



Suicide – The Survivor

by

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PREFACE

On December 14, 1980 the course of my life changed. A close friend had taken his life. As a Police Chaplain, I was called to the scene without any knowledge of the identity of the victim. When the family notifications were completed and the memorial service concluded, I was “A SURVIVOR.” Not only was I ministering unto the friends and family who survived, but I was in need of ministry myself.

Ten years have passed since that cold December day, and during that period I have been involved in hundreds of suicides. I have read the notes and watched them die; for them it was over, but for those who survive, it was not over – it was just beginning. We who survive do not just “get over it,” but must work our way “through it.” Our own survival and the survival of those who are around us depend on how we make that journey.

It is my hope that this paper will be of help to those who are SURVIVORS, and to those who have the opportunity to minister to the ones who have SURVIVED.

SUICIDE – THE SURVIVOR

INTRODUCTION

Life is filled with many mysteries. It was not meant for us to understand everything; if we did, we would be as wise as God. But certainly it is times like this when a loved one dies that we are brought closer together. From all walks of life, as family, friends, and loved ones, we turn aside to share our mutual grief. The circumstances that brings us together also brings tender responses to each heart. Each heart is broken by that which seems to have no reason. In Psalm 77:9 the psalmist cries out a question which is unspoken in many of our minds today, “I-las Cod forgotten to be merciful? I-las he in anger withheld his compassion?” When our faith falters under circumstances that we cannot understand, we cry out, “Lord, if you had been here, my brother would not have died.” John 11:32. But our loving and gracious Cod was there then, and is here today, just as he was there when his own son died. We do not fully understand death, yet we are vividly familiar with its damaging power. Even as we are here today, thousands will pass from life to death. As survivors, our hope comes only when we recognize that there are many unexplainable sorrows in life, and trust in a God who is just and merciful. A God who knows and cares about all things. “You do not realize now what I am doing, but later you will understand.” John 13:7.

The above is, in part, the memorial message I gave on December 16, 1980. The facts leading up to this event are as follows:

Sunday, December 14, 1980. I had finished giving the evening lesson at the church where I served as Minister. I was the on-call Chaplain for the Colorado Springs Police Department. As my wife and I were on our way home, the pager was activated. I called the dispatcher and was informed of a possible suicide and given directions. As I proceeded to the scene, many thoughts raced through my mind. This was my first suicide call as a police Chaplain. Who could it be? How did it happen? What brings someone to a point they have a desire to end it all? Was there a family? How will they react?

On and on the questions raced around in my mind. I saw the flashing lights and then several police cars as I pulled up to one of the buildings in a “You Store It” complex. As I got out of my car an officer came over to me and said, “Chaplain, it’s quite a mess. A man shot himself with a rifle.” I stepped into the storage shed as another officer pulled a bloody quilt from the body. My heart seemed to leap up into my throat, and I felt as if someone had kicked me in the stomach. I said, “It looks like –it can’t be –but it, it’s Earl!” Earl was a Deacon in the church where I ministered, and a close friend. I had to get outside to breathe. Waves of shock washed over me. I heard someone say, “Do you know this man?” I looked at the detective and mumbled, “Yes.” He pushed me toward a car, it was Earl’s. He opened the door and I saw the pages, familiar faces looked back at me. The faces of Earl and his family, in a family photo album –faces I knew so well. Again, the questions raced through my mind. “Why, why, why?” As I look back to that

December, I do not know how I managed to notify Earl's father, his wife, and family. Then the memorial service, the most difficult one I have ever conducted, followed by days of counseling, giving support, and trying to fit the pieces of the puzzle together. Ten years have now passed; I still remain a survivor.

I. STATISTICS

Who are the survivors? They come from all walks of life, no one is exempt. Here we will deal with three general groups of people: Religious, Law Enforcement, and for lack of a more definitive term, General Working Class. Questionnaires were distributed to each group. They included questions as to: age, sex, involvement, relationship, thoughts, and reactions. The questionnaires were to be voluntary and anonymous. The results are as follows:

A. Religious

- 74.1% of individuals surveyed had personal knowledge of a suicide.
- 35% had a family member take their own life.
- 31% had friends who took their own life.
- 12.9% had a co—worker who committed suicide.
- 74.3% had thought of taking their own life at one time or another.

B. Law Enforcement

- 40.9% of the officers surveyed had personal knowledge of a suicide, other than in their professional capacity.
- 96.3% of the officers who had over ten months in their agency had been involved in suicide in the line of duty.
- 12.1% had a family member take their own life.
- 17% had friends who took their own life.
- 4.8% had a co-worker who committed suicide.
- 51.8% had thoughts of taking their own life at some time.

