January 2017 Newsletter

FLORIDA SUICIDE PREVENTION COALITION
A statewide, grassroots organization of survivors, crisis centers, & interested citizens

WHAT DID SHE SAY?

“I want to spread an awareness message that help & hope are available.” Kelly Sousa, FSPC Region 12 Director

FSPC MINI-CONFERENCE

FSPC is excited to invite you to submit a presentation proposal for FSPC’s 2017 Florida Taking Action for Suicide Prevention 2nd Annual Mini-Conference. The event will be held April 4th (pm) and 5th (am), 2017 at Florida’s Department of Children and Families (DCF) in Tallahassee. Please submit your proposal online at https://usf.az1.qualtrics.com/SE/?SID=SV_egENAp1BycZiI0I or email to roggenba@usf.edu by January 27th.

NEWSWORTHY

Article from Redlands Daily Facts: Suicide Prevention, by Traci Lowenthal, Guest columnist (4/22/16)

Shrink Rap: No More Silence About Suicide

My most recent article helped to shed light on signs and symptoms of someone who may be suicidal. It provided resources and ways to support someone feeling hopeless. There are many, many links online that provide this information.

There is, however, much less information available for those that remain after someone has died by suicide. My goal today is to share information to bring comfort
to survivors as well as the ways friends and family of survivors can support one another.

When someone dies by suicide, their loved ones experience an unimaginable emotional shock. Not only have they just learned of their loved one’s death, but that the death was a suicide. The pain and confusion a survivor feels is likely inconceivable to those who have not experienced it.

Along with these immense feelings, often survivors begin to question whether they could have done anything to prevent their loved one’s suicide. Some common questions that begin to occur to survivors are below:

- I should have seen signs.
- I should have done something.
- I feel responsible.
- I did not do enough.
- I should have listened more.
- I should have spent more time with him/her.
- I should have taken him/her to a therapist sooner.
- I will never forgive myself.
- I should have educated myself more

(Source: from Suicide.org)

These questions are typical for survivors. Please know that you are not alone in these feelings. Please also know that this is not your fault. Once again, it is not your fault. Your loved one or friend may have experienced depression or other mental health concerns and gone to great lengths to hide it from you and others. Ultimately, their actions were theirs & were potentially contributed to by many factors. It is not helpful to blame yourself, or your loved one.

Often when someone dies by suicide, there are hushed conversations and many questions. People try to piece together what happened, or use hindsight to determine where things began to go wrong.

Most notably, the survivor often experiences shame or a feeling of wanting to protect the person that has died by not sharing their cause of death. We rarely hear anyone openly discuss loss resulting from suicide. While it is immensely important that you find someone to talk with about your unique loss, it is always important to honor your own needs.

If you choose not to discuss the manner in which your loved one died, that is your choice. Please know, however, it is OK to discuss it if it feels appropriate to you. There is no need for shame.

If someone says something ignorant or offensive to you, spend time with others that love and understand you. An important fact to remember, from Suicide.org: “...Who you tell, and how much you tell them, is YOUR decision, and only your decision.”

You are in enough pain — choose your associations wisely and surround yourself with supportive, loving people. It is so important to talk about the complicated feelings surrounding loss through suicide. A friend, or family member can be wonderful resources, but so can support groups and mental health providers.
If you are in a work environment or school setting where gossip and rumors are occurring related to your loss, speak to your administrator, teacher or school counselor. Gossip and rumors are unacceptable and should be dealt with swiftly.

Often, friends of survivors do not know what to say or how to react. That’s OK. Be gentle with yourself too. One survivor who is also a therapist told me today: “People tend to pull back more from you if you tell them it was a suicide. They’re uncomfortable and so they don’t offer quite as much warmth, support, or condolences.” They’re not sure what to say, and so they are silent. This person also said: “Set aside your own reactions to the fact that this death was a suicide. Notice that these feelings are different, but then reflect on what your instincts would tell you to do, if this person’s loss was simply due to something that we’re more accustomed to, such as a random tragic car accident.”

In other words, if you’d drop off a meal or pick up dry cleaning — do that. Don’t let the cause of death limit your compassionate behaviors. Suicide survivors need these caring acts and will benefit from the contact.

