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As Suicides Rise, More Attention Turns to the People Left Behind

New studies show just how severe the aftermath is, but emerging treatments offer hope



Becky Powell with her children (from left) John Luke, 18, Boone, 25, and Madison, 26. Ms. Powell's husband, Mark, died by suicide in 2013. PHOTO: ILANA PANICH-LINSMAN FOR THE WALL STREET JOURNAL

By

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On the day before his 25th birthday, Jeannine Pembroke's son killed himself. Soon the calls from family and friends dwindled, and Ms. Pembroke was alone with her

grief. One afternoon, she sat at her computer in the house where her son had grown up and sent her first message to an online support group. “We are devastated, numb, angry, and so very sad,” she wrote.

As suicides rise in the U.S., more attention is turning to the struggles of the people left behind. New research shows just how severe the aftermath is—and that it is different from other kinds of loss. People who lose a loved one to suicide are at a greater risk for post-traumatic stress disorder and suicide themselves. The grief can be longer-lasting and more debilitating.

But emerging treatments offer hope. A type of therapy that involves retelling the story of the moment survivors heard of a loved one’s death proved beneficial in a new study. Talking openly about the suicide may also aid healing, recent research found. Growing numbers of mental-health teams are accompanying first responders on suspected suicide cases. And counselors are undergoing new training.



Jeannine Pembroke and her son Jared spent a week hiking and camping in Yellowstone in the summer of 2016. After a long struggle with anxiety and depression, Jared died by suicide in 2017. PHOTO: JEANNINE PEMBROKE

The suicide rate in the U.S. rose 24% from 2007 to 2017, according to the Centers for Disease Control and Prevention. Among people ages 10 to 24 years old, it jumped 56%. [About half of all American adults](#) have been exposed to at least one suicide in their lifetime, with 35% suffering “moderate to severe emotional distress” from the loss, according to a 2017 study published in the Journal of Affective Disorders.

“The grief that follows a suicide is a traumatic grief. It brings high functioning people to their knees,” says Ronnie Walker, a licensed clinical mental health counselor and the founder of Alliance of Hope, a nonprofit that provides support to survivors of suicide loss. People are often left with feelings of guilt and grapple with wrenching, unanswerable questions: “Why did this happen? What could I have done? What should I have done?” to prevent it, says Ms. Walker, whose stepson died by suicide in 1995.

People may have symptoms of post-traumatic stress disorder. “All you need to know is what the method was and then your mind creates a picture. It functions like a trauma memory, even if they weren’t an eye witness,” says John R. Jordan, a clinical psychologist in Pawtucket, R.I.

Families and friends may also receive less support. “These are stigmatized deaths,” Dr. Jordan says. People may think, “something is wrong with that family.” And even those who want to help “may struggle with what am I supposed to do? Do I come over and bring the tuna casserole?” he says.

Ms. Pembroke’s son Jared died from a self-inflicted gunshot wound. He had struggled with—and been treated for—anxiety and depression for years. Mr. Pembroke, a college student, loved hunting, fishing and hiking in Glacier National Park, a few hours from where he grew up in Helena, Mont. He volunteered for the local suicide prevention hotline. (Mr. Pembroke lost his best friend to suicide the year before his own death.)

WHERE TO GET HELP

- Do you need help? The contact number for the National Suicide Prevention Lifeline is 1-800-273-8255.
- [American Foundation for Suicide Prevention](#) The Healing Conversations program connects those who have lost loved ones to suicide with peer volunteers.
- [Alliance of Hope](#) Provides resources and an online support group for survivors of suicide loss.

Ms. Pembroke and her family decided to be open about how Jared died from the beginning. “I figured Jared couldn’t talk about how bad he was hurting. I have to be his voice. I don’t care how much it shocks people. I feel like they need to know what a problem” depression and suicide is, she says. The young man’s obituary said he “lost his battle with the darkness.”

Ms. Pembroke leaned on family and friends to cope with her grief. She saw a counselor and posted on the Alliance of Hope message boards. “I was just floored by the replies of virtual hugs and ‘we’re here for you’” notes from other members, she says. She tried to go to in-person support group meetings a couple of times, but couldn’t get beyond the parking lot. “The thought of sitting in a room and hearing everybody’s stories, I just didn’t think I could take that,” she says.

