

## Resource Sheet #6: The Phenomenology of Suicide: First Person Narratives

### Phenomenology of suicide: the experience of suicide from a client's perspective

- **Developmental history.** Client narratives and psychological autopsy studies reveal that suicide does not have a simple cause. It is the culmination of life events and has a developmental history.
- **Psychic pain.** The mental anguish called psychic pain may be an overarching description of the experiential/phenomenological state that leads an individual to seek death through suicide as an escape.

From **DARKNESS VISIBLE** by William Styron, copyright © 1990 by William Styron. Used by permission of Random House, Inc.

“What I had begun to discover is that, mysteriously and in ways that are totally remote from normal experience, the gray drizzle of horror induced by depression takes on the quality of physical pain. But it is not an immediately identifiable pain, like that of a broken limb. It may be more accurate to say that despair, owing to some evil trick played upon the sick brain by the inhabiting psyche, comes to resemble the diabolical discomfort of being imprisoned in a fiercely overheated room. And because no breeze stirs this caldron, because there is no escape from this smothering confinement, it is entirely natural that the victim begins to think ceaselessly of oblivion...”

*And so William Styron, award winning writer, describes his experience with depression ultimately leading to suicidal ideation and behavior. The following passages are excerpted from his book and to be used for instructional purposes in the training of mental health professionals working with individuals at risk for suicide.*

In Paris on a chilly evening late in October of 1985, I first became fully aware that the struggle with the disorder in my mind, a struggle which had engaged me for several months, might have a fatal outcome. Only days before I had concluded that I was suffering from a serious depressive illness, and was floundering helpless in my efforts to deal with it. As I drove past Hotel Washington, a hotel I had not seen in nearly 35 years I recalled my stay there so many years before when I wrote my first novel and was a young celebrity, causing me to feel that I had come fatally full circle. I recall saying to myself that when I left Paris for New York the next morning it would be a matter of forever. I was shaken by the certainty with which I accepted the idea that I would never see France again, just as I would never recapture a lucidity that was slipping away from me with terrifying speed.

If the pain were readily describable most of the countless sufferers from this ancient affliction would have been able to confidently depict for their friends and loved ones (even their physicians) some of the actual dimensions of their torment, and perhaps elicit a comprehension that has been generally lacking...due to the basic inability of healthy people to imagine a form of torment so alien to everyday experience. For myself, the pain is most closely connected to drowning or suffocation..but even these images are off the mark.

Never let it be doubted that depression, in its extreme form, is madness. The madness results from an aberrant biochemical process. It has been established with reasonable certainty (after strong resistance from many psychiatrists, and not all that long ago) that such madness is chemically induced amid the neurotransmitters of the brain, probably as the result of systemic stress, which causes a depletion of the chemicals norepinephrine and serotonin, and the increase of a hormone, cortisol. With all this upheaval in the brain tissues, the alternate drenching and deprivation, it is no wonder that the mind begins to feel

aggrieved, stricken, and the muddled thought processes register the distress of an organ in convulsion. Sometimes, though not very often, such a disturbed mind will turn to violent thoughts regarding others. But with their minds turned agonizingly inward, people with depression are usually dangerous only to themselves.

Loss, in all of its manifestations is the touchstone of depression...in the progress of the disease and, most likely, in its origin. At a later date I would gradually be persuaded that devastating loss in childhood figured as a probable genesis of my own disorder; meanwhile, as I monitored my retrograde condition, I felt loss at every hand. Loss of self-esteem is a celebrated symptom, and my own sense of self had all but disappeared, along with any self-reliance. This loss can quickly degenerate into dependence, and from dependence into infantile dread. One dreads the loss of all things, all people close and dear. There is an acute fear of abandonment. Being alone in the house, even for a moment, caused me exquisite panic and trepidation. My losses mounted and proliferated. There is no doubt that as one nears the penultimate depths of depression, which is to say just before the stage when one begins to act out one's suicide instead of being a mere contemplator of it...that acute sense of loss is connected with a knowledge of life slipping away at accelerated speed.

It is hopelessness even more than pain that crushes the soul. So the decision-making of daily life involves not, as in normal affairs, shifting from one annoying situation to another less annoying...or from discomfort to relative comfort...for from boredom to activity...but moving from pain to pain. With depression, you become the "walking wounded." The sufferer from depression is thrust into the most intolerable social and family situations and there he must, despite the anguish devouring his brain, present a pleasant face, try to utter small talk, be responsive to questions, and knowingly nod and frown and God help him, even smile.

After I had returned to health and was able to reflect on the past, I began to see clearly how depression had clung close to the outer edges of my life for years. Suicide has been a persistent theme in my books. My father battled the gorgon for much of his lifetime, and had been hospitalized in my boyhood after a despondent spiraling downward that in retrospect I saw greatly resembled mine. But I'm persuaded that an even more significant factor was the death of my mother when I was thirteen.

For those who have dwelt in depression's dark wood, and known its inexplicable agony, their return from the abyss is not unlike the ascent of the poet, trudging upward and out of hell's black depths and at last emerging into what he saw as "the shining world." There, whoever has been restored to health has almost always been restored to the capacity for serenity and joy, and this may be indemnity enough for having endured the despair beyond despair.

