:00 p.m.
Meeting dates: Jan 11, Feb 8, Mar 8, Apr 12.

**Santa Ana**
Meets the 1st Wednesday of each month, 6:30 – 8:00 p.m.
Meeting dates: Jan 1 (no meeting), Feb 5, Mar 5, Apr 2.

**South Bay**
Meets the 2nd Sunday of each month, 11:00 am – 12:30 p.m.
Meeting dates: Jan 12, Feb 9, Mar 9, Apr 13.

**West Los Angeles**
Meets every Tuesday night, 7:30 - 9:00 p.m.

**Eight-Week Groups**

Our eight-week support groups for those who have lost loved ones to suicide take place on the following schedule:

Group 1: Late February  
Group 2: Late May  
Group 3: Late August  
Group 4: Mid October.

Groups meet once a week for an hour and a half for eight consecutive weeks, with locations in Sherman Oaks, Culver City, Redondo Beach, San Marino and Santa Ana.

To be placed into a group, please call: Los Angeles: (310) 895-2326; Orange County: (714) 547-0885