

“I Should have Seen the Signs...”

Since 1980, EveryStep’s Amanda the Panda program has delivered love and caring through innovative services such as weekend grief camps, support groups, fun days, school visits and holiday support to inspire hope and healing after the death of a loved one. For more information, visit everystep.org
(515) 223-4847 | (877) 533-4847

“I should have seen the signs...”

A common misconception is that signs of suicide risk can always be noticed, and that all suicides are preventable. The truth is, many people who are planning to complete suicide hide these behaviors behind friendly smiles or closed doors, and many of the risk factors are also just normal human activities: for example, a person who has been ill will naturally withdraw from company while they recover (isolation), and many elderly people worry about being a burden to loved ones. These things alone are not risk factors for suicide, but can be pieces of a much larger puzzle.

“There were better options than suicide!”

Suicide is not a rational decision made by a fully-functioning person. Just like any other part of the body, brains can experience injury. The brain of a suicidal person is unable to act rationally, because it is so overwhelmed by pain. The only thing that brain is concerned with is ending pain, and the only option it allows a person to see is suicide. For the suicidal person, suicide is seen as the only way to end their pain. There are no other options.

“Didn’t they love me enough to keep living?”

Many who have attempted suicide expressed the feeling that they were doing loved ones a favor—their deaths would remove a burden from their loved ones, and possibly bring about financial help (life insurance money). Suicide is seen by these people as a merciful act performed out of love. For others, the suicide brain forces them to believe that they are unloved, and that suicide is their only way to escape that pain.

Those of us with healthy minds can easily see many options when we are feeling depressed: talking with a professional doctor or therapist, medication, healthy eating and movement, etc. If a “normal” person was to have these thoughts, they could easily get help, but a suicidal brain is incapable of those thoughts/actions.

“I feel so guilty and angry”

Even with all of the facts, you may still feel guilt and anger around your loved one’s suicide. Guilt and anger are normal feelings when we are grieving. It is okay to experience guilt and anger, whether or not it is a rational reaction. When you are experiencing these painful feelings, check in with yourself: do you have someone you can talk to about these feelings, either in person or on the phone? Do you need to speak with a professional? Don’t allow your grief, guilt, and anger to isolate you from those who care about you and those who cared about your Loved One. If you are feeling overwhelmed, the National Suicide Prevention Lifeline is a great place to find a caring ear and many resources to help you 24 hours a day, 7 days a week: 1-800-273-8255.

