

# LIFE AFTER AN ATTEMPT

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<https://988lifeline.org/es/servicios-en-espanol/>

<https://988lifeline.org/help-yourself/for-deaf-hard-of-hearing/>

# SVP HIGHLIGHTS

**2/12/2024 & 2/14/2024:** Kate Fitzpatrick, Lauren Adams, and Sarah Ackerman hosted a Valentine’s Day themed fundraiser for the AFSP Out of the Darkness Walk.



SVP Valentine’s Day Fundraiser for AFSP Out of Darkness Walk

**2/14/2024:** Dr. Hubbard, Dr. Poland, and Katlyn Bagarella presented on STEPS for the National Association of School Psychology.

**3/6/2024:** SVP collaborates with members of the Medical School psychiatry club to host a bake sale and fundraiser for the Out of the Darkness Walk.

**3/19/2024:** Dr. Poland and Dr. Hubbard presented to the Pembroke Pines Charter Schools parents virtually on the topic of “Safeguarding Adolescents in Challenging Times.”



SVP bake sale in collaboration with Medical School Psychiatry Club for the AFSP Out of Darkness Walk

**4/2/2024 - 4/4/2024:** Dr. Poland attended the Florida Blue Symposium in Orlando, FL.

**4/23/2024:** Florida School Toolkit for K-12 Educators to Prevent Suicide (STEPS) presentation by Dr. Poland and Dr. Hubbard for Miami-Dade County mental health professionals.

**4/25/2024:** Dr. Poland presented virtually on the topic of Suicide Prevention in Schools for the International Association of School Counselors.



SVP Graduate Assistants, Sarah Ackerman, and Lauren Adams, pose with Dr. Poland for a picture at the Crystal Ball

**5/17/2024:** Dr. Hubbard and Taylor Tejera presented on the “Impact of Social Media on Suicide in Adolescents” at Nicklaus Children’s Hospital.

## UPCOMING EVENTS

**7/23/2024:** STEPS presentation in Orlando, Florida for school staff members.



View the STEPS manual



# Fostering Frosty Futures: A Mother's Mission for Suicide Intervention and Prevention

By: Sarah Ackerman, BS



Forever Frosty Foundation  
*minds can mend*

In a recent interview, Damiann Bilotta, Asher's mother, shared the goals and overarching mission of the Forever Frosty Foundation, along with valuable insights into her journey to healing and the lessons she has learned along the way.

## Founding Forever Frosty

To Damiann Bilotta, Asher's mother, his suicide came as a great shock. "It was really shocking; he was in such a great place in life and was happy." This retrospective confusion is not uncommon in those who have lost a loved one to suicide and underscores a problem with suicide that has stymied researchers, prevention advocates, and families alike: suicidal behavior can be distressingly complex. Described by author Craig Bryan in his book, "Rethinking Suicide" as a "wicked problem," the intertwining factors and multiple pathways that lead to suicide can make accurate prediction of risk feel like a daunting prospect. While risk factors and warning signs are a critical piece of suicide prevention programs, Asher's story raises a question of critical concern: how do we identify those individuals when risk factors are not immediately evident, or worse, hidden?

When discussing the unpredictability of suicide, Damiann stated, "You can never truly know." It is very challenging to absolutely determine who will die by suicide, but instead of feeling hopeless in this uncertainty, Damiann saw that a vital piece of helping individuals come forward with suicidal thoughts is to destigmatize discussion about suicide. Recognizing the importance of transparency and breaking the stigma surrounding suicide, Damiann believed it was crucial for the community to know how Asher died.

Damiann's sister, who was helping her write Asher's obituary, originally left this out of his obituary but Damiann insisted that this critical piece of information be included. While writing Asher's obituary, Damiann and her sister also discussed which charity people could donate to in honor of Asher. Without hesitation, Damiann proclaimed that she was going to start her own charity in his memory, thus beginning the Asher-Hendel Memorial Fund. Later, after filing for the organization to become a 501(c)(3) nonprofit, the organization underwent a name change and became the Forever Frosty Foundation.

