

THERE IS ALWAYS HOPE



*“YOU CAN’T GET INTO
TROUBLE BY TALKING
ABOUT SUICIDE.”*

Living with mental illness and suicide ideation is a challenge that B tackles daily with the help of good medication, a great team – and her lifesaving lists by the phone.

WARNING: This story contains themes of suicide. If this raises issues for you, call Lifeline on 13 11 14

B grew up in the outer suburbs of Melbourne. “I was a very anxious child and would do a lot of rocking to soothe myself. That was the first sign that something wasn’t right.”

Aged seventeen, when faced with a maths assignment that asked the probability of a card coming up out of a pack, she froze: “I didn’t know how to do it, my jaw clenched and I thought: ‘Oh God, what’s happening to me?’.”

Over the following weeks, she became sad and was not in a good place. “I ended up making my first attempt at taking my life when I was seventeen. I was too embarrassed to tell my parents, so my best friend took me to hospital. I called her and said: ‘Look I’ve done this stupid thing, I can’t do the maths assignment, I keep crying and I just want to go to sleep and never wake up.’” Her friend responded and is still a friend today, yet her parents didn’t find out about this event until she was twenty-one.

I COULDN’T GET RID OF WHAT I CALL THE DARK SPACE.

She went on to be diagnosed with schizophrenia and discovered that it ran in her family. “It was never talked about, so when I was diagnosed, I was really embarrassed and didn’t feel like my life was worth living. I was put on different anti-psychotic medications, I went through them all, but they didn’t help, and the side-effects were just terrible.”

While coping with the symptoms of her illness, she completed three years of nursing study. Working as a paediatric nurse became extremely challenging when she became unwell and battled the harsh side effects of the medication. B was forced to give up work and became withdrawn.

“I felt I had no purpose in life, I couldn’t get out of bed and all the signs and symptoms of schizophrenia were a constant barrage. I was living with my boyfriend and his solution was to ring the police and get them to take me away, so I was put into hospital. That was in the days of big psych hospitals like Larundel – it was not a good place. I always joke and say if you weren’t mad before you went in, you came out mad! I was in and out for a few years and then they closed that hospital down.”

There is a gap in her memory during this time when she was hospitalised. “I spent a few years just sort of lolling around and not doing much. But I felt a terrible, constant pressure on me that I just wanted to go to sleep. I couldn’t get rid of what I call ‘the dark space’.”

Substance abuse took a hold. “I was living with my parents as they had found out about my illness, but I was seeking drugs because they made me feel numb. One day, my younger sister found me after I’d made an attempt on my life. That’s probably the hardest thing I’ve had to live through.”

Through all those “lost years”, she made three attempts on her life and her family supported her throughout. “They’re just absolutely fantastic.”

She describes the bad car accident she had during this time as: “A sort of a wake-up call to say, you’re going to kill yourself one way or another, so you really have to look at things.”

Two things happened after that accident to change her life’s course – she moved to Bass Coast and started taking a new medication that worked for her.

“That really was a lifesaver. I’d been on so many medications while also attempting to take my life. I’m a huge believer in the right medication and since I started on the best one for me ten years ago, I haven’t been to hospital and I haven’t used drugs. I joke with my psychiatrist and say it’s the drug and you that really saved my life.”

The combination of positive forces continued. She met her partner and they were married eight years ago. “My husband has also been instrumental in keeping me out of hospital – along with the medication.”

Happily married, they have decided not to have children because her husband also has mental health issues. “But that’s okay, we’ve got nieces and nephews to spoil – and we’ve got a cat. We both like photography, so we take our cameras around to competitions and see who can get the best pictures.”

Her key message is that it is really helpful to be able to acknowledge and talk about



suicide and thinking about suicide (suicide ideation). It’s not an easy conversation to have, but it’s an important one and can mean survival for some. “I’ve recognised that if you’ve got the first step, the ideation, or the thinking about it, then you’ve got the second one, which is planning, and the third is the action itself. I’d like to let people know that if you are recognising these signs and symptoms, that it’s a good thing. You can’t get in trouble if you start thinking about taking your own life and then talk about it with others.”

Another key piece of advice she shares is that it is important to be coordinated in your care, have a good team around you and to make sure your team communicates well with each other.

“I think the main thing is to be organised. If you can compile a good treating team that is the most important thing. You need to have, in my experience, a select few people that will help you. So, I have my treating team who communicate with each other which includes my case manager and my GP, who is in communication with my

psychologist, because of the drug interactions. That way, I always have someone who I can trust to tell me: 'I'm not okay'."

Family and friends also make up her A-Team. "It's about having people you can trust. If you get things working right and everyone works together, then that little team, hopefully, will keep the lines of communication open and ensure prevention is possible."

Another crucial tool is her "magic list". On it are her "go-to" people including case manager, psychiatrist, husband, doctor, Lifeline, Suicide Prevention Line, her mum and family. "My family members are so supportive, I can't believe I was ever embarrassed to be sick in front of them." She can also ask them anything. "It depends on what the question is – my brother is a doctor so I ring him a lot with medical questions and then I might think it's a Mum question, so I call her – I even call her at two in the morning sometimes. My family members are my support system and are just fantastic."

"I think it would be wonderful if everyone had a support system of their own that worked."

The other essential step is to prioritise your magic list. "Sit down with someone who you trust and get them to note the role of each person and also to write down the steps like – if this happens who you need to call and then to actually have that information physically next to and also in your phone."

Then, when you're not thinking straight you can go to the top of the list and go 'righto, I need to start ringing people if the ideations start, or if I feel unwell. I can say okay I probably shouldn't be thinking this'. It's about having a look at the list and thinking righto, who on my list is going to understand why I'm doing this?"

B also relies on her "happy place" at the local beach to keep her on track. "The coast is a fantastic place to live. The beach is just a two-minute walk from home. My husband and I have a little portable stereo you hook your phone up to and we take our little beach shelter and sit on the beach and listen to music near the pier."

Even with all her strategies in place, life still remains a constant balancing act. Some days are better than others and B worries about that. "Occasionally, I still have thoughts of you know, am I slipping down?"

This article is part of the #storiesstrong suicide prevention campaign which highlights a series of twenty articles developed by a diverse range of people with lived experience of suicide and experts in the field.

Stories Are Strong is an initiative of the **Place-Based Suicide Prevention Trials** project which is jointly funded by the Victorian Department of Health and Human Services and Gippsland PHN.

For more information visit www.gphn.org.au

IT IS REALLY HELPFUL TO BE ABLE TO TALK ABOUT SUICIDE AND THINKING ABOUT SUICIDE

The key take home message is don't despair, there is always hope. Recognise the signs, seek help, make a list and just find someone to talk to who understands.

"You can't get into trouble by talking about suicide. I would like to encourage conversations around issues of suicidal ideation. It's okay to talk about it. I would have appreciated if someone had asked me directly if I was having suicidal thoughts."

B hopes that by sharing her story, it helps others in knowing that there is someone else out there who has gone through and experienced similar circumstances.

"My message is that it is real that people get to the point where they actually don't want to be alive anymore, but at the end of the day there is hope."

#storiesstrong

WHO TO CONTACT

Lifeline 13 11 14

**Suicide Call Back Service
1300 659 467**

**Beyond Blue 1300 22 4636
www.beyondblue.org.au**

Emergency 000

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