

## Not So Fast—Maybe You Don't Need to Change

Suicidal people sometimes express resentment—even outrage—that anyone would presume to advise them not to commit suicide. "Whose life is it anyway?" they ask. "Who are you to tell me that life is worth living when you haven't walked a mile in my shoes?" Well-intentioned family members or therapists often plead with the suicidal individual or demand that he or she not commit suicide, sometimes even resorting to guilt trips or pressure tactics. Frequently, the effect is only to increase the suicidal person's determination to defy those who would try to control him or her.

If we have learned nothing else from our more than 30 combined years of clinical experience, it's that it is silly to assume that people want or need to change. More often in our early years than we like to admit, we worked furiously (and sincerely) trying to "fix" patients, when those very patients sometimes were less committed to change than we were. Why is this important? Simply because the process of psychological change requires belief on the part of the individual that change is worth its cost in terms of the time and effort it requires.

In this respect, emotional healing is very different from many kinds of physical healing. When we have bronchitis or a toothache, we simply go to our physician or dentist and let him or her do to us whatever is needed, such as prescribing pills or filling a cavity. Psychological and behavioral change, on the other hand, require commitment and motivation rooted in a strong belief that change is needed and will be beneficial. This is why it is sometimes said (although it's not quite true) that an alcoholic must "hit bottom" before a therapist can be of much help.

We make no assumption that you need to change. It is our philosophical belief that, while it is our job to help you meet your goals to improve your life, it's none of our business to tell you that you should change. Whereas we strongly believe that you will be better off without suicidal thoughts and behaviors, we understand from a practical standpoint that you will only use what we have to offer if you clearly see and believe that working to eliminate your suicidality will be worth the time and trouble.

We therefore propose to approach this, not by attempting to coax or cajole you, but by guiding you through a process similar to one you would follow to make any important decision. Do you remember how you made the best decisions in your life, whether regarding marriage, job, education, or home purchase? In all likelihood, part of your decision-making process was to compare the advantages and disadvantages—pros and cons—of your various options. So let us now consider the respective advantages and disadvantages of attempting or committing suicide.

### Advantages of Suicide—Are You Kidding?

Many of our patients are surprised—even shocked—that we are willing to seriously discuss with them reasons *in favor* of their committing suicide. This is understandable, since people who care about them generally have given them nothing but reasons *not* to commit suicide. This is fine, except that failure even to consider the “advantages” of suicide can prevent the decision-making process from ever being completed. Compare this to the reluctant bride who never considers the relative merits of getting married versus staying single. She might go ahead and get married but continue to have lingering doubts about being happier if she had stayed single. On the other hand, seriously considering the advantages of staying single allows her to evaluate those advantages in a realistic light.

When you do this, you often find that many advantages have at least one “catch.” For example, one advantage to being single is being able to date different people. The catch? How about wondering whom to ask out this weekend (and every following weekend); or enduring lousy blind dates; or dealing with questions from relatives about when you’re going to “settle down”; or worry about contracting AIDS. Suddenly, all of that freedom begins to look a little different. (Of course, this particular decision cannot be made satisfactorily without considering the advantages and catches to being married as well.)

Similarly, suicidal people sometimes opt to stay alive “for now” but continue to have the lingering idea that perhaps suicide might be the preferable alternative in the long run. This is often because they haven’t fully considered the pros and cons. In other words, if you don’t take a look at the *plusses* of suicide, you’ll never be able to see the “disadvantages to the advantages.” Now that you know our agenda, let’s forge ahead.

### Exercise 3: Exploring the “Advantages” of Suicide

Begin by listing on a sheet of paper all of the advantages of killing yourself that you can think of (hold off for now on any reasons for only attempting or threatening suicide—we’ll get to those later). Next, take a look at Table 4-1; it contains a list of often-heard advantages to committing suicide. If you find your plusses in this list, you can discard your own list and just use the table; if any of your own plusses are missing from Table 4-1, add them to the left side in the space provided.

Now shift your attention to the right half of the table and study the catch to each of the supposed advantages of suicide. In the interest of brevity, we have given only one catch per advantage, but you might find that you begin to come up with catches of your own. Add those to the table as well. Finally, move down to any advantages that you added to the left side of Table 4-1 and see what catches come to mind. If none do, we recommend that you consult with a friend or therapist about this, because you’re probably overlooking something. For even though we have tried, we have not yet been able to come up with a single advantage to suicide that did not have at least one major catch!

This exercise is meant to show you that the complications of suicide are greater than they appear at first glance. However, you might feel that it misses the mark for you if your suicidality has been such that you were “suicidal” but didn’t really want to die (you may have noticed that this fits the pattern of the Communication/Control individual described in Chapter 2). If so, you may feel pressured by others to give up your occasional bouts of suicidal thinking and self-harming behavior but not feel motivated to change. This is the case for many patients, who sometimes get into power struggles with their therapists. Correspondingly, therapists, because they care for their patients and want greatly for them to give up repeated—and often frightening—episodes of suicidal threats and suicide attempts—sometimes inadvertently play into such power struggles.