The foundation's name originates from a hashtag that Asher often used on his Instagram post: #foreverfrosty #stayfrosty. Damiann explained that she didn't recall being aware of the phrase at that time, but following his death, many of his friends sent her messages of support, often including this phrase. The foundation found its logo in Asher's favorite animal, the polar bear, an enthusiasm that Damiann shared. "We both really loved polar bears and we were going to go see them in Canada together," she said. Although he died before they could take the trip together, two years after his death, she went to see the polar bears herself and described the experience as "wonderful."

Another important symbol associated with the foundation is that of a blue heart. Following Asher's death, Damiann was inundated with messages from people wanting to send their regards and support to the family. Still in shock and trying to cope with the loss of her son, Damiann would reply with a blue heart emoji. Sending this emoji meant she had received their love and support and was grateful. From this simple gesture, Damiann found another way to destigmatize the topic of suicide. "A lot of times when I was out [in public] and people would see me, they would want to talk to me, they would want to talk to the other way," Damiann explained. She did not want people to treat her differently and made it a point to approach anyone she felt was trying to avoid her and give them a physical blue heart. This gesture showed others that she was open to speaking about her experience, and she noticed that it made people more open to having difficult conversations. Now, she often gives blue hearts to friends, family, students, and organizations to encourage open conversations surrounding suicide and mental health. She also leaves the blue hearts in places where people can find them and welcomes others to do the same.

## Overarching Mission

A common misconception about suicide is that when a person expresses wanting to die by suicide, there is nothing that can be done to stop them. When asked about this myth, Damiann stated that she is adamant that people can get help, and that many people have gotten help. Providing life-saving mental health care services to adolescents is a main goal of the Forever Frosty Foundation.

Specifically, the foundation financially supports youth who cannot afford mental health care services. Damiann explained that she has established a network of psychologists and psychiatrists who alert her when one of their clients needs financial assistance. Notably, the foundation does not require therapists to disclose any personal information about these clients. Parents and families can also reach out to the foundation directly to inquire about receiving mental health services for their child.

The foundation often refers individuals seeking financial support to a therapist connected with the foundation. If the individual interested in receiving aid already has an established relationship with a therapist, their therapist can contact the foundation to assist with the cost of therapy. The foundation also donates to various therapy groups and organizations. If someone is receiving care from one of these organizations, they can reach out to the foundation to help cover their costs, or the foundation can pay the organization or program directly. Other goals of the foundation include spreading awareness, providing education, and eradicating the stigma surrounding suicide.

## Life After Asher's Death

When asked about some of the biggest challenges Damiann faced in navigating life after Asher's suicide, she replied that "[She] had no purpose." As a mother, her son was her purpose in a lot of ways. Further, the life she was left with nothing, no ambition, no drive, and no desire to be alive. She clarified that she did not want to kill herself, but she had wished that she would cease to exist. Overall, Damiann felt a great sense of emptiness and loneliness, and she found it challenging to move on and move forward with her life. She recalled that when Asher was younger, she often would tell him that she would find her purpose when he went off to college. She found her purpose a lot sooner than she had planned for and explained that following Asher's suicide "[Her] purpose found her."

Part of that purpose involves supporting grieving families. Through her work with the foundation, Damiann often receives calls from grieving mothers who have lost a child to suicide and want to talk to her about their experience. She conveyed that many of the mothers she speaks with feel comfortable conversing with her because she will never shame them for grief or lie to them by falsely promising that things will return to normal, and everything will be okay.

She shared that part of her communication with many of these mothers involves acknowledging that having a child die by suicide is one of the worst things that could ever happen to someone. She also frequently speaks with mothers whose children are struggling with severe depression and assist them in finding the services their children need. She said that people are often surprised by her ability to openly discuss Asher's suicide with others and listen to surviving parents recount their stories of loss and grief. She expressed her desire to do everything in her power to help others, stating, "That's [her] purpose—to help people who are grieving and to help kids not die by suicide."