SHARE YOUR THOUGHTS

If you or someone you know has been touched by suicide, what helped you cope? Join the conversation below.

As the months went by, Ms. Pembroke found solace in watching the birds in her yard, sewing and filling in adult coloring books. She began responding to messages on the Alliance of Hope boards from people newly grieving. “Just offering empathy and support to the people who are starting on the journey,” she says. “It made me feel like maybe I have a purpose in all of this.”

Still, every few months she takes what she calls a “griefcation,” a short trip away from her home. “When I’m in my house, I’m reminded of everything,” she says.

Recent research has found that openly talking about how a loved one died may be helpful for healing. Those “who are willing to talk about it, there’s the potential for people to give them more social support,” says Julie Cerel, director of the Suicide Prevention & Exposure Lab at the University of Kentucky, who co-authored [a 2017 study](#) on the topic.

Several recent studies have found that people who have lost loved ones to suicide have an increased risk of suicidal thoughts and behaviors and of dying by suicide themselves. “There’s some sort of modeling, now you’ve seen this is how somebody else has coped with their pain. There’s a little bit lower of a threshold to think the same way and do the same thing,” says Vanessa L. McGann, a clinical psychologist and chair of the loss division for the American Association of Suicidology.

There’s a growing recognition among clinicians that people who have lost a loved one to suicide are at higher risk of what is known as complicated grief, a “persistent, intense yearning for or preoccupation with the person who died” that impairs functioning, says Katherine Shear, a professor of psychiatry and the director of the Center for Complicated Grief at the Columbia University School of Social Work in New York.

Dr. Shear has developed a 16-session treatment for complicated grief that focuses on helping the person accept the loss and find possibilities for pleasure. In one part of the treatment, therapists record participants while they tell the story of learning of their loved one’s death, a technique similar to one used with patients with post-traumatic stress disorder. Participants then listen to the recording at home.

In a study published in 2018 in the Journal of Clinical Psychiatry involving 58 people who were grieving a suicide loss, 64% of those who [received the treatment](#) were either “very much improved” or “much improved” on a scale of complicated grief. Also, while more than 40% of these people had suicidal thoughts before treatment, none did after.

A growing number of volunteers are joining first responders at the scene of potential suicide cases. Called LOSS teams, for Local Outreach to Suicide Survivors,

they usually consist of a mental health professional and one or two people who have lost loved ones to suicide.

“We’re there for the sole purpose to interact with the newly bereaved to point them to resources that propel them more rapidly through the healing process,” says Noah Whitaker, co-director of LOSS teams in Tulare County, Calif. Mr. Whitaker’s father died by suicide when Mr. Whitaker was a senior in high school. “When I arrive on the scene, I’ll say I lost my father to suicide. I’m incredibly sorry for your loss. I’m here to help you.”



Ms. Powell with her children and late husband in an old family photo. In the months after Mr. Powell’s suicide, Ms. Powell encouraged her children to talk about their grief. PHOTO: ILANA PANICH-LINSMAN FOR THE WALL STREET JOURNAL

People who have had loved ones die by suicide can sometimes find meaning in the loss—and a new purpose in life—by helping others who are struggling with the same grief.

Becky Powell was a stay-at-home mother of three when her husband Mark, a money manager in Austin, Texas, died after shooting himself in 2013. Ms. Powell soon discovered that her husband had [borrowed millions of dollars](#) from banks and prominent Texans—many of whom were the couples' friends—promising them high returns, she says. “We were dealing with so many things—financial loss, loss of husband, father and the suicide and the way it happened,” says Ms. Powell, who is releasing a book about her experience titled “Awful Beautiful Life” Dec. 3. Just days after her husband’s death, Ms. Powell made a few resolutions to bring a sense of routine and normalcy to her life: She would shower every day and put on her makeup even though “most days I cried it off,” she said. Ms. Powell also turned to her large circle of family and friends for support and found comfort in her Christian faith and the country music she loves. (The title of her book is the title of a song by musician Darryl Worley.)

By sharing her family’s story, she’s trying to help others who have lost a loved one to suicide. “You can move forward and you can laugh again. I just want people to have hope.”

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