



Stories of LIVING

Break the silence. Suicide prevention begins with dialogue.



Waterloo Region
Suicide Prevention Council
www.WRSPC.ca

Welcome to Inspiring Stories of Living

When it comes to suicide, there are many stories to share. Unfortunately, the ones we most often hear are the tragic stories of lives cut too short, leaving unbearable grief and an overwhelming sense of loss for loved ones left behind. There are also uplifting, inspirational stories; stories of resilience, of lives turned around. It takes great courage to share these stories. As you read through them, you may find yourself in the struggles of these courageous individuals. By sharing them, we want you to know that you are not alone.

Struggling with suicidal thoughts is a very normal part of many people's lives. But what to do with those thoughts is the question. Change is possible. Focusing on living rather than dying is possible. It takes work and is often a lifelong journey but you are worth it.

For more information on how to help someone, visit

www.WRPSC.ca

"I have had to learn to adapt and change the way I do things and have needed to learn to do what's realistic for me and not for someone else. Adaptability has been key."

"Words can heal. They can help give direction and share an experience that I hope nobody ever has to endure."

"Please do not tell me how beautiful life is. I know. Please do not give me a list of reasons of why life is worth living. I have one. Please do not tell me how selfish I have been. I am aware. Please do not tell me that what I did was not the answer. It had been my answer, albeit a poor one. And I assure you that it will not ever happen again."

Laura McCormack



***“Talk about it.
Reach out for support.
We’re not meant
as humans to do
it all by ourselves.”***

Having grown up in a home filled with rage, violence and terror as a result of parental addiction, I’ve struggled for decades with anxiety and depression. In my twenties, after a sexual assault, I began to feel the full effects of clinical depression and the building of my anxiety disorder.

I spoke to no one about my life struggles and as a result, began a quick and destructive decline into serious mental illness that resulted in a hospitalization for planning my suicide. Finally being in a position of receiving care, I realized that being hospitalized was the best thing that ever could have happened. I began seeing a psychiatrist, a psychologist and a social worker. I started receiving supports around my thoughts of suicide and my overwhelming anxiety. I started to share my story and eventually, started to live!

Today, I am a Program Facilitator for the Canadian Mental Health Association and run a program called “Beautiful Minds” which provides a four component mental health, mental illness and stigma reduction course to secondary school teachers to use with their students. Within the program, I also facilitate a presentation to each participating class which includes personal stories from volunteers within the community who have lived with the experience of having a serious mental health challenge, allowing students the opportunity to learn through others’ personal experiences.

My message and reason for why I do what I do is always the same: talk about it. Reach out for support. We’re not meant as humans to do it all by ourselves.

Who do youth talk to about mental health?

1. No one
2. Friends
3. 1% will talk to a professional

**It’s important we
let people know,
it’s OK to talk.**

SpeakingofKidsMentalHealth.ca

20 donations of \$75 allows a classroom of students to be exposed to “SafeTalk”: a 3 hour suicide alertness program

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Cathy Read-Wilson

“To anyone out there who is struggling with life. Take a deep breath and ask someone, anyone, for help. You deserve to live, learn and grow just as anyone else. You are worth it.”



It's interesting, that as we get older, it is expected that we get wiser. Not so, for me. At 45 years of age, depression descended on me, yet I couldn't see the wisdom in getting help. In my teens, there was depression, and the thought of ending it all was to me the norm. This time, however, it took me down. I was blindsided by a hurricane with my heart, mind, and soul caught in a whirlwind.

You would figure that by my age, I should have at least been able to see things coming. Not so. I had moved from the point of logic to the point of total confusion and denial. Thank goodness that a good friend, Liz, refused to let me sit in my sorrow alone. In a less than polite way, I accepted help and, in fact felt a load taken off my shoulders. I am beginning to learn that the road blocks I have had to face in my later years are of a much higher calibre than when younger. Over a two year period, I was privy to traveling the road of cancer with a dear friend, Susie. I never thought that this road would have been dealt to me so that I would be able to find my own path of rediscovery. Susie died, November 19, 2007, and with that, a part of me died. At the same time a part of me, for some unknown reason, fought hard to find reason to live: leading me to believe that, in effect, these more difficult trials had offered greater opportunity for growth.

Growing up, we hope to have friendships that will help us grow. Ironically, the friendships that offer the most growth, are those where we have been hurt to varying degrees. I was both hurt, and hurting after Susie's death. My first memorable experience with the death of a friend was the loss of my cat, Ming Chu. She was at the door waiting every night for me to come home, no matter what the hour; slept with me, gave me comfort and listened to me cry. Then came the dreaded, final trip, to the vet. It was my responsibility to take her; a moment never to be forgotten.

The learning and work to battle suicidal thoughts never really end for some of us. Right when things seemed to be turning around for me, another set of trials and loss interrupted, turning my thoughts into action. On July 7, 2010 I attempted suicide. Life-experience is wisdom in the making, and I am thankful to have lived.

I still struggle with the threat of suicidal thoughts, but I am driven to go on despite them. Without these many years of trials and tribulations, I would not have been blessed with the determination and passion to get my Masters degree in Counselling, while learning from others as I walk with them through their own crisis.