When asked about what advice she would offer to surviving parents and families who are struggling to cope with their loss or finding it difficult to seek out help, Damiann emphasized, "You can't do this alone." Many people may mistakenly believe that healing after the death of a child by suicide is achievable without support, but she asserted that this is simply not the case. She said, "get someone you trust" and can seek support from. Allowing friends and family to support you is crucial, but equally important, in her opinion, is communicating to those around you when you need privacy or space. Grief varies greatly from person to person, Damiann said. "Don't let people grief-shame you; it is none of anyone else's business how you grieve."

## Damiann's Journey to Healing

Another vital aspect of Damiann's grief process was attending therapy. Damiann found Eye Movement Desensitization and Reprocessing Therapy (EMDR) to be highly effective for her. Through therapy, she learned how to talk about Asher's suicide and process what had happened. This allowed her to gradually return to a semblance of her life before Asher's death, though she emphasized that her life would never be the same. Journaling was another helpful tool for processing her emotions. She explained that jotting down her feelings in the notes app on her iPhone, titled "Frosty Feelings," helped her pinpoint exactly what she was feeling in a given moment. In therapy, Damiann would review her "Frosty Feelings" and process the emotions she had written about.

Throughout the interview, Damiann expressed gratitude for her exceptional therapist and shared the specific aspects of her therapist's approach she found so helpful. She articulated how the strong therapeutic connection they had developed during their work together made her feel understood. Damiann expressed that she did not feel alone in therapy; instead, she felt her therapist walking alongside her on the road to contentment, guiding her along the way.

Therapy was not the only avenue that Damiann explored throughout her grief and healing journey. She expressed that she has always been a lifelong learner and seeker, and this extended to her grieving process. She discovered her love for yoga when she went to an Ashram in the Bahamas on a trip with a friend. After having a life-changing experience at the Ashram, she obtained certification to teach yoga. Damiann conveyed that yoga is a philosophy and a way of understanding life. It helped her "understand the impermanence of everything." She relayed that this lesson was not easy to come by, but over time, she was able to reach this conclusion, which was very beneficial in her healing process. Additionally, some other modalities that Damiann tried included transcendental meditation, mindfulness-based stress reduction, and vibrational sound healing.



## Asher Reuben Hendel

Asher was a bright, creative, and strong-willed sixteen-year-old, often described as lighting up any room he walked into. Adored by his extensive circle of friends and his girlfriend, he was frequently referred to as "the legend", a nickname that truly reflected the impression he left on everyone he met.

On Tuesday, November 11th, 2014, Asher died by suicide. Following Asher's death, Damiann Bilotta and Bobby Hendel, Asher's parents, established the Forever Frosty Foundation in his memory.

"That's my purpose—to help people who are grieving and to help kids not die by suicide."  
-Damiann Bilotta





## Suicide Prevention & Intervention

Transitioning to the topic of suicide prevention, Damiani provided insights on what she believed to be the most critical piece of information that parents and families of adolescents struggling with difficult life circumstances or mental health concerns should know. She emphasized the importance of prioritizing mental health care for the child and acting swiftly on any gut feelings of concern. Additionally, she conveyed that it's essential not only for the child to receive assistance but also for their parents or guardians to seek support in understanding how to best aid their child during such a challenging period in their lives. Damiani also shared that parents and families need to listen to and believe their children when they are expressing that something is wrong. This is not the time to question or challenge your child. Furthermore, she expressed that no one should feel ashamed for seeking help and support for their child. It is never shameful to seek life-saving assistance for someone.

Understanding the critical role peers play in suicide prevention, Damiani also spoke about what actions peers can take if they suspect one of their friends is struggling with depression or suicidal ideation and in need of support. She stressed the significance of peer intervention in preventing suicide, highlighting the importance of alerting a trusted adult if a peer exhibits concerning behavior, such as risky actions or unusual conduct. Often, adolescents confide in their friends about their struggles but may not be expressing that something is wrong. Damiani emphasized that breaking such promises is trivial compared to potentially saving a friend's life.