Again, although we might wish it, we do not expect you to give up something from which you believe you reap a net benefit. Our patients with anger problems are in much the same boat. If they don’t get in touch with the *advantages* of their angry behavior (such as often getting their way because they scare people), they are not likely to get in touch with the *disadvantages* that will motivate them to change (such as the fact that people who fear them seldom like them). So let’s do essentially the same exercise as before, this time considering the plusses and catches to suicidal thinking and non-fatal self-harming behavior. Remember, this second exercise focuses on the advantages of being suicidal—that is, thinking or talking about killing yourself or actually hurting yourself in suicide attempts—not on actually killing yourself. You can use Table 4-2 for this exercise or make up your own list on a separate sheet of paper.

**Table 4-1: The "Plusses" of Suicide**

The Plus	The Catch
I'll no longer be a burden to others.	How do I know that my death won't make their burden greater?
I'm a failure. At least I'll go out with one success: my death.	By dying I give up all past and possible future successes.
At least I won't hurt anymore.	I'll never feel good anymore, either.
When I'm dead, they'll be sorry for how they treated me.	I won't be around to enjoy my revenge.
This is the one way I can feel in control.	Being dead is the ultimate loss of control.
By killing myself, I will atone for my many sins.	The "punishment" will have no effect on my future behavior, because I'll be dead.
At last, he/she will see how much I loved him/her and will love me in return.	I won't know about this, because I'll be dead.
I'll be happier in the hereafter.	I run the risk that my concept of the hereafter is totally mistaken.
<b>Other Plusses:</b>	<b>Other Catches:</b>
_____	_____
_____	_____
_____	_____
_____	_____

Were you able to add to the list of plusses of being suicidal and to identify at least one catch for each? Once again, if you are still convinced that any of the purported benefits of suicidal thinking and acts of self-harm are without major disadvantages, we urge you to discuss this with a therapist or wise friend. To adapt an old saying, "Ten thousand scientists can't be wrong." It's highly unlikely that so many researchers and therapists would be dedicated to eliminating suicidality if the supposed advantages would be real. If you have listed a plus that you think is without a catch, you've probably overlooked something.

**Table 4-2: The Plusses of "Being Suicidal"**

The Plus	The Catch
This will get them to take me seriously.	What happens when the crisis has passed?
It will get him/her to change his/her ways.	He/she will feel resentful about being coerced; such changes seldom last, anyway.
I want to keep this option, because it's comforting to know that I can always end it if things get too bad to bear.	Keeping suicide "alive" as an option blocks me from fully considering other, possibly more beneficial, options.
This is a powerful way to get even with the people who hurt me.	Retribution usually results in a vicious cycle of hurt and reprisals.
Speaking and acting in suicidal ways is an effective way to get help.	This type of communication often leads to misunderstandings and can result in accidental suicide.
This will finally get across to them how much I really hurt.	This type of communication often leads to misunderstandings and can result in accidental suicide.
<b>Other plusses:</b>	<b>Other catches:</b>
_____	_____
_____	_____
_____	_____
_____	_____

**Disadvantages of Suicide—More than Meets the Eye**

Effective decision making involves considering both the pros and cons of a decision. Who knows, perhaps the advantages to suicide, however limited, outweigh the disadvantages. So let us now turn to the disadvantages of suicide. In other words, why all the fuss about preventing suicide?

### The Illogic of Suicide: Underestimating the Costs

In the early days of the TV program *Saturday Night Live*, Chevy Chase used a running joke in his role as "Weekend Update" news anchor, stating each week, in a "news flash," that Generalissimo Francisco Franco was still dead. Chase sometimes would go on to say that the Generalissimo's condition "remained stable." One of the things that made this routine morbidly funny was the amazing idea that Franco might become something *other* than dead with each passing week. We all know intellectually that death is final and eternal, and any implication to the contrary is the stuff of fairy tales, horror movies, or dark comedy sketches.

Nevertheless, the sheer awesomeness and incomprehensibility of "forever" prevents us sometimes from fully grasping *just how long death lasts*. Consequently, suicide can look pretty good to a person who is in extreme physical or psychological pain and who, understandably, wishes to obtain relief from his or her suffering. Sadly, this viewpoint puts the suffering individual in danger of pursuing a permanent "solution" to what actually could be a temporary problem.

The problems in living that a suicidal person faces can seem unceasing and interminable. Indeed, to a person in great pain, every minute can feel like an hour, and a day may seem unending. Under these conditions, she or he might turn to suicide as a seemingly reasonable way of escaping from what feels like an eternity of suffering. However, someone in this predicament is likely to be missing some vitally important information that can only be acquired by addressing the following questions:

- Assuming I kill myself, what would have happened for the rest of my natural life had I let myself live?
- How many things—and how many people—will I miss out on if I leave life early?
- How will my suicide affect those I leave behind?
- What exactly will happen to me after I die?
- Will I get another chance at life, or am I about to forfeit my only shot?
- What if I'm wrong in assuming that things will never get better? What will I have done if I kill myself based on a hunch that turned out to be wrong?
- If I kill myself, what kind of legacy will I leave behind? Will I always be remembered as the person who committed suicide and left my loved ones behind? Is this the mark I want to leave on the world?

