

There is no Preparedness

There is no preparedness for suicide. Life changes for everyone - forever. The devastation for those affected is indescribable – there are so many questions for which there will never be an answer. There will be constant self doubt surrounding issues like did I do enough; was I compassionate enough; could I have changed things so that this never happened? A million what ifs and whys.

To understand clinical nature of mental illness I defer to the professionals. I can say little more than, at one stage, life was perfect- a beautiful, vivacious wife, healthy and happy children, beautiful grandchildren, sufficient money to pay the bills and increasing discussions with lifelong friends about holidays, outings and trips. We were two individuals who having been together for more nearly forty years, had grown up together, who in retirement now were making the necessary adjustments to our lives while recognising the need to have our own interests. Changes to behaviour were accepted as a reflection of our changing, evolving lives. Then one day the questions begin “ what is going on, why are you doing that?”

In our case the nature of mental illness was the crux of the issue. It is traumatic to everyone to live with on a day by day basis. Being informed that your beautiful, beautiful and wonderful wife needs help leaves you in space. Do I tell my children? Do I tell my friends? What do I tell them, particularly as your wife tells you not to say anything to anybody? Particularly as she doesn't accept that anything is wrong. To her her behaviour was simply someone having fun and enjoying life. Suddenly your life is dealing with your loved one's total lack of inhibition, new people being introduced into her life and prolonged daily absences from home. One day you are told “she needs help”.

Where do I go? Who do I see? What is wrong? Is it curable? Will my loved one accept treatment?

The path that eventually is followed is no doubt different for everybody. For us it was disjointed and traumatic. What were some of the aspects encountered? I give no detail to the following incidents I merely outline some of them:

First, the emotional impact of having to take your wife to hospital and leave her there knowing that she didn't want to be there. Her look and words to me are etched in my heart forever.

Second, the many experiences of encountering the variety of behaviours associated with mental illness – all new to those not familiar with them. The on-going struggle associated with hospitalisation, adjustments to medication, court orders, treatment and just trying to understand the illness. Over the next years living the roller coaster of watching your wife fight the illness driven by her absolute desire to beat it; watching a beautiful, intelligent woman deteriorate to an introverted hermit who couldn't get out of bed.

My personal pain is perpetuated by the lack of education by the experts and professionals in the system. However, rarely did I doubt their motivation to help.

The odd occasion of complaint arose from lack of capacity and resources, the second a cavalier approach. Overall the staff who were responsible for treatment and the provision of services were empathetic and supportive. But the entire experience was made more traumatic because of a lack of education about the illness. Was the internet available and accessed? Yes. Were the many publications and books accessed? Yes. Did anyone at any stage say sit there and I will tell you, as a carer, how you should be handling this? No. Could I talk to doctors about it – not always because of the absurd principle of doctor:patient confidentiality. How could they prescribe treatment when they were not made aware of all the issues??

To go away for a couple of hours and come home to find out that it was all over is hell. Nothing prepares you for this. No time to say how much her love and presence meant to me, no time to talk through how wonderful life is and can continue to be, no time to talk out issues and re-assure her that her condition is manageable, no time to take action to avoid this outcome, no time to surround her with those who loved her. All over. Forever. Finished. Never to see her again. Never to hold her again. Never to enjoy her company again. Never to share experiences again. An emptiness in your very existence that will never be filled again.

Do I make a plea? Yes, and it surrounds the point about education. I understand that there will never be sufficient resources available to meet all the medical demands made of the system. I could write in detail about the experiences my family and my wife endured. I am sure that there are many others who have had, and continue to have, worse experiences. However, three aspects need to be improved.

First, educate the family in face-to-face situations so that the most often asked questions are dealt with and then case specific questions can be handled. Second, examine the adequacy and accessibility of the facilities that are available to those who are struggling with the care of people struggling with the potential of suicide. Third, and most importantly, ensure some contact and support becomes mandatory for those who are left behind. How can they handle the situations that will arise, how can they learn to move on, can they get answers to the many questions that arise every minute of the day? This is where help is needed.

It is traumatic enough having to handle the immediate scene and incident and then there is the associated investigation from police. But it doesn't end there -there is the Coroner's Report, funeral arrangements, pursuit of documents, finalisation of a range of personal matters, family and friends to advise then the inevitable loneliness and hollowness in life that wasn't there while your partner lived. Even though she was ill her presence was enough – now it is over.

For years you will encounter people who know and ask after you; others who don't know about events and innocently ask after the deceased. The response is different each time but remains painful. Help and education was needed about the illness and how best to manage it; help, education and support was needed to manage the totally unexpected outcome. We can do better.