Damiani was able to share a parent's perspective on what psychologists and mental health care providers can do to address the stigma surrounding suicide and mental health issues. She emphasized the importance of normalizing the experiences of clients who express suicidal thoughts or depression. Adolescents often feel isolated in their struggles, believing they are the only ones facing such difficulties among their peers. Damiani stressed that reassuring clients they are not alone in their struggles can be immensely comforting. Additionally, she highlighted the significance of acknowledging the challenge of discussing suicidal thoughts and creating a supportive environment where clients feel safe to share their feelings.

Damiani also provided overarching guidance for doctoral trainees who may be working with adults and adolescents in crisis for the first time, emphasizing the importance of self-reflection and awareness. "You need to know your limits and what you are capable of handling," she said. Her statements highlighted the difference between classroom education and clinical experience and emphasized the responsibility that comes with treating clients who have thoughts of ending their own lives. She further advised that student clinicians who are struggling with how to best support a suicidal client should seek out guidance from a supervisor immediately and without hesitation. She shared that working as a team when treating suicidal adolescents is probably the best strategy, especially as a beginning clinician.

Damiani emphasized that relying solely on basic risk assessment questions is insufficient for determining whether a client is at risk for suicide. She said the key is to routinely inquire about their client's safety and whether they are having thoughts of harming themselves, but she says, "You need to be more intuitive with these kinds of things, you can't just get the baseline answer." This echoes updated competencies in suicide prevention which suggest that clinicians move beyond simplified risk assessment and take an individualized approach to understanding the specific contextual factors, needs, and resources of a person at risk for suicide. Damiani also warned that clients may not always tell the truth. It is up to the therapist to look beyond a client's basic responses and attend to available warning signs and clinical judgment to respond appropriately.

For Damiani, another crucial role that a therapist plays in suicide prevention and intervention efforts is following up regularly and checking in with clients who have been experiencing depression or who have previously endorsed active or passive suicidal ideation. Ethical practice in psychotherapy also stresses the importance of making a good faith effort to contact a client who terminates therapy despite ongoing needs. Damiani further shared her perspective that this can help to determine that a client is still being supported and is safe despite not coming into therapy. She also stressed the importance of alerting parents and guardians when you suspect that their child requires additional support outside of regular therapy sessions.

### Blue Heart Distribution

SVP will be distributing blue hearts to any students or faculty that would like one. Stop by our Forever Frosty Corner located in our new office space in Malts room 107B to receive one!

It should be noted that when you stop by the office to get a blue heart, you will be asked to write something about mental health, Asher's story, or any reaction/connection you feel about receiving a blue heart on our "Forever Frosty" notepad. If you choose to give your blue heart to someone else we would love for you to share how you feel about giving someone a blue heart.

These sentiments will be kept anonymous but will be collected on an ongoing basis and shared with the Forever Frosty Foundation.

### Contacting the Foundation

If you or someone you know is interested in getting involved with the Forever Frosty Foundation, the best way to contact the foundation is directly through Damiani via email or text.

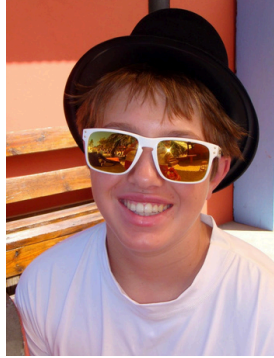
Additionally, if you know someone who is interested in receiving financial support from the foundation for mental health care services for a child/adolescent, you are also encouraged to reach out to Damiani directly via email or text. Damiani's contact information is provided below.

**Damiani Bilotta**  
President & Co-Founder  
Email: [damiann88@aol.com](mailto:damiann88@aol.com)  
Phone Number (Text/Call) 561-262-6653  
Website: <https://www.foreverfrosty.org/>

### Expression of Gratitude

The Suicide and Violence Prevention Team (SVP) extends a heartfelt thank-you to Damiani Bilotta for generously sharing her invaluable insights with us and for graciously agreeing to be part of the Spring 2024 edition of our newsletter.

We are deeply appreciative of her openness and willingness to share her journey with us. We look forward to continuing to partner with the Forever Frosty Foundation in the future.



