

Survivors After Suicide

YOUR PATH TOWARD HEALING

A Program of Didi Hirsch Community Mental Health Center • January/February/March 2008 • Volume 21, No. 1 • Published Quarterly

Veterans' Mental Health

Kita S. Curry, Ph.D., President/CEO and Andrew E Rubin, Board Chair

In 1932 at the peak of the Great Depression, more than 20,000 unemployed World War I veterans and their families converged on the Capitol to demand the benefits that the federal government had promised them. Several months later, their hopes and their makeshift tent city were destroyed when the U.S. Army attacked them with tanks, cavalry and drawn bayonets.

Since then, our vets haven't fared much better. One out of three homeless men in the U.S. is a veteran—mainly from the Vietnam War. About 75% of them suffer from mental disorders and/or alcoholism and addiction. Most tragically, after surviving war, veterans are about twice as likely to take their lives as non-veterans. Angelenos certainly know their plight. More homeless veterans live in Los Angeles County than anywhere in the nation.

Until recently, it seemed that we would repeat history in our treatment of veterans returning from Afghanistan and Iraq. Luckily, the momentum created by the public outcry over the condition of VA hospitals and the long waits for mental health treatment prompted a commitment to change. This year the Veterans Health Administration (VHA) updated its 2004 Comprehensive Mental Health Strategic Plan with an expectation that certain recommendations be implemented by August 1, 2007. For example:

- Veterans requesting help must receive an initial mental health or substance abuse evaluation within 24 hours
- Services must be available within a maximum of 14 days
- Staff must follow up with mental health and substance abuse patients who miss appointments
- Services must be available at least one evening per week
- Emergency rooms must have mental health coverage 24 hours a day

Better yet, change truly is occurring. The VA has begun contracting with community mental health centers where it lacks capacity; veterans and their families can access anonymous online mental health screenings and referrals; the VA is linked with the National Center for Post-Traumatic Stress Disorder; and a 24-hour suicide crisis line for veterans was launched in August.

But the question remains whether a system that is so understaffed can possibly change quickly enough. There are only 1,400 VA clinics in the U.S. In contrast, to date more than one and half million men and women have served in Iraq alone. More than 30,000 have been wounded, and this number excludes thousands ore with "invisible" psychological wounds.

Continued on page 7

Teen Suicide Prevention Reviewed

By Elaine Leader, Ph.D., Executive Director, TEEN LINE

The subject of teen suicide is intensely moving and stirs up a great deal of feeling in all who contemplate this issue.

I am moved by young people who write poems and essays about their struggle with suicidal thoughts, examine their own process and then extrapolate to the larger picture of teen suicide. When speaking about this topic, I always find time to read one or more of these poems or writings. They reflect what we read in our papers, hear on the news, and give insight to the inner turmoil of troubled youth.

While reviewing a school shooting in

San Diego County, I looked beyond the horror to examine the underlying problems that led to such disturbing events. We are all familiar with the saying, "An ounce of prevention is worth a pound of cure." That has been our philosophy at TEEN LINE since we started our teen-to-teen hotline nearly 28 years ago. What began as a helpline staffed by trained teens has evolved into much more. TEEN LINE is now a suicide prevention line and mental health service. Additionally, we provide community outreach through educational publications and videos, and consult with schools, youth programs, law enforcement and the media.

For example, I received a call from the principal of a small parochial school in Central Los Angeles. A teacher had found a note written by a student threatening to kill herself and another

Continued on page 6

Save the Date!

May 2, 2008
ERASING THE STIGMA
LEADERSHIP AWARDS