These are profound questions that can only be answered somewhat speculatively. Still, we wonder how many people who killed themselves actually stopped to consider such questions. When we have asked some of our suicidal patients to ponder these matters, we have heard such answers as, "I don't care anymore," "The answers don't matter," "I don't want to think about it," or "I don't have the energy or the patience for this." We can summarize our responses to such reactions as follows:

- If you don't care one way or the other, is there any harm or anything to lose in seriously mulling over these issues before taking drastic action?
- If the answers don't matter to you, could you address them nonetheless on the outside chance that the answers you find may matter a great deal to someone else in your life?
- If you don't want to think about it, this is a sign that you are not entirely at peace with your decision to die by your own hand. Do you fear the answers you might come up with, and if so, are you choosing to avoid what you fear? If you're fearful of anything, you haven't truly come to terms with your choice, and you owe it to yourself to work through the issues much more thoroughly, perhaps with the guidance of a trusted other person.
- If you believe that you have neither the energy nor the patience to deal with such questions, consider how little energy you'll have when you're dead and how much patience you'll need to get through eternity if you wrongly choose to die at this time. In comparison, attaining the energy and patience you'll need to sit down and pore over these questions is a piece of cake.

For purposes of illustration, consider the question, "How many things—and how many people—will I miss out on if I decide to leave life early?" If you address this query on a year-by-year basis, you will most likely find that even a summary of what you might miss out on will be an eye-opener.

Over a decade ago, I (CN) posed this question as a therapy assignment to an adolescent client who took a romanticized view of death and professed a wish to kill himself. I asked the client, whom we'll call "Myles," to spell out three or four plausible things that might happen in each of the 60 years following his death and to follow each item with some variant of the statement, "But it won't affect me, because I'll still be dead." I asked Myles to start this assignment in my office, and he spent about 15 minutes generating the following items:

- 1986: The Yankees win the pennant and Don Mattingly hits 45 home runs. My brother becomes a Bar Mitzvah and my folks throw a big party. My best friend Pat starts a band. But I don't get to see any of this because I'm dead.

1987: I would have been accepted to Columbia and NYU. The Yankees win their second straight pennant. My family goes to visit my aunt and uncle and cousins in Israel. But I don't get to see any of this because I'm still dead.

1988: I would have been a freshman at Columbia. My brother gets interested in a girl but doesn't have a clue and doesn't know who to ask for advice. My friends all drive down to Daytona Beach for spring break. But I don't get to see any of this because I'm still dead.

1989: I would have gotten a great part-time job at NBC studios. I would have met the girl of my dreams at Columbia, but instead she meets someone else. My brother is applying to colleges, and he doesn't have a clue. And none of this has anything to do with me because I'm long gone and getting longer gone every year.

At this point, Myles stopped and said he was tired of it. I reminded him that he had about 56 years of summarizing yet to go. Myles reiterated that he was "bored" with the task. I noted that he had gotten bored in 15 minutes, and wondered aloud how bored he would be for the "15 trillion years or so" that he'd be dead if he were to kill himself. Then I proceeded to expound on the year-by-year list, making up more items about the Yankees, Myles's clueless brother, neat things his friends were doing with their lives, places he would have gone, career possibilities he would have had, and so on, through the 1990s.

Myles began to look exasperated and exclaimed, "Enough already. I get your point!" I retorted, "I don't think you do," and proceeded to do my best fake-it-as-you-go foray into the things that Myles would miss out on in the early twenty-first century. I finally ran out of steam (and ideas) and said:

"Myles, we didn't even get through half of the 60 years, and look at how much you've already missed out on. Yet you seem willing to sacrifice 60 actual years in order to get to a place where you might have trillions of years to kill. Are you beginning to get a sense of the finality of death now? What do you think about this? Do you want to forfeit all of these possible experiences and others to boot?"

### *The Illogic of Suicide: Underestimating Effects on Others*

Now let's turn to the question, "How will my suicide affect those I leave behind?" As you might expect, desperate people who are in pain and thinking of suicide are not in a good position to focus rationally on the feelings of other people. This is not because suicidal people are selfish, but because a suicidal person's emotional pain is so great that there is (at least temporarily) little capacity to consider the feelings of others. It is precisely

because of this that anyone who is contemplating suicide needs to sit down and carefully examine the profound impact that his or her death would have on others.

You might at first think that this exercise is irrelevant, because you are convinced that no one would miss you if you were gone. This is probably a reflection of depression, which is often characterized by a gross undervaluing of the self. If you think you're not worth anything and don't care about yourself, it stands to reason that you would not expect your friends and relatives to care, either.

Experience has shown us otherwise. In practically all of the cases in which suicidal people maintained this belief, they were, tragically, dead wrong. Others did care about them, but for some reason it didn't register, or it didn't seem believable. As a result, the person who commits suicide loses the chance once and for all of making the most of these relationships. Further, friends and relatives often are left with tremendous guilt, grief, and a void in their lives.

Again, you might think, "This doesn't apply to me. Nobody loves me. Nobody cares." You might even think that others will be better off if you commit suicide. Some people are willing to die for this belief, accepting it as truth, without question. But in the face of such self-destructive extremism, let us ask even more questions:

- How do you know that others will be better off if you're dead?
- How can you predict the long-term consequences?
- Who has actually told you that they would prefer that you weren't around? In contrast, who has told you that they didn't want you to die and that, in fact, they were worried sick about you?
- Would they really be better off if you were dead, or would they be better off if you were feeling more hopeful and alive again?
- If you have concealed your suicidal thoughts from the important people in your life, why is this? Are you concerned that they would try to stop you from committing suicide? If so, why do you think they would want to stop you? Is this consistent with the notion that they would be better off without you?
- If you think that it will take your committing suicide before people wake up and realize just how much they care, who will benefit from such a scenario? Is there a better way to test and improve the strength of your most important relationships without putting your life on the line?