It’s OK to say “I don’t know what to say, but I love you and I am here to talk if you want to.” As with any death, don’t say “Let me know what you need.” The survivor already has too many things happening — they don’t need to inform you of how you can help.

Send flowers, bring food. Rent a movie and invite them over. Set up a meal train so the family doesn’t have to worry about meals for the first couple of weeks.

I spoke to other survivors today and asked them what helped them feel comforted. Here is what they said:

“I used the memories that brought me joy to help deal with my grief. It was better to think of them and smile than to be so sad all the time. I remembered all the times my Dad was happy and smiling. Imagining his pain was very hurtful and held me back from allowing myself to accept what happened.”

“What brought me the most solace was having someone that I could be honest with, that would cry too and hold me when there were simply no words to describe my grief. Having someone present that was non-judgmental and willing to listen. Suicide is such a hard word to say because of the stigma.”

If you are a survivor of suicide, be gentle with yourself as you grieve and attempt to limit stress and increase things like rest and self-care behaviors. Humor can also be a wonderful coping strategy (though at first, laughing may feel incredibly uncomfortable).

Above all, find at least one person with whom you can be completely open and honest about all your feelings. Talk with that person as often as you need and find a support group or therapist.

If you are able, take time off work. Journal, engage in activities that bring you comfort and enjoyment and keep talking. There is no right or wrong way to grieve. Take as much time as you need.

The following are resources for survivors:

• survivorsofsuicide.com.
• allianceofhope.org
If you are thinking of ending your life, or know someone who is, there is help available at The National Suicide Prevention Lifeline at 1-800-273-TALK. Please call.

Dr. Traci Lowenthal is the owner of Creative Insights Counseling, a counseling agency in Redlands serving individuals, families, and couples. She can be reached at drtraci@creativeinsightscounseling.com or 909-240-7833.

IN FOCUS
Get to know a Regional Director or Officer a little better in each newsletter.

Rene Barrett, FSPC Region 10 Director (Broward). Rene Barrett, as the founding executive director of the Florida Initiative for Suicide Prevention, Inc. (FISP), has been a leader and lifesaver. She spearheaded an organization dedicated to changing the environmental factors that contribute to helplessness, hopelessness and isolation as causes of suicide. Hers is an impassioned voice for strategies that reduce risks for suicide and also for supports to help those who have lost loved ones to that devastating consequence. As a founding member of the Florida State Task Force for Suicide Prevention, Rene has fought to bring the acclaimed SUN program to Florida schools. Through that project, adolescents at risk are targeted and supported by peer and professional intervention that can be lifesaving. She is noted for her willingness to collaborate to expand public and professional education and to promote advocacy initiatives in support of her cause. Her network of allies has included survivors, educators, legislators and community advocates. While serving as FISP’s director, she was recognized by the Surgeon General of the United States as an innovator for the development of a national strategy for suicide prevention in his “Call to Action” and has used her leadership in ongoing efforts to secure an office of Suicide Prevention for Florida. Although now retired, Rene continues to facilitate a support group for survivors, and also works with her husband helping the disabled secure employment, and is an advocate for justice.

FLORIDA SURVIVORS & COPING RECOMMENDATIONS (part 2)
We continue a focus on coping with loss. We solicited coping tips from survivors affiliated with FSPC and are including some in January’s newsletters (some tips were previously included in December’s newsletter. The following My Four Tools for Survival are from Rene Barrett (FSPC Region 10 Director).

I can speak to you from my bereavement as a survivor of my sister’s suicide in 1975, and working in the suicide community as an advocate and activist, but also someone who has worked professionally to bring hope to those who have suffered that devastating loss. Although I have stepped down in my professional position as founding Executive Director of the Florida Initiative for Suicide Prevention, Inc., I still facilitate a suicide loss support group in Hollywood and find comfort in championing the cause to reduce hopelessness and helplessness and attack the environmental factors that contribute to our society’s ills.