C. General Working Class

- 52.6% had personal knowledge of a suicide.
- 20.5% had a family member take their own life.
- 22% had friends who took their own life.
- 16.1% had a co-worker who committed suicide.
- 23% had thoughts of taking their own life at one time.

I have deliberately excluded the “Rich, Famous, and Powerful” as much media attention has been given to these. I have concentrated on those groups of individuals with whom I have worked, and been associated with as a Chaplain and Minister for several years. It is to those who are to survive the tragedy of suicide that I address this work.

II. REACTIONS

What reactions can be expected? Are they normal or abnormal? Are they physical, cognitive, emotional, or behavioral? As survivors, all of these questions pass through our minds, not once or twice, but again and again. Let us take a look at what we can expect as we deal with our loss.

A. Sorrow

Of all reactions, sorrow heads the list. The suffering, sadness, deep pain, and anguish caused by the loss seems to overwhelm us. We search for a meaning, but it is beyond what we can comprehend.

B. Disgust and Anger

Close on the heels of sorrow comes disgust and anger. Disgust for the act and anger toward the individual who committed the act. Anger toward God who would let a loved one do this. Anger at ourselves, for not caring enough to intercede.

C. Uneasiness, Guilt, and Sense of Failure

Next comes the uneasiness; we are disturbed and perhaps we cannot put our finger on just what it is that causes this. And now the guilt; it is my fault, I could have done something to prevent this. I have failed! I did nothing!

D. Denial

Suicide, this cannot be. It must have been an accident or someone else caused the death. There has to be another explanation.

E. Crying

Weeping perhaps is a more descriptive term, for the tears flow and the sobs come. We cry because we need to cry.

F. Short Temper

The tendency to readily lose our calmness and composure. The most insignificant act or word may send us into a rage.

C. Physical

These reactions are many, but the most frequent is headache, tight chest, upset stomach, nausea, and nervousness.

H. Flashbacks and Sleeping

We might see the sight, hear the sound, and yes, even smell and relive the event many times. There can be difficulty in sleeping, accompanied by nightmares, and night sweats.

I. Behavioral

Problems such as excessive drinking and changes in sexual relations are also common.

As a result of the questionnaires and personal interviews, other reactions surfaced to include, but are not limited to: memory problems, poor concentration, panic, fear, withdrawals, fatigue, and so forth.

We should not be surprised at any reaction that might confront us. They may appear immediately, or days later. They may last a short time, or for months. Some individuals have even indicated a longer period of time. Therefore, as a survivor, we must realize that any reaction is a normal reaction. Our personal experience and situation will influence to some degree our reactions – but reaction will come.

III. Interviews and Statements

Many individuals completing the questionnaire, included statements as to their feelings and reactions. In addition, many personal interviews were conducted with survivors. The following quotes are drawn from those and are presented in order that you will realize that you are not alone. Listen to what these mothers, fathers, brothers and sisters, sons, other relatives, and friends, have to share about their experiences. Then know that their reactions are ours.

A. Father: 45-year-old son

“My heart is filled with sorrow in the loss of my beloved son, Earl. He was a jewel to me and I feel a great loss. Though I can find no defenses for his taking his own life, I know he has served God for many years. If God condemns, Earl will be condemned, if God extends mercy, then Earl will receive mercy.

B. Mother: teenage son

“Did he kill himself because of me? Was he mad at us? Didn’t he like us? I think about him every day. I can’t sleep!”

C. Sister: younger teenage brother

“Everything is so unreal, I can’t believe he is gone. Did I do something to make him do this?”

D. Father: teenage son

“God, why did you let this happen? What did I do that was wrong? How did I fail? I prayed, I wept, I couldn’t sleep, I couldn’t even decide what to wear. I kept asking over and over, what IF?”

E. Father: teenage son

“I think about him every day, but sometimes like his birthday, the thoughts are almost overpowering. The hurt never goes away, I relive the memory at all times. If I had done things differently, would it have made a difference?”

F. Mother: teenage son

“I considered suicide myself. What would the rest of the family do without me If I was gone? I still live with the hurt and I accept it, but it still hurts so much. I miss his smiling face.”

G. Neighbor: teenage male

“Let people know how their selfish actions affect those who love them and are left behind. Help people realize that no matter how bad things look, they will get better. There is help.”