Sometimes suicidal people are able to acknowledge that other people do care about them and would be hurt by their suicide. However, the suicidal person believes, "They'll get over it." We can state definitively from our

work with clients who have lost significant others to suicide that people may learn to live with the reality of a loved one having committed suicide, but they do not simply "get over it." It is not uncommon for us to see people in therapy still grappling with the suicide of a loved one many years after the fact.

Make no mistake about it, you are trivializing the feelings of others and monumentally underestimating your importance in their lives whenever you think that others would not suffer as a result of your suicide. If you are thinking, "But they are suffering with me now. I want to relieve them of their suffering by killing myself," again, ask yourself the question posed earlier: Are they better off with you dead or better off with you alive and more hopeful?

Suicide is not the reasonable solution it sometimes seems to be. *Recovery from depression* is the solution. This may currently seem impossible to you, but it is not. It might take time, effort, new learning, therapy, and perhaps some form of medication, but it can be done. Take the time to ask the important people in your life whether they'd prefer that you take this hopeful route or the hopeless route of self-inflicted death. Just as importantly, ask yourself.

### "Now I'm Really Trapped: Suicide Was My Only Way Out, and You've Taken That Away."

What thoughts and feelings do you notice yourself having, now that you are nearing the end of this chapter? We hope you are feeling energized by a revised perspective on suicide, one that points away from preoccupation with your own demise and toward new options for yourself. However, because of negative, depressive thinking, you might find yourself feeling as pessimistic as ever. Because the option of suicide can carry with it a sense of security (however false), you might notice feelings of anxiety, sadness, or even anger, as reflected in the heading of this section. The thinking goes something like this: "I've been miserable for what seems like forever; and although I do have mixed feelings about suicide (why else would I be reading this book?), suicide is the only escape in sight from this utter misery that has been my life. Take away my suicide option, and all I have to look forward to is more misery for the rest of my natural life. No, thanks!"

To this we would respond in two ways. First, just as suicide and suicidality have certain advantages and disadvantages, so also does the *absence* of suicide and suicidal behavior. We hope that the advantages to letting yourself live are obvious: seeing your children grow up, reaching career goals, enjoying changes of the seasons, reaping the rewards of retirement, and so on. However, if these are not obvious to you, we urge you to take time now to list your own *advantages to living*, much as you did with the

A classic example of what can happen when people lose sight of their value to those around them was portrayed by James Stewart in the role of George Bailey in the timeless film *It's a Wonderful Life*. Driven to despair by apparent bankruptcy, frightened by the prospect of going to jail, and condemning himself for the harm that he thought he had caused his family and his clients, George was on the verge of throwing himself off a bridge into an icy river to his death.

As the story goes, George was given a second chance by Clarence, his guardian angel. However, Clarence was smart enough to know that he could not simply cajole George into believing that he was important to many people and that life was worth living. Clarence had to show George firsthand by taking him on a nightmarish journey through time, in which George saw for himself the devastating consequences that would have befallen so many people, loved ones and strangers alike, had he never been born. By the time this fantasy trip had ended, George understood in a way he had never seen before how precious and meaningful his life and his relationships were. The problems that had led him to the brink of suicide no longer mattered as much. George had once again become connected with life.

Through a fictional story, *It's a Wonderful Life* teaches us that we make a grievous error by assuming that our lives do not matter. It reminds us that many people will suffer because of our absence and that our contributions to the lives of others often are difficult to detect and therefore are incalculable.

option of suicide earlier in this chapter. As before, if you have trouble, ask someone to help you add to your list. We also encourage you to refer back to the discussion of reasons for living in the previous chapter.

What about *disadvantages* of giving up the suicide option? There aren't many that we know of, but one is that you might continue to experience periods of emotional distress for a while longer while you are working on your recovery. Here, it is essential to remember that "a while longer" does not equal forever! Such "forever" thinking is indicative of distorted thinking, which brings us to our second point.

We have not yet discussed how to recognize and change errors in thinking that lead to emotional distress (that will be covered in Chapter 7), but go back right now to the end of the first paragraph in this section and see if you can find a cognitive error. What's missing from that line of thinking? If you look closely, you will find a critical *mistaken assumption*, namely, that nothing will ever change. Right now, because of your history, you might believe that this is a correct assumption—why should you expect things to change when life has been bad for so long? The answer is so obvious that

you might have overlooked it: *You are about to embark on a systematic, tested strategy of self-change and life improvement.* That's why you have good reason to dispute your assumption that things will never change. And that's why you needn't fear setting aside the option of suicide. The aim is not to give up your only route of escape from misery, but to pursue another road away from misery that will not require you to give up your life in the process.