\$175 trains a professional, a leader, a coach - any community member in ASIST, a two day course on suicide prevention

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Allan Strong



“My experience confirms for me that no one is immune from mental health challenges, even those of us who provide assistance.”

It seems odd to be talking about my experience with suicide. I have spent the better part of my career as a mental health professional supporting people not to act on their suicidal thoughts. My experience confirms for me that no one is immune from mental health challenges, even those of us who choose to provide assistance.

My introduction to mental illness came from my mother. She was first hospitalized when I was eleven. She was diagnosed with manic-depressive illness, what is now known as bi-polar disorder. Dealing with my mother's profound mood swings and everything else that came with that was part of our daily routine for a good part of my life.

It was not until after my mother's death that I began to experience my own challenges. I was hospitalized and diagnosed with Bi-Polar 2 disorder. For quite sometime all I wanted to do was to die. My wife has shared with me that there were times she was not sure if she would find me alive or dead when she came home from work.

What helped? A lot of things. What made the biggest difference for me was the support of my family, friends and my faith community. Having people in my life who did not give up on me when I had given up on myself made a huge difference for me. I also realized that I am my own sail. The support of others was essential, but so was learning that no one else is going to do it for me.

Protective Factors

- Problem solving, life and communication skills
- Sociability
engage in support
- A sense of belonging
(to school, work, community sports teams, faith ...)
- Resilient personality

A donation of \$1500 allows a person that has attempted suicide to participate in Skills for Safer Living, a 20 week program focused on developing new coping skills with an emphasis on living.

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Robert E. U. Walsh

***“I needed to discover
a new way of thinking.
To have a new perspective
about life.”***



Risk Factors

- . Death of a loved one, especially if by suicide
- . Major life stressors which create unbearable pain
- . Alcohol or drug abuse, gambling, other addictions (self or family)
- . Abuse or violence (physical, sexual, emotional)
- . Bullying or harassment
- . Sexual orientation / gender identity
- . Chronic illness or disability
- . Feelings of failure

I lost my older brother and later, my mom to suicide, and it was not that long ago I also made a serious attempt. Life and events can paralyze us psychologically, and that's like being enveloped in a blinding vortex, like driving in heavy fog. Slowing down is vital to survival.

I needed to discover a new way of thinking - to have a new perspective about life. I had to rewire my thinking and re-evaluate my coping skills. After decades of reacting to events I needed to find my joy that somehow got lost within my personal web of distress. That gave me a personal goal (finding my joy) and I began to become passionate about this journey of reaching it.

My journey includes regular meetings to provide my family and myself with support around alcohol abuse and its effects on my family. It helps me replace personal life skills and perceptions born from the dysfunction often common amid alcohol addiction. It isn't about blame. It is about changing the coping patterns that no-longer worked for me.

I love sharing within the Beautiful Minds school project. This CMHA program helps reduce stigma and lower barriers that isolate so many of us. We can get the strength to reach out and get help. I believe there's not much we can't improve on when we rediscover we are worth it. I may have to cope with mental illness but I now know that real insanity is the perception that doing the same things in the same ways will get me different results.

30 donations of \$100 pays for 5000 pieces of prevention literature to be distributed among our community.

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Keely Phillips



My first exposure to suicide was a cousin dying by suicide when I was seven years old. From then on, thoughts of suicide were in my life. When life was good, it was maybe only every couple of months that I would think about it. When life was not good,

“When life was not good, I thought about suicide every day. I believed that everyone thought about it.”

I thought about suicide everyday. I believed that everyone thought about it. I thought that part of living was at times wanting to die.

It wasn't until I was in my second year of university that I learned that these thoughts could be decreased and hopefully, eventually go away. Unfortunately, it took me going into crisis, harming myself, and ending up in hospital to realize that help was out there. It took many years of hard work to remove suicide as an option from my life. I believe that my brain had gotten so used to the idea of suicide that whenever anything stressful happened my brain jumped to suicide related behaviour as the way to cope.

Luckily, like breaking an old habit, I have changed this by practising new habits (self care, increasing my self esteem, increasing my coping skills, etc...) so now my brain jumps to safer options like “have a cup of tea” or “cry” instead of “hurt self and want to die.”

It all happens in a matter of seconds, the choice between engaging in suicide related behaviours or living related behaviours.

When that moment of worthlessness and the sense of life is not worth living comes over me... I take a deep breath and have a cup of tea.

Invitations for Help

If you, or someone you know is experiencing...

- . ongoing sadness, indifference
- . extreme anger or changes in mood
- . lack of interest in usual activities personal appearance or belongings
- . isolation, withdrawn
- . difficulty coping
- . expressions of helplessness, worthlessness or hopelessness
- . destructive, risky behaviour
- . changes in appetite or sleeping

...there may be a risk of suicide

You Can Help

A donation to the Suicide Council could save your friend. A friend that you may not know is in trouble until it's too late.

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519.744.7645 Ext.310

This is a voice mail service and not a crisis line

Crisis Line: 519.744.1813

Our Partners



Committed to the reduction of suicidal behaviour and it's
impact on individuals, families and communities