H. Friend: co-worker male

“I feel so sad, not at death, but at the thought that this person will probably spend eternity in hell. In the back of my mind I realize that I am not God and do not know the circumstances, and know there is a chance this person is in God’s Kingdom, still, probably he is in hell and that is a scary thought for anyone.

I. Duty Police Officer: teenage male

“What a selfish jerk to put his family through this.”

J. Schoolmate: teenage girl

“He was the class bully. He left a note blaming his father for creating too much pressure on him by his expectations. I then felt sorry for him and realized the truth that bullies can be victims.”

K. Aunt: teenage female

“I felt so sick, she lived for a week and begged not to die. I can still hear her call for help sometimes as I sleep. I guess I will never forget.”

L. High School Teacher: two teenage females

“It was a very difficult time for, I felt very frustrated, and that I was a failure because I had not noticed signs of suicide.”

M. Sister-in-law: 43-year-old female

“On Friday the 13th, she took a lot of medication that she had been saving. She left a note for the family. Climbed into the bathtub so as not to mess up her pretty house. Her husband found her, but it was too late. I was saddened so very much and felt that it was something that should not have happened. Why could I not have done something? I’ll never forget this.”

N. Off-Duty Police Officer: 18-year-old male

“In the case of my friend who committed suicide, he was 18-years-old. I’m angry. He attempted suicide by:

- 1) Taking a bottle of Tylenol. It didn’t kill him, but it ruined his liver.
- 2) He tried shooting himself, but had a smaller caliber bullet than the gun required, the bullet didn’t gain the momentum it normally would coming out of the barrel, so instead of killing himself, he ruined the pallet in his mouth.
- 3) He tried to cut his wrists, leaving cuts to the bone on both wrists.
- 4) On a visit to California to see his mother, he had a fight with her, left the house, slept in somebody’s pickup bed, was arrested for trespassing, and put in county jail. The deputies told him that he would probably end up in prison, and he attempted to hang himself .but they cut him down in time.

After each of these episodes (1-3), he was evaluated at the Spanish Peaks Mental Health Center in Pueblo, and they couldn’t see any reason to commit him. They could have – and in my opinion, should have – done

something, but didn't. He moved to Texas with his brother and finally managed to kill himself by hanging in the bathroom of his apartment. That's why I'm angry."

O. Sister: older teenage brother

"I only feel guilty when I laugh."

P. Mother: teenage son

"I feel shut out and angry with my husband's withdrawal, but am fearful of expressing my rage for fear of him getting more angry. I would like to move away, I can't bear to see my son's growth marks on the wall."

Q. Father: teenage son

"I feel wracked with pain and guilt. I've failed as a parent, I'm useless. I am responsible for all the family problems and I don't deserve to be helped. I am a failure and my family would be better off without me."

R. Wife: 45-year-old husband

"I can't live without him. Why did he do this to me and the girls? What will I ever do?"

S. Off-Duty Police Officer: friend, female (4½ years later)

"She had attempted suicide once before, but I just didn't know what to do to help. I got very angry at the police because they would not let me see her. They questioned me as if it had been a homicide. I still feel a lot of resentment toward the department. I am angry and hurt because her brother made a statement to the local newspaper that I was the cause of her taking her life. We were very close, and now he won't even speak to me. I did not want to see anyone for several days. I was sure everyone was looking at me and blaming me, I still have guilt feelings at time. I have flashbacks, I will be walking on the street and I will see someone who looks like her and it all comes back."

IV. SURVIVING

Any loss brings pain and suffering, but to lose someone who has been a part of our life brings the greatest hurt of all. How can we ever go on, how can we cope with the pain that has penetrated to the very depth of our soul? We are not going to get over it – we must go through it. The psalmist said in Psalm 23:11, “Even though I walk *through* the valley of the shadow of death, I fear no evil; for thou art with me; Thy rod and Thy staff, they comfort me.” Note that it is a “walk through,” not a going around, over, or under, but “through.” Let us take that walk together. If we are going to survive we must take that walk.