First, let me talk about what helped me as a survivor. I’m not fooling anyone when I say it took many years to get to where I am today. Things I can say that are vital:
a) Support, professional, and support by community. When I went to my first support group 10 years after the death of my sister by suicide, it was the first time that I was able to talk about what happened, and fully related to the people in my survivor circle. It was comforting and a vital release from all that I carried for so many years. A relief that I had not allowed myself that ultimately spun into a pervasive depression. Facing my loss for the first time was the beginning of recovery.

b) Meditation: I find it crucial to clear my mind in order to find a brief respite of peace. Research has proven the benefits of meditation. For me personally, I experience meditation feeling relaxed and centered; able to manage any burden. Even if it is only a brief moment of escape from my daily routine. You can recall your meditation anytime, anywhere. In line at a grocery store, at home in your garden. Focus on your breathing and maybe play mellow music. Meditation is a wonderful way to find sleep.

c) Exercise: For me, it’s yoga and fast walking. Without it, I am nothing. Plain and simple. It’s medicine for the body and soul, as is meditation.

d) Volunteer, and if you don’t have the time, make a conscious effort to help not just those you love, but a stranger. I love the fact that I am able to be there for others who have experienced this devastating loss. We need a kinder and gentler nation. It begins with building a habit of being kind to one another.

Recovery from a loss is a journey, and it is my hope that by sharing my path with you will be helpful to anyone suffering from this unfathomable tragedy.

RESEARCH FOR THE REST OF US

Sometimes important research is filled with jargon, is hard to understand, or doesn’t seem to make sense. We’ve tried to summarize research in common English language.

People bereaved from suicide loss identified three broad areas: the feeling of being bereaved, the meaning-making process following bereavement, and the social context.

Researchers reviewed select research to improve understanding of the grief process of those bereaved by suicide. Three themes identified included the person’s struggle to make meaning behind the suicide; the meaning of bereavement, such as the emotions that one experiences after losing a loved one to suicide; and the context that effects the process of bereavement and the associated feelings and hardships.

Commonly reported emotions among bereaved individuals were guilt and blame. Those who were bereaved often blame others (e.g., members of the family) for the suicide, perhaps to protect themselves and the person who took his/her life from blame. However, self-blaming was extremely common and could be due to the lack of understanding that a bereaved person has towards the suicide. Attempting to make sense of it could lead to distorted thoughts of what that person wasn’t doing right and what they could’ve done to prevent the suicide, which can lead to extreme feelings of guilt. Feeling guilty and trying to place the blame on someone for the suicide can also lead to feelings of betrayal and punishment from the deceased. Overall, the feelings associated with bereavement are all affected by factors such as how the bereaved person tried to rationalize with the suicide and the responses of those in their environment. Seven research articles relevant to themes associated with the meaning making process of suicide bereavement were reviewed. Some bereaved individuals have difficulty trying to understand the act of suicide itself and relate it to their own self-beliefs, beliefs of the deceased,
and beliefs about the world. Often times, the meaning of the suicide and the person’s own beliefs strongly go against each other potentially leading to the previously discussed feelings of self-blame and confusion. The process of finding a meaning in the suicide is one that involves individuals finding similarities between previously held assumptions of their loved one to a possible explanation behind the suicide, while remaining true to themselves. During this time, it's also important for the person to be able to reminisce on their relationship with their loved one; this is crucial in order to positively remember the deceased and continue a relationship with them during after life. Creating a relationship with the deceased paves the way for positive changes in the life of the bereaved. Many claim that while searching for a meaning behind the suicide, they developed a strong sense of self-awareness, as well as a meaning for their life. A bereaved person undergoes remarkable changes within themselves as they search for the meaning of the death.

The emotions a person bereaved by suicide experiences and his or her ability to make sense of a suicide are two factors that are heavily influenced by the social context of bereavement. A concerning matter within the context of bereavement was that the participants felt unable to openly discuss the loss of their loved one with others. This issue was labeled as “silenced voices” and was first reported by parents who lost their child by suicide. Perhaps these feelings of suppression stem from other people’s inability to relate to such strong emotions or because the support seemed to disappear a few months following the funereal. A lack of support could cause a bereaved person to feel alone during a time in which support from others is needed the most. Another important topic discussed within the context of bereavement is the impact that suicide has on a family. Families often feel as though they lose each other because everyone becomes so involved with their own grief that they fail to recognize that their family members are also grieving. This issue was labeled as an “invisible family.” This destruction within the family could lead to the bereaved people blaming themselves or other family members. One study suggested that feeling reluctant to communicate with other family members about the suicide is related to the fact that the participants were blaming themselves for the suicide.

