

# Suicide is more than just a statistic

It's easy to cite the statistics.

One in four people will experience mental illness. Suicide rates in this country are at the highest level in almost 30 years.

It's much more difficult to comprehend what those statistics mean. As you wait in line to buy your morning cup of coffee or arrive at the office or sit down for your first class at school, people near you are struggling with mental illness. Some may be contemplating suicide. Most are afraid to talk, and so they suffer in silence.

"You sit in the room and start looking and think, 'How many people aren't saying a thing?'" said Mark Tobias, whose daughter has made repeated attempts on her life.

Fortunately, Mark is talking. So is his daughter, Chrissy, whose story appears on Page 5 of today's paper.

So is Pat Kenny, Hinsdale's former fire chief, whose son Sean took his own life in 2006.

And so are we.

Some might wonder why we've decided to write about suicide — or any mental health issues for that matter. It's a tough assignment, when our job is to simplify complicated issues so they can be shared in a reasonable amount of space. And this issue certainly is complicated.

But we know the statistics. And we know this issue hits close to home. Too close.

We've been running a series of columns about mental health issues since the fall, working with a group of professionals who work in the field. From our first conversation with this informal advisory board, there has been consensus that we needed to write about suicide.

As is the case with any issue related to mental health, until someone starts a conversation about the topic, it will continue to lurk in the shadows. Those considering suicide might remain afraid to reach out for help, worried about the stain their mental illness might leave on their family's reputation.

Family members may be equally hesitant, if they learn a relative is struggling with suicidal thoughts, to share their concerns with others.

Would that be the case if the diagnosis was for a physical ail-



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ment? Definitely not.

So we have decided to dedicate space in May, which is Mental Health Month, to this topic.

I hope you will read Chrissy's story in today's paper. She is an incredibly brave woman who found the courage to pursue recovery after listening to another woman share her story.

In her column on Page 19, Jennifer Geiter, clinical supervisor of the counseling center at The Community House, offers insights on the importance of confiding in a loved one when experiencing suicidal feelings.

Next week, Mark Tobias and Pat Kenny will share what it's like to love someone who has a mental illness and is suicidal. Both initially felt pain and isolation but have learned to speak out and advocate for awareness.

On May 19, our coverage will shift to resources in the area for families who need help and the Community Memorial Foundation's supporting work. We'll hear from a group of social workers at Hinsdale Central about some of the at-risk teens they see, and Geiter will provide counsel on being helpful listeners to those opening up about their struggles.

Finally, on May 26, we'll learn about a suicide prevention video that TV news reporter and Hinsdale resident Sylvia Perez is creating in conjunction with the foundation and what she hopes to accomplish.

I'm tempted to offer a series of disclaimers here, but I think the most important thing I can emphasize is that each person's story is different. Each person faces a unique set of circumstances when they contemplate taking their own life.

We can't tell all those stories. Those of Chrissy and Sean are just two stories, but I think you will find they are powerful ones.

And if sharing their journeys starts a conversation — around the dinner table or at the social worker's office at school or with a trusted friend — then we will have accomplished our goal.

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