Let's be blunt about something: We know that you know that giving up the option of suicide is reversible—you will always have the option of self-destruction available to you. Indeed, this is part of the human condition. However, if efforts to pursue other options (such as therapy) are to succeed, it is absolutely necessary that for now you *remove suicide from active consideration*. Otherwise, the effort and energy you put into your therapy will be seriously compromised. This is a little bit like an Olympic athlete who is only marginally committed to his or her sport, perhaps seriously considering a career in broadcasting instead. This attitude cannot help but affect training negatively.

Psychotherapy researchers now think about the process of change in terms of "readiness for change." One theorist speaks of three stages: the "Complainant," the "Visitor," and the "Consumer." The Complainant is clearly distressed and unhappy with current circumstances but spends most time and energy telling anyone who will listen how bad things are. The Complainant shows little interest in changing things, especially if this requires effort or discomfort on his or her part. The Visitor is interested enough in change to attend a few sessions of therapy, perhaps with a spouse or family member, to "test the waters." An individual at this stage of change is likely to take a passive orientation to change, sometimes hoping that other people will change instead.

The Consumer, on the other hand, has made the decision to make things better. He or she has taken responsibility, much like the ideal athlete or heart patient, to do what it takes to achieve his or her goals. The Consumer is fully prepared to "pay the price" of time and energy to reach these goals and is convinced the benefits will far outweigh the costs.

Which stage rings most true for you? If you're not fully into the Consumer stage at this point, that's okay. The transition from Complainant to Consumer doesn't take place overnight. But it doesn't take place automatically, either. Part of becoming a Consumer is actively working at becoming one. One thing you can do is ask yourself regularly at what level of effort you are currently working and strive to move more toward the Consumer mentality. Something else you can do is to make a *therapy contract with yourself*.

### A Therapy Contract with Yourself

Many therapists today use treatment contracts, whether toward goals of losing weight, quitting smoking, or eliminating depression. Such contracts

help reduce misunderstandings between the therapist and client by specifying what the goals are and what each person agrees to do in pursuit of those goals. Contracts also help increase commitment to an endeavor, be it a business enterprise or a marriage. Before moving on to the next chapter, we encourage you to study and sign the Therapy Contract with Myself, which appears on the next page.

Some of the items in the contract may feel uncomfortable to you, but we encourage you to give them serious consideration. For example, many suicidal patients have been surprised to learn, when asked, that although they thought they wanted to die, all they really wanted was to end their suffering. When asked whether they would still want to die if the suffering were removed, practically all have emphatically replied, "no."

Making a written commitment, even if only to yourself, might be a difficult step for you. As you contemplate the task, we encourage you to consider this question: What do you have to lose? What you stand to lose when following the alternative option (suicidality) is nothing less than your life. The only thing that you stand to lose in the Therapy Contract is time and effort, and you stand to gain much, much more. Doesn't this seem a reasonable risk to take?

### A Therapy Contract with Myself

*As part of my commitment to myself and my happiness, I endorse the following:*

- I proclaim that my goal is not to die, but to take care of my pain. \_\_\_\_\_ (Initial)
- To state it positively: I proclaim that my goal is to live a long, pleasurable life, with less unhappiness than I now experience. \_\_\_\_\_ (Initial)
- I realize that the tendency to become suicidal when depressed or upset prevents me from achieving this goal, whereas overcoming my suicidality will help me reach it. I therefore promise myself to work on learning better ways than suicidality to manage my emotional distress. \_\_\_\_\_ (Initial)
- I hereby declare that I am worth the time and effort it will take to achieve these goals (or: I commit to work on believing that I am "worth it"). \_\_\_\_\_ (Initial)
- Because my recovery will take time, I commit in the meantime to resist any urges to injure or kill myself. \_\_\_\_\_ (Initial)
- If at any time I should feel unable to resist impulses to hurt or kill myself, I promise to follow steps outlined in Chapter 5, "Step One: Survive the Crisis." \_\_\_\_\_ (Initial)

*I promise myself to abide by the terms of this contract and agree that I will not break the contract until and unless I have discussed this with a therapist or other trusted person who is acting in my best interest.*

\_\_\_\_\_  
Your Signature/Date



## Step One: Survive the Crisis

Suicide is forever. *Feeling* suicidal generally is temporary or intermittent. It is a terrible feeling, as you know, to experience this kind of emptiness and pain. However, this experience tends to fluctuate, even though it may seem to last forever when you are in its depths. The sense that there is no way out—short of killing yourself—is an illusion, a cruel hoax. There is, in fact, a very simple way out. It is the passage of time.

We are not suggesting that the only thing you can do is sit around, wait, and hope against hope that you will start to feel better sometime soon. Rather, you must participate actively in the passage of time. In other words, there are steps you can take to ride out the times when you feel at your lowest points. By taking such steps, you may prevent yourself from doing the one thing (suicide) that no amount of time can ever undo.

In this chapter, we will introduce you to three main strategies that you can use to get through a suicidal crisis. Such strategies will enable you to "make it to the other side," without hurting yourself. We must emphasize that these techniques are only a starting point in your attempts to help yourself to reinvest in your life. They will not solve your problems (we hope to help you to do that in later chapters). Instead, they will assist you in resisting irreversible impulses during your most vulnerable times. They will help you to reach another day, when you will be more willing and able to fight to restore meaning and purpose to your life and diminish your pain.