- A. There is shock. Our Maker in kindness made us in such a way that we are temporarily anesthetized. We do not have to face reality all at once and so we escape the full impact of our hurt and pain. This is good if it is only temporary, but to live in this state is unhealthy. We must go on and deal with life as it is. There is nothing we can do about yesterday no matter how hard we try or wish; tomorrow with its own challenges and uncertainties need our attention. This response may last for hours or days; we may experience times in the future that the unreality will again come over us, but remember acceptance is a very slow process. In time we will move forward.
- B. Next it begins to dawn upon us that our loved one is really gone, and our grief needs to be expressed. Without warning, there comes an uncontrollable need to cry. Many think crying is a sign of weakness or perhaps the beginning of a nervous breakdown, but studies indicate just the opposite. If we refuse to let go, if we hold our tears back, we may be in for trouble and do ourselves more harm. Crying is both normal and necessary for good healthy grief. We cry because we need to cry!
- C. We feel lonely, depressed, and blue. Surely no one has ever suffered a loss like this. I just can't be happy again, I'll never love again, what will I ever do? Even Jesus as he faced loneliness cried out, “My God, My God, why hast Thou forsaken me?” Matt. 27:46. We also ask “Why?” Why doesn't God care? Why am I left here alone? Doesn't anyone care? These thoughts are also normal, and a part of good healthy grief.

I flew for many years in the military and there were times that I took off in the dark, and as the plane climbed up through those black, heavy clouds, I sometimes thought that I would never see the sun again. But suddenly, we broke through and the sun shown and the clouds that were so dark became so white and beautiful. Our loneliness also will pass -the sun will shine, but we must climb onward and upward through the clouds of darkness and despair.

- D. As we come out of our depression, there may be strong feelings of anger or resentment. These are also normal for every human. Are we angry at the one who took their life? Angry at God for letting this happen to one I love? Am I responsible? Am I being punished? It makes no difference whether these feelings are rational or not; they are our feelings and deserve our attention. There is no right or wrong, they are a part of us and we need to deal with them. As we express and confess our feelings, we receive the strength to rise above our anger and resentment, it no longer controls us.
- E. Perhaps there is guilt. Usually there is this feeling that we did something to cause the death, or something that we did not do to prevent it. It is a hard task to sort out and deal with guilt because it may come from standards set by our society or from those imposed upon ourselves. We need to talk out these feelings with someone who understands the deeper relations of which this guilt is but a symptom. Don't be afraid or embarrassed to share these feelings, for unresolved guilt can make us miserable for a lifetime and hinder our movement back into a full and productive life.
- F. We mentioned some of the physical symptoms when we talked about Reactions. There are the aches, the pain, the distress that makes us miserable. The doctor gives us some medication and we feel better for a time, then it all comes back. Perhaps a trip to the hospital where they find nothing physically wrong. People who become ill after a loss of a loved one usually have not worked through the grief situation. Perhaps they have stopped at one stage or another. Here we need to understand that it is our grief that is causing these symptoms, and more than understand, we need someone to help us work through the feelings of loss.

What is the bottom line? There are many events in life and death that we have no control over, but it is within our power to choose the way we react to those events. We need not deny our feelings – we must deal with them and in time let them go.

When I attended a Critical Incident Conference at the FBI Academy, a Special Agent by the name of Jud Ray spoke to the class. He had been shot and lived to tell about it. He stated that the most important thing he could think of to help any survivor was to, “Bring that person to forgiveness. Yes, we may be able to function, but we cannot be whole until we forgive.” This is not as easy task. To forgive the one who took their life, to forgive ourselves, to forgive others, means that we must let go of all the hate and resentment that is stored up inside of us; and then as we transcend our pain and grief, the peace will come. We will survive.

“Finally, brethren, whatever is true, whatever is honorable, whatever is right, whatever is pure, whatever is lovely, whatever is of good repute, if there is any excellent and if anything worthy of praise, let your mind dwell on these things . . .and the God of peace shall be with you.” Phil. 4:8-9.

BIOGRAPHY

Lieutenant Colonel Bromley retired after 25 years of military service. He served in World War II, Korea, and Vietnam as a Combat Commander, Senior Test Pilot, and Fighter Instructor.

John Bromley attended the University of Maryland, Spartan School of Aeronautical Engineering, Bear Valley School of Biblical Studies, and the FBI Academy.

Mr. Bromley has served several churches in Colorado. He has also served as a Chaplain for the El Paso County Sheriff's Department, and as a counselor in the Chemical Dependency Program at Doctor's Hospital in Colorado Springs, Colorado.

He is a Certified Master Law Enforcement Chaplain and serves as a member of the Certification Committee of the International Conference of Police Chaplains. He is a member of the American Association of Suicideology, and travels throughout the United States and foreign countries conducting workshops in "Fatal Emotions," which covers Self-Image, Stress, Depression, Guilt, and Suicide.

Mr. Bromley presently is serving as a Chaplain for the Colorado Springs Police Department and the FBI.