## Additional Resources

The Lifeline & 988:  
<https://988lifeline.org/current-events/the-lifeline-and-988/>

American Foundation for Suicide Prevention:  
<https://afsp.org>

NAMI:  
<https://www.nami.org/Home>

## Forever Frosty Foundation Website



#ForeverFrosty

# Review of “It is My Blood to Scribe: Poetry of A Suicide Attempt Survivor”

Written by DeQuincy A. Lezine

By: Taylor Tejera, BA



**\*This review discusses significant mental health struggles and suicidality. If you find this material distressing, please exercise caution before and while reading!**

Dr. DeQuincy A. Lezine earned his PhD in clinical psychology at the University of California, Los Angeles. He has been dedicated to suicide prevention work for over 25 years. Dr. Lezine also has a history of mental health issues and is a suicide attempt survivor. He published the anthology, “It is My Blood to Scribe: Poetry of a Suicide Attempt Survivor,” in 2019. Unlike many other texts that discuss suicidal experiences after the event, the poems and drawings in this work were created while he was in crisis years earlier.

Though I would consider myself an avid reader of all genres, I do not typically gravitate toward poetry. The drawing on the cover caught my attention, which I later learned in the text, has an important meaning to Dr. Lezine’s story. I am glad I ultimately decided to read this anthology. It was a privilege to read about his thoughts during that period. It not only provided me with deep insight into what people may experience in crisis, but it was also moving. The content of the poems was raw, and I was often able to picture the struggles the author experienced. Additionally, many of the poems left me feeling sad and empathetic for the pain and turmoil Dr. Lezine’s younger self endured. This anthology is a reminder of how powerful words can be and the ability for others to connect to them. The drawings equally left a strong impression. Dr. Lezine also includes present reflections and notes after the poems that further provide insight into the experiences of those endorsing suicidal ideation.

Moreover, one of the aspects of this anthology that stands out the most is that Dr. Lezine provides a history of his suicidality. He includes poems detailing several topics including his family’s substance use, his struggle with bipolar disorder, and poems that instill hope. My favorite poem by the author is the last one, titled “Reconstruction.” I think it is a positive ending that those who have struggled with their mental health can resonate with.

This anthology made me reflect on the people who survived suicide attempts. Did they have similar thoughts and feelings that Dr. Lezine had? What are they doing now and how do they feel about their past experiences? Dr. Lezine being vulnerable and sharing his poetry and drawings at this time is admirable. Reading this anthology also emphasized how crucial coping skills are. Dr. Lezine created poems and drawings as an outlet to communicate his struggles with mental health and suicidal ideation. This text was a reminder of the benefits of creative expression. It can be challenging for anyone to share their most intimate and troubling thoughts. The way that Dr. Lezine was able to express himself was inspiring.

I recommend reading this anthology. I hope the lines in this text are just as impactful for you as they were for me. It is quick to read and convenient for those who only have time or energy to do personal reading for a few minutes.

# Review of “It is My Blood to Scribe: Poetry of A Suicide Attempt Survivor”

Written by DeQuincy A. Lezine

By: Taylor Tejera, BA

## Creative Art Resources

American Art Therapy Association : <https://beam.community/>

American Music Therapy Association: <https://www.musictherapy.org/>

American Dance Therapy Association: <https://www.adta.org/>

National Association for Poetry Therapy: <https://poetrytherapy.org/>

Visit PsychologyToday for a directory of providers in Florida who offer art therapy:  
<https://www.psychologytoday.com/us/therapists/florida?category=art-therapy>

## Keep Up with Dr. Lezine

Drs. Lezine and Brent wrote the book, “Eight Stories Up: An Adolescent Chooses Hope Over Suicide.” Check it out if interested.