The following excerpts are from *Waking Up: Climbing Through the Darkness*, by Terry L. Wise ([www.TerryWise.com](http://www.TerryWise.com)). These excerpts have been re-printed with the consent of the publisher, Pathfinder Publishing, Inc., 120 South Houghton Road, Tucson, Arizona 85648, and are to be used for instructional purposes in the training of mental health professionals working with individuals at risk for suicide.

Terry Wise's true story told in narrative form is of love and pain and includes her dialogue with a therapist who was willing to stick with her and help put her broken heart together again. Terry tried to kill herself but survived. The following passages are excerpted from her book and to be used for instructional purposes in the training of mental health professionals working with individuals at risk for suicide.

### March 2000

"...I've had unbelievable anxiety for weeks," I admitted..."I've tried to keep things under control. I hate having anxiety attacks and talking about how they feel only exacerbates the angst," I explained, already feeling the resurgence of palpitations in my chest.

"Anxiety and loneliness. Even when I'm with people, I feel alone...Except for the years Kurt was healthy, I've probably felt like this most of my life."

I finally decided to brave my most private, defining character flaw. "It's hard to tell you...The truth is that I am a loser."

"They see the image I've created—that I'm more popular and grounded than I really am...I really feel that I was born with something inside of me that makes me a loser."

"I think I first noticed it somewhere around 10 years old."

"I'm innately a malcontent. I get bored or uninterested in things so quickly. It's really hard for me to find anything or anyone that I enjoy for any length of time...I've spent a majority of my life bored and unhappy...I've always felt like dying was better than living."

"I can't remember exactly when it began but, I distinctly remember being in the fourth grade, walking across the school field, scuffing my heels through the grass, thinking how I couldn't wait until this was over—life, that is."

### November 2000

I discreetly glanced around the bookstore before reaching toward the shelf...My fingers took hold of the binding and as I clenched the tiny, hardcover book tight to my chest, I wandered over to a seat in the most remote corner of the store. *Final Departure*, an instruction book for assisted suicides.

Nevertheless, the unyielding grip of depression had me by the throat, and I could barely embrace the notion that the core of my feelings would ever change.

As I continued to read through the pages, I was overcome with the guilt of my selfishness, and despised myself for my inability to appreciate and embrace my life.

With the debate still screaming inside of me...I handed the book to the cashier, and watched her tally up the final amount due. I then made my payment with the currency of betrayal.

### December 2000

I closed the book I had studied on assisted suicide and poured what remained of the morphine into a glass, wondering if I could speedily gulp down the thick syrup as instructed.

I began another count: 60 doses of morphine, 200 Percosets, and a large glass of gin. A plastic bag lay next to my pillow...What was the correct amount? What was too much? Too little? Should I use the plastic bag?...In the event of a drug miscalculation, sealing it over my head before I went unconscious would ensure suffocation. It was a 100 percent surety that I would never again open my eyes. But how could I mercilessly allow my family to discover me in a scene more fitting for a horror movie? The hideous sight of my lifeless face, shrink-wrapped inside a plastic bag, would be a permanent image replayed in their minds forever...Ultimately, by not factoring in the bag, I decided to take the 10% chance that an overdose would fail.

This was not the first time I had gone through the procession of laying out the necessary accoutrements. However, this was the first time I had meticulously covered every last detail. I put my mail on hold, cleaned out the refrigerator and tidied up the closets. I prepaid all of my bills and made sure the 'do not resuscitate' directives of my health care proxy could be easily located. I wore the consoling fabric of Kurt's jeans and his favorite t-shirt that I had saved...I had become reclusive enough since the funeral to cover my absence with obscure references that I was going out of town for a few days. My need to get away from the difficult atmosphere of the holiday season was understandable. Everyone would be too distracted by their own holiday engagements to give a second thought to my whereabouts.

...Hours passed...It's strange to look back on what was going through my mind...My thoughts, which were ordinarily too active for me to bear, vacillated between hosting an unfamiliar blankness and racing with unrelenting concerns. It was an adrenaline rush of clarity and catatonia in one—an inexplicable combination of emotionless fear.

I was preoccupied with the minutiae. My focus was largely on logistics and minimizing the aftermath...Should I drink the entire jug of morphine and skip the Percosets? Should I crush the pills or just leave them in tablet form? Should I just go ahead and take everything, despite the risk of vomiting the fatal dose?...If I was doomed to wake up, what kind of brain damage would I sustain?...Rivalling as one of my most acute fears was the terror of waking up in restraints, confined to a psychiatric ward. Would I lose my freedom and independence?

...I struggled with the obsessive cycle of concerns about the impact on others.

Who would notice I was not heard from in days?...What would I have done to them once they caught the indelible, first glimpse of my motionless feet? Shamefully, I admit that in the end, my inclination to prioritize

the feelings of others meant shit to me. All that really mattered was to finish the job and overcome my fear that I would wake up and live to be held accountable for my actions.

...However, after living in the hell of over two decades of exhaustive contemplation, for the first time in my life, I stood on the threshold of death's door with the numbness of a firm resolve...The final thing I recall was swallowing the last fistful of Percosets. I did not make a suicide attempt. I killed myself.