### Delaying Impulses

In a nutshell, this is what delaying impulses is all about: You want to become the all-time champion procrastinator of suicide. Yes, you may plan to commit suicide, but you'll just keep putting it off. Other activities, obliga-

tions, and unexpected obstacles will keep getting in the way. Suicide may sound like an attractive option in theory, but in practice it will be too involved, require too much planning and preparation, and will be a huge bother just getting started. So you will put it off, convinced that you'll "get around to it" someday. Any deadlines you may have set (and we apologize for the morbidly poor choice of words here) will pass, and you will still be alive. You will have succeeded in procrastinating once again. Excellent. Let life keep getting in the way of your plans to die.

### *Delaying Impulses at the Moment of Crisis*

The first step in "procrastinating" your attempt at suicide is to delay acting on the desire to harm yourself at the peak of your feelings of despair. Sometimes this may last only one night, or even one hour, though it may seem like an eternity. This is the time you are most apt to harm yourself, but it is also the time you are least able to make a fair-minded decision about what should happen to you. If life has not been fair to you, you owe it to yourself to be fair to yourself and wait until your emotions subside so you can think more clearly. If you believe that suicide itself is a "fair" option, perhaps because you feel you deserve no better, then at least wait until some time has passed so that you can weigh your choices more carefully. Feelings of "deservingness" are very subjective and can easily be distorted by depressed moods. You must give yourself every benefit of the doubt, because suicide can't be undone.

What are some things you can do to ride out the immediate impulse to hurt yourself? The answers are both very simple and very difficult. They are simple because the tasks themselves are fairly ordinary. On the other hand, it takes courage, self-control, and the ability to endure pain to carry them out. Therefore, any efforts on your part to enact these strategies are worthy of admiration.

One such strategy is to get some healthy sleep. Death has been called "The Big Sleep." We suggest you try "the little sleep" first. If you are in need of a temporary escape from pain, sleep is an excellent option. This is particularly true when life has you feeling worn down or when you feel at the end of your rope. Sleep is restorative and can help diminish your pain, buying you some time to think things through more carefully. If you cannot sleep, for whatever reason, do not force the issue. Instead, try another strategy.

Talk to somebody. Regardless of the time of day or night, talk to someone whom you admire and trust. Choose people who have shown their caring in the past. Pick up the phone and make the call. Pay them a visit if they live nearby. Contact them via your home computer, if that is what works for you, but do not suffer alone.

If you are worried about bothering the other person, perhaps because it is late at night, there are other options. First, if you have a therapist, call

him or her. A therapist will want to know if you are feeling suicidal. If you do not have a therapist, or if you cannot reach him or her, there are people you can call who are trained to deal with suicidality. Your local Suicide Prevention hotline is a good place to start. They are in the phone book, so keep the number handy.

If you have already taken action against yourself, such as ingesting pills or cutting yourself, you must get to the nearest hospital emergency room as soon as possible. Do not rely on yourself to get there. Call the operator, the police, 911, an ambulance—whomever you can call in an emergency situation—and tell them where you are. Tell them exactly what you have done and how long ago you did it. We hope that you will never have to do this. We hope that you will never actually make a suicide attempt. However, if you do, getting emergency treatment at a hospital will buy you precious time.

### *Exercise 4: Long-Term Strategies for Delaying Suicidal Impulses*

Even when you are not at your lowest point, you may still find yourself making general plans to commit suicide. At such times, we suggest that you do Exercise 4. In this task, reflect on the things you have been meaning to do in (and with) your life that you have either not gotten around to or not completed—in essence, a procrastination list. Generate as many items as possible. Do not list "suicide" as a response until you have exhausted all other possibilities.

This is not to make you feel even worse by focusing on all the things you haven't done. Rather, the purpose is to show you just how much unfinished business you have in your life. All of us, fallible human beings that we are, fail at times to follow through with our plans and best intentions. Procrastination is nothing to be ashamed about, because we all do it.

Next, ponder (and write down) the reasons that each of the items on the procrastination list (up to, but not including, suicide) has been important to you. Of course they are important, otherwise you never would have intended to do them in the first place. Similarly, you never would have chastised yourself for putting them off if they were not important in some way.

Now that you have graphically reminded yourself of the many things that you wish you had done but never got around to; choose one to begin now. For example, if there is a book you always meant to read but never purchased, go out and buy it today. Start reading. Then consider what your next goal will be. If there is a trip you always wanted to take, but never followed through, start planning it today. Call a travel agent, or get information from your auto club. Set up your life so that you simply must delay your plans for suicide, because you have something else more immediate and pressing to do first. As the late, great George Burns once said, "I can't afford to die—I'm booked."

**Exercise 4: Unfinished Business in My Life**

Things I Have Been Meaning to Do or Complete

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.

Why It Is Important for Me to Live to Do These Things

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.

Unfinished Business I Will Attend to Now

- 1.
- 2.
- 3.

Each time you enact one of your ideas, think of another to take its place, just in case there are future suicidal crises with which to contend. Keep focusing on the idea that having unfinished business in life is good, because it gives you purpose and goals to pursue. Let suicide be the final frontier for procrastination. All other tasks on which you have procrastinated in your life must be attended to first.