Dr. Lezine is the director of the of Lived Experience Academy: <https://livedexp.academy>

## Read Other Suicide Attempt Stories

Visit: <https://livethroughthis.org/>



# Life After Suicide: Stigma, Secrecy, and the Process of Healing

By: Lauren Adams, BS

According to the Centers for Disease Control and Prevention (2023), suicide is one of the leading causes of death among individuals living in the United States. In 2022, over 1.6 million adults attempted suicide in the calendar year (CDC, 2024). Much of the research regarding suicide has been found to review the leading causes of suicide, the means used to complete suicide, and many other factors that led up to the event or occurred during the attempt or completion of suicide. Is it vital to assess and continue to conduct research related to individuals who survived a suicide attempt and what their lives look like following the attempt. A suicide attempt is defined as “a non-fatal, self-directed, potentially injurious behavior with intent to die as a result of the behavior. A suicide attempt might not result in injury.” (National Institute of Mental Health, 2024). Research has found that individuals who survive suicide attempts are majority females, as males tend to use more lethal means.

When working directly with individuals who attempt suicide, clinicians must be educated on effective strategies for helping clients move forward with their lives. In an article written by Mayer et al., (2020), they found that many individuals who attempt suicide often keep it a secret from their family members, friends, and peers. They hypothesize that this is due to the stigma that surrounds the concept of suicide and the lack of education on suicide itself in society today. In support of this theory, they found that as the levels of suicide stigma increases, the secrecy of the attempt also increases.

Mayer et al., (2020) maintain that clinical psychologists hold the role of discovering the best treatment for their clients. Furthermore, for those who have a history of a previous suicide attempt, it is imperative to assess for levels of perceived stigma in the community surrounding the survivor, the levels of transparency

and secrecy from the survivor to those they have close relationships with, and the increase in suicidality if there is suspected stigma impact or secrecy. In addition, they also noted that the presence of stigma does not have to be present for suicidality to increase. However, if the individual anticipates stigma, this can be just as effective as if there was actual stigma present.

In addition to these findings, Wang et al., (2013) found that there are five stages to healing from a suicide attempt. These stages include self-awareness, inter-relatedness of life, cyclical nature of human emotions, adjustment, and acceptance. These stages focus on the individual making realizations about themselves that they might not have had in the past, the importance of seeking help and support from others, the stressors that cause them distress or emotional dysfunction, changes in their own behaviors and emotions, and accepting life as it is and how to move forward from this event.

For some individuals, many of these stages can be short-lived and processed much faster than others. However, it is important to remember that healing, from anything, is not a linear process. Often, suicide survivors might complete a stage, move on to the next, and still can fall back to a previous stage. Normalizing this process for the survivor and validating their experiences with the difficult process of healing has been found in numerous research and empirical studies to be beneficial and important for the patience and understanding of the survivor (Wang et al., 2013; Mayer et al., 2020; Sheehan et al., 2022).



# Life After Suicide: Stigma, Secrecy, and the Process of Healing

By: Lauren Adams, BA

From understanding the effects of stigma, secrecy, and pathways to healing for a suicide attempt survivor, clinicians can gain significant insight into the appropriate treatment plan for their clients. There are several different clinical interventions that have found to be successful for survivors of suicide including CBT-SP, DBT, Psychoeducation, Acceptance Therapy, and Support Group (American Foundation for Suicide Prevention, 1987). Being able to effectively navigate the survivor and their story will play a crucial role in creating the most appropriate and effective treatment plan for the client's success. As a reminder, this healing process is not linear, it is common to have pitfalls in the journey of moving forward after an attempt, but using these skills and continuing education to learn more about the client and how to move forward in this journey will aid in greater rapport building and intervention skills.

\*References on Page 12

## Some Resources for Survivors of Suicide Attempts Should be Considered for Clients

988 - National Suicide Prevention Hotline

Crisis Text Line

American Foundation for Suicide Prevention:

<https://mhasefl.org/florida-initiative-for-suicide-prevention/>

<https://suicidelos.org/>

<https://healingaftersuicide.net>

<https://www.sfsuicide.org/>

<https://www.samaritanssoco.org/>

# HEALING IS NOT *LINEAR*



# Postventions for Black American Suicide Survivors

By: Nakiya Cortijo, BA

Suicide is a topic that is avoided in Black American families and is often stigmatized as a not “black thing.” This is most likely due to the higher prevalence in the white community (Kaslow, et al., 2009). Not only is this topic frequently avoided in Black families, but it was also not considered an important area of scientific research due to misconceptions about resilience (Crenshaw, 2023). The reality is that Black Americans do attempt suicide and some die by it as well.