Support groups can be helpful as a component of bereavement services that also offer individual assistance from trained professionals. These services should seek to help those who are bereaved find aid in searching for a meaning behind the suicide. Information and training can also be helpful in clarifying general grief expectations for the bereaved and interaction skills for the wider community in communicating with the bereaved. Additionally, professionals could benefit from specialized training on the grief process related to suicide.

(Summary by Yaritza Carmona & Stephen Roggenbaum)


WHAT’S HAPPENING

[ ] January 27-28, 2017. Local Outreach to Suicide Survivors (LOSS) Team Conference (Tallahassee). Registration (limited seating) at www.nami-tallahassee.org/lossregistration

[ ] Save the Date: Suicide Prevention Day at the Capitol. This advocacy event will be April 6, 2017 (Tallahassee).
Save the Date: FSPC 2017 Second Annual Florida Taking Action for Suicide Prevention Mini-Conference. The two-half day mini-conference occurs on April 4 & 5, 2017 (Tallahassee).

**THE FLORIDA HEALTHY TRANSITIONS PROGRAM**

John B. Mayo, M.A., L.M.H.C., Deputy Executive Director, Success 4 Kids & Families

Tonicia Freeman-Foster, Ed.D., Florida Healthy Transitions Project Director

Life can be very challenging for today’s youth and young adults, many of whom have a limited number of people they can turn to for support. According to the Centers for Disease Control and the American Foundation for Suicide Prevention, suicide is the 3rd leading cause of death for youth and young adults ages 10-24, and the 2nd leading cause of death for young adults ages 25-34, living in the state of Florida1. A prior history of depression or other mental illness, stressful life events, and alcohol/drug use are just a few of the many factors that can increase the risk of suicide among youth and young adults2.

*Bent Not Broken* is the tagline for the Florida Healthy Transitions program. The tagline was chosen by youth and young adults who strongly believe in their ability, and the ability of their peers, to “weather” and overcome any storm that life presents. Florida Healthy Transitions aims to improve access to treatment and support services for youth and young adults ages 16 – 25 who have been previously diagnosed, are experiencing symptoms, or are at risk of developing a serious mental health or co-occurring substance use condition. In particular, the program focuses on young people who are most likely to “fall in between the cracks” due to funding issues, stigma, and limited availability of services that are responsive to the cultural perspectives of youth and young adults.

Florida Healthy Transitions is funded by the Substance Abuse and Mental Health Services Administration (SAMHSA). The program is currently being implemented in Hillsborough and Pinellas Counties, with hopes to facilitate the creation of additional Florida sites in the near future. The primary partners are Florida Department of Children & Families, Central Florida Behavioral Health Network, BMR Consulting, Crisis Center of Tampa Bay, Success 4 Kids & Families, 2-1-1 Tampa Bay Cares, and Suncoast Center.

The experiences of the Florida Healthy Transitions program participants vary: some are currently receiving behavioral health services, some previously received services, and some are new to the behavioral health care system. However, what each of them have in common is their desire to fit, and to be a part of something different. The Florida Healthy Transitions program staff are responsive to the needs of youth and young adults, and meets wherever they are in life. Over 50% of the program staff are young adults themselves. In addition to the Youth Coordinators and Peer Support staff who are able to share their own personal stories of resiliency, the program also employs Bachelor level Care Coordinators and Transitional Coordinators.

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Specialists. As a team, the staff are able to successfully relate to the program participants, assist them with achieving their goals, and empower them to be their best.

Since its launch in January 2016, Florida Healthy Transitions has conducted community outreach to over 2,000 individuals, and provided services to nearly 2,700 youth and young adults. Based on the most recent enrollment data consisting of individuals receiving intensive case management or Wraparound services (n=53), 74% of the youth/young adults indicated they had experienced trauma or violence in the past, 65% lacked adequate support from friends/family during a crisis, 26% perceived their health as less than good, 68% felt they were unable to handle daily problems effectively.