You might ask, "What if I exhaust my list and reach the 'suicide' item? Should I then commit suicide?" The answer is no, for the following reasons: If you do this exercise fully and in the proper spirit, your participation in all of these activities and goals will bond you more strongly to life. You will have a greater sense of purpose, meaning, and enthusiasm. You will have begun the all-important process of reinvesting in your life and in your future. You will be less likely to want to die. Also remember that this is only one of many possible strategies to help you get through rough periods and strengthen your connection to life. Your life must not hinge on the effectiveness of this or any other single strategy. Everyone is different; and if one approach doesn't help, something else probably will. Here and throughout this book, persistence will be your most important ally.

If you feel that this exercise asks too much of you or takes too long, it is okay to take it one step at a time. Just start with the procrastination list. Or do one of the suggested activities on the list. The purpose is simply to put off suicide in favor of "other projects" that you might otherwise have left unfinished. Remember, if you decide against suicide, and if you take good care of yourself, you have the rest of your life to do the things that you have always wanted to do. Let the rest of your life be expansive and filled with possibilities, not shortened by suicide.

**More Delaying Tactics**

Another way to help yourself survive a suicidal crisis is simply to make it very difficult to kill yourself. To start, safeguard your environment. If you own a gun, sell it or turn it over to someone outside your household. If you possess substantial quantities of medication, consult with your doctor about maintaining the necessary medications and their dosages, and discard the rest. If you have alcohol or other psychoactive drugs lying around the house, get rid of them. Suicide is too easy when guns, pills, and alcohol are readily available. Make your environment unfriendly to suicide. This will buy you some valuable time to get through the low periods unharmed.

The next strategy for resisting the impulse to kill yourself is especially applicable when you are convinced that something terrible is going to happen soon, and by committing suicide you will be able to avoid it. If you feel the urge to kill yourself because you foresee terrible things—divorce, bankruptcy, legal troubles, public humiliation, or serious illness—simply refuse to lie down and die. You could be incorrect in your assumption that these awful things will happen or that you will be forever devastated by them. If

you can keep yourself alive a little while longer, and then a little while longer still, you might come to find that your worst fears were unfounded. The urge to die will subside. You will discover that it would have been an utter waste to have killed yourself, because you would not have spared yourself anything you couldn't handle.

In essence, your mission is to refuse to be the one who seals your own fate. Play it out as long as you can, and see for yourself if your fears come to pass. If you fear that circumstance and bad luck will prevail, see how long you can forestall these foes. Don't give assistance to the Fates. Defy them as long as you can.

This principle is illustrated in the final act of Shakespeare's *Romeo and Juliet*. Upon finding what he thinks is the lifeless body of his beloved Juliet, Romeo hastily kills himself, believing that all is lost and all he has to live for is gone. Moments later, Juliet awakens from her potion-induced "death." We learn that if Romeo had been able to delay his impulse to destroy himself, he would have been reunited with his love. Instead, both Romeo and Juliet end up victims of impulsive suicide.

This is fiction, of course, but it shows the tragic consequences of a life taken before crucial assumptions are tested. We urge you to adopt the following important rule for your life: *Never make a major, life-altering decision when you are at an emotional extreme.* We cannot emphasize the importance of this principle enough. Many people have damaged or lost their lives because they let negative emotions make their most important decisions for them. A time of emotional turmoil is the absolute worst time to take life-altering action.

You owe it to yourself to do whatever you can to ride out the impulse to kill yourself, at least until you can think and discuss the matter with calmness and serenity. Even then, it is vital that you do all that you can to help yourself, solve your problems, and consult with other people. This brings us to our next strategy for surviving the crisis: involving other people.

### Making Use of Your Social Supports

Suicidal states typically carry with them an almost indescribable sense of aloneness. People caught up in this state generally feel alone with their pain, believing that nobody understands or cares. This is another example of drawing a conclusion with a broken heart, without benefit of objective evidence. People who feel alone in the world almost always overlook people who do care for them and who would try to help if given the opportunity. As therapists, we have heard distraught family members, now in therapy themselves, tell us through their tears, "I would have done something to help him, if he had only told me how he felt." The bottom line is this: If you are on the verge of suicide, you need to remember that there is someone out there who wants to know and who will be eager to help if you allow it.

Perhaps you are concerned about burdening others with your problems. If so, think about the burden those who care about you will feel after you are gone, believing they could have done something to help you. Or perhaps you feel it would be humiliating to tell others that you are feeling suicidal. If this is the case, ask yourself why you feel this way. Is it because you fear they will not understand? Give them a chance. If someone you choose to tell doesn't "get it," try someone else. You may be surprised to find someone who was once suicidal himself or herself and, therefore, very much in tune with what you are going through. So many people have felt suicidal at one time or another that this coincidence is very much a possibility, if you only allow yourself to speak to someone about your despair.

If you worry that by sharing your suicidal feelings you will become stigmatized and labeled, we suggest the following: (1) choose someone who seems to be an open-minded thinker; someone in your life who is fair and trustworthy, whether he or she is a friend, relative, colleague, mentor, or therapist; (2) keep in mind that most people respond to suicidality with concern, not criticism, and that most people are not like the stereotypical bystander who urges the person on the ledge to jump to his or her death; and (3) consider the "stigma" of being someone who has completed a suicide. While it is true that suicide is not nearly the scandal it was decades ago, it is still a powerful, negative legacy—much more so than if you have thoughts of suicide but never translate them into action.