According to the Center for Disease Control and Prevention (2018) suicide is the third leading cause of death for Non-Hispanic Black males ages one to nineteen years old and also the fourth leading cause of death in those who are ages twenty to forty-four years old. For Black Women, the CDC (2018) indicates that suicide is the fifth leading cause of death for those ages one to nineteen years old. These overgeneralizations and biases have sadly led to the lack of research for postvention for Black Americans suicide survivors (Kaslow, et al., 2009).

People who are left behind after a loved one dies by suicide, better known as a suicide survivors, often are left to grieve alone due to feelings of shame, denial and mistrust (Crenshaw, 2023; Barnes 2006). Now that we know that it is possible for a Black person to attempt suicide, the question remains of what are some postvention strategies that can be implemented for suicide survivors?

Despite Black Americans suicide rates increasing, Black Americans are still less likely to seek assistance in mental health support groups or conferences (Barnes, 2006). One postvention that could be used for suicide survivors of Black American is education and awareness. Barnes (2006) states that Black American communities need to talk about the prevention, intervention and risk factors of suicide so suicide survivors can address their experiences without feeling stigmatized.

Due to suicide being a taboo in Black communities, inappropriate shame and blame are two emotions that can arise after a suicide occurs. However, if suicide survivors are able to have conversations about suicide, then this makes it easier for them to appropriately acknowledge their loss and heal. In fact, many Black American families mislabel suicides as accidents due to this taboo because it is hard to register a family member taking their own life (Barnes, 2006). Barnes (2006) also states that for suicide survivors that denied or projected the death, it can cause some to be “extremely overwhelmed” and “out of touch with their feelings” which may lead to “hospitalization[s].” Bringing awareness to suicidal risk factors (e.g. ISPATHWARM) can help the families recognize if there is someone else struggling within themselves and also help them understand that there isn’t just one sole reason for the act.

Whenever religious Black Americans have traumatic issues such as bereavement, they typically reach out to their church, however, some church communities may not be equipped to help suicide survivors with their loss. Religion and spirituality within the church plays a huge role in the Black American community (Murray, n.d.). However, when it comes to suicide, it’s a subject that some churches hold negative views about and may prefer ignore (Crenshaw, 2023). Kaslow and colleagues (2009) indicate that since Black Americans are often hesitant to reach out to mental health professionals, one postvention strategy could be incorporating religious leaders and clergymen. More specifically, they state that these members of the church should received education on what to say, how to recognize bias, reduced stigma, and reduce harmful messaging when working with bereaved family members. Education may also help church communities spot signs of mental distress in their communities to address suicide and the consequences of it within a church setting.

# Postventions for Black American Suicide Survivors

By: Nakiya Cortijo, BA

Some harmful messaging persists in religious communities. In fact, in many religious communities, suicide is often regarded as demonic possession or satanic influence, which demonizes the loved one's mental health problems (Crenshaw, 2015). In other cases, the church may view suicide as an "unpardonable sin" which brings about more shame than healing (Barnes, 2006). Since the church is one of the primary places for Black Americans to seek help, learning more about suicide and having empathy is truly key to allowing the suicide survivors to be able to address their concerns (Barnes, 2006).

Lastly, another main postvention that Black American suicide survivors can implement is community. While getting the church to address mental health is important, it is also important that Black Americans actually seek the help that they need. One Black American mother suicide survivor stated that, "the number of tragedies and losses" that people have within the church with "over 6,000 members" and those people typically "do not show up for support groups that are available... at our church." Due to Black Americans denying their mental health experiences and suppressing it, many Black American suicide survivors have to go "outside of their community" to find help. In fact, when a group of 19 members responded to the question if there is a nearby suicide support group, 16 responded there is "none in my community" and 3 mentioned "yes, but all white" which further shows the disparity of Black Americans failing to recognize that suicide as an important topic in their community compared to gang violence, gun control, and drug abuse. If Black Americans received more community support encouraging them to seek out mental health professionals or start support groups, then there would be less isolation and silence within their families and more internal communal healing.