Currently, there are three levels of intervention and services within the Florida Healthy Transitions program. The 2-1-1 Call Centers provide crisis intervention, suicide prevention, community resource linkages, and care coordination services 24 hours a day/7 days a week. Mental Wellness Support Groups are offered on a weekly basis, and consist of therapeutic social activities and creative wellness discussions. Additionally, Community-based Care Coordination and Intensive Wraparound services are provided, and include education and employment/vocational assistance, as needed. The anticipated outcomes for youth and young adults who are receiving Florida Healthy Transitions services include: a decrease in crisis stabilization services; decrease in the number of absences from work or school; decrease in the use of alcohol and drugs; increase in compliance with medical care; and an increase in social supports.

If you are a youth or young adult between the ages of 16-25, residing in Pinellas or Hillsborough County, and in need of assistance or would like learn more about Florida Healthy Transitions, please Dial 2-1-1.

RESOURCES

If you or someone you know is in crisis, please call 1-800-273-8255 (National Suicide Prevention Lifeline)

Crisis Text Line – text “start” to 741-741

Veteran’s Crisis Line 1-800-273-8255, press 1 & https://www.veteranscrisisline.net/

Resources for Survivors of Suicide Loss. SAVE. Suicide Awareness Voices for Education maintains a resource list at: http://suicidegrief.save.org/ResourceLibrary

Suicide Loss Survivors. The American Association of Suicidology (AAS) hosts a webpage with listed resources for survivors of suicide loss at http://www.suicidology.org/suicide-survivors/suicide-loss-survivors


Project ChildSafe® is committed to promoting firearms safety among firearms owners through the distribution of safety education messages and free firearm Safety Kits [cable-style gun-locking device and an informational brochure (also in Spanish)]. Find Florida Law Enforcement partners to inquire about a free Safety Kit from Project ChildSafe. http://www.projectchildsafe.org/safety/safety-kit/Florida
Harvard’s Means Matter is part of the Harvard Injury Control Research Center (Harvard School of Public Health), dedicated to reducing injury through training, research, intervention, evaluation, and dissemination. The Center has published hundreds of studies on injury topics ranging from motor vehicle crashes to alcohol use to youth violence and suicide. 

https://www.hsph.harvard.edu/means-matter/means-matter/

Florida’s Statewide Office of Suicide Prevention (DCF):

http://www.myflfamilies.com/service-programs/mental-health/suicide-prevention

National Action Alliance for Suicide Prevention: The Public-Private Partnership Advancing the National Strategy for Suicide Prevention:

http://actionallianceforsuicideprevention.org/resources

Is there a local NAMI Chapter in my area?  http://www.nami.org/Local-NAMI?state=FL

Controlled Substance Public Disposal Locations. Proper disposal of expired drugs or unused medications can be an effective suicide prevention tool by eliminating access to lethal means. Many community-based drug take-back programs offer the best option for disposal. For disposal locations

https://www.deadiversion.usdoj.gov/pubdispsearch/spring/main?execution=e1s3

AN EXTRA HELPING . . .

The following is an excerpt from STOP Suicide Northeast Indiana’s Help & Hope: For Survivors of Suicide Loss resource (with permission from Colleen Carpenter, Suicide Prevention Trainer & Consultant).

GRIEF AND COPING: WHAT DO I DO NOW?

Life as you know it has changed forever. You may feel numb and lost, not knowing where to turn. Experiencing a range of emotions is common: fear, anger, relief, abandonment, guilt, shame, and perhaps even responsibility for your loved one’s death. These can change rapidly and family members may have different reactions at different times which sometimes can lead to conflict.

Know that others have walked this difficult path before you. Reach out to those who have survived a suicide loss. Move forward step by step at your own pace and do not allow anyone to rush or criticize your grieving process.

YOU ARE NOT ALONE. There are many ways to connect to others—staying in contact with others can help you through your grief.

Reach out for support:

• Attend a support group for suicide loss survivors (in person or online)
• Talk to a professional grief counselor
• Seek a licensed mental health provider, if needed
• Talk with those you trust (family, friends, faith leader, neighbors) to share your loss & pain
• Continue to ask the “why?” questions as long as you need to

Grieving can take over your life, so taking care of yourself is important:

• Try to get plenty of sleep, rest, and be gentle with yourself
• Eat healthy food and drink water
• Keep yourself busy by doing something you enjoy
• Continue your exercise routine


FSPC MEMBERSHIP
New FSPC Membership or Renewal information available online at:
http://www.floridasuicideprevention.org/membership.htm