Another reason that you may hesitate to contact someone when you are contemplating suicide is the thought that "they have heard it all before, and I'm sure they're sick and tired of my problems by now." This is dangerously presumptuous. Just because you dislike and have lost tolerance for yourself does not mean that others share your punitive stance.

On the other hand, your concern for others being "tired of my problems" shows that you have some empathy for their difficult position. It is, after all, quite distressing for people to be in the presence of someone they care for who perhaps soon may die, especially if they feel there is little they can do to change the suicidal person's mind for the better. Our suggestion, therefore, is to use your empathy as a strength in this situation. Tell others how much you appreciate their attempts to listen and to be there for you in your time of desperation. Emphasize that you realize you are causing them some distress and that you do not wish to do this. Let them know that you hope to be able to repay their kindness someday (of course, you have to remain alive in order to do this).

Yet another deterrent to your choosing to talk to someone about your suicidal thoughts may be a sense that you will not be taken seriously, so "what's the point?" The point is this: If one person minimizes how you feel, another person may not. If someone is skeptical (for example, responds by telling you that you can't really be serious, or you wouldn't be talking about it, you would "just do it"), you do not need to make the actual suicide



If you believe that few or no people have been aware of your distress, it is possible that you are not picking up on their signs of caring. Or it is possible that they are aware of your negative state of mind but are respecting your right to privacy until you take the initiative to ask for a sympathetic ear. It is also conceivable that you have been maintaining a public demeanor that looks pleasant and composed, therefore people around you have no clue to your level of need for social support. If any of these explanations sounds plausible, it is time to pay closer attention to the signals you are putting out to others, as well as to the signs of caring others are offering to you. Do not hide or close your eyes. Be yourself, and give others the chance to show their support.

Remember, you may not have to tell anyone you are considering suicide (though we suggest that you consider it). It may be sufficient just to let someone know you have been feeling "down" and that you could really use some moral support, understanding, and maybe some time together. Do not be alone with your pain. It has been said that by relating to other people we can "multiply our joys, and divide our pain." Test this theory in your own life, ideally with more than one person.

The fourth and final step in the exercise is to choose one or two people with stars next to their names and *contact them*, at least to spend some time together, but perhaps for a heart-to-heart chat. You can choose a group of people with whom to spend time, if that will make it less threatening. Ultimately, make use of any and all social support that is available to you, whether it is in your personal life, work life, or your therapy life (for example, 12-step groups or your individual therapist). By connecting with all of the "stars" on your list, you will benefit from a full range of social support. You also will guard against becoming overly dependent on any one person and help others to be part of your "team for life." You will be helping yourself and making it more reasonable for others to help you as well.

### Finding Ways to Nurture Yourself

The first two strategies for getting through periods of suicidal crisis have involved using the passage of time and seeking support from others. The third strategy is finding ways to take care of *yourself*, especially when feeling upset. You might find this easier said than done, especially if you are low on energy and not feeling kindly toward yourself. Nevertheless, the strategy of self-nurturing, or "self-soothing" is too fundamental a skill to neglect. Because you are available to yourself at any time, you are potentially your own most valuable resource. This strategy essentially says, "I will not abandon myself in my time of need." Others might have previously abandoned you at critical times in your life, but you need not check out on yourself as well. You can be there for yourself.

Lets look at some practical ways do this, beginning with some basics of self-care. Depressed people often neglect to sustain themselves in ways that

are necessary for a sense of well-being. This is manifested in problem habits such as not eating well, going to bed at irregular hours, not getting washed or dressed, and rejecting needed medications. These habits are guaranteed to make a depressed person feel even more depressed and lead to more problem behaviors. This is a classic case of the vicious cycle.

For every vicious cycle, there is a positive feedback loop just waiting to get started. If you can start to take a little better care of yourself, even if that means simply going to bed and getting up at reasonable hours or taking a shower and getting nicely dressed, that will begin a positive chain reaction in your life. It's simple, but it works.

In practice, however, this may be difficult for you to do. Depression can make a person lose interest in himself or herself. Do you notice such an apathy about yourself? If so, then you are probably stuck in the vicious cycle. To get out of it, you must be willing to push yourself. You have to be willing to do the small, routine things that are necessary for you to look and feel better. You may think this will do no good, but try it anyway. There is nothing to lose, and you may be surprised.

Another way to self-nurture is to provide yourself with "creature comforts" when feeling upset. Dr. Marsha Linehan (1993) recommends soothing each of the five senses: For vision, you might look at beautiful pictures in a book; for hearing, you can listen to soothing music; for smell, burn a scented candle; for taste, drink herbal tea; and for touch, stroke your pet or cuddle a stuffed animal.

Of course, you cannot expect such activities as these to totally change your life or serve as long-term solutions to your problems. However, they will break the vicious cycle of harmful self-care habits and set a new tone for you to treat yourself better. They will alleviate your distress, at least temporarily, to help you ride out the suicidal crisis or get help.

Finally, don't forget that self-soothing also includes your active use of the antisuicide techniques presented in this book. By helping yourself, you will feel better, more in control, and proud of yourself for having the courage to persist under adverse conditions. Your hard work and newly acquired skills will translate into a sense of satisfaction and well-being. These skills represent the highest level of self-soothing, because they teach you to think, feel, and act as your own therapist.