## Resources

**Black Emotional and Mental Health Collective (BEAM):** <https://beam.community/>

**Black Mental Health Alliance:** <https://blackmentalhealth.com/>

**Black Men Heal:** <https://blackmenheal.org/>

**Therapy for Black Girls:** <https://therapyforblackgirls.com/>

**The Steve Fund:** <https://stevelfund.org/>

**Black Mental Wellness:** <https://www.blackmentalwellness.com/>

Visit **PsychologyToday** to view a directory of Black mental health providers in Florida: <https://www.psychologytoday.com/us/therapists/florida?category=african-american>

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# SUICIDE & VIOLENCE PREVENTION RESOURCES

## **Center for Student Counseling and Well-Being**

954-424-6911 (available 24/7)

[www.nova.edu/healthcare/student-services/student-counseling.html](http://www.nova.edu/healthcare/student-services/student-counseling.html)

## **NSU Wellness**

(mental health services for NSU employees)

1-877-398-5816; TTY: 800-338-2039

[www.nova.edu/hr/index.html](http://www.nova.edu/hr/index.html)

## **National Suicide Prevention Lifeline**

1-800-273-TALK (8255) or 1-800-SUICIDE

[www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org)

Veterans: Press “1” or Text 838255 Chat:

[www.suicidepreventionlifeline.org/chat](http://www.suicidepreventionlifeline.org/chat)

TTY: 1-800-799-4889

## **Crisis Text Line**

Text: “Home” to 741741

Mobile Crisis Response Teams (for on-site crisis assessment)

Broward (Henderson): 954-463-0911

Palm Beach: North: 561-383-5777

South: 561-637-2102

Miami-Dade (Miami Behavioral): 305-774-3627

## **Broward 2-1-1 Help Line**

2-1-1 or 954-537-0211

[211-broward.org](http://211-broward.org) Chat:

<https://secure5.revation.com/211FirstCallforHelp/contact.html>

## **Palm Beach 2-1-1 Help Line**

2-1-1 or 561-383-1111 or [211Palmbeach.org](http://211Palmbeach.org)

## **Jewish Community Services of South Florida**

305-358-HELP (4357); 305-644-9449 (TTY)

[www.jcsfl.org/programs/contact-center/](http://www.jcsfl.org/programs/contact-center/)

## **Substance Abuse and Mental Health Services Administration (SAMHSA) Treatment Locators**

[www.samhsa.gov/find-help](http://www.samhsa.gov/find-help)

## **The Jed Foundation (JED)**

[www.jedfoundation.org](http://www.jedfoundation.org)

## **Suicide Prevention Resource Center**

[www.sprc.org](http://www.sprc.org)

## **Suicide Awareness Voices of Education**

[www.save.org](http://www.save.org)

## **The Depression Center**

[www.depressioncenter.net](http://www.depressioncenter.net)

## **Yellow Ribbon International**

[www.yellowribbon.org](http://www.yellowribbon.org)

## **Florida Initiative for Suicide Prevention**

[www.fisponline.org](http://www.fisponline.org)

## **Florida Suicide Prevention Coalition**

[www.floridasuicideprevention.org](http://www.floridasuicideprevention.org)

# SUICIDE & VIOLENCE PREVENTION RESOURCES

**National Center for Injury Prevention and Control**  
[www.cdc.gov/ncipc/dvp/suicide](http://www.cdc.gov/ncipc/dvp/suicide)

**American Association of Suicidology**  
[www.suicidology.org](http://www.suicidology.org)

**American Association for Suicide Prevention**  
[www.afsp.org](http://www.afsp.org)

**Florida Department of Children and Families:  
Suicide Prevention**  
[www.myflfamilies.com/service-programs/mental-health/suicide-prevention](http://www.myflfamilies.com/service-programs/mental-health/suicide-prevention)

## SVP NEW OFFICE

SVP is very excited to share that we now have an office.  
We are located in Maltz room 1071E.  
Come stop by and say hi!

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“For me, suicide prevention is helping to create lives that are worth  
living.”  
-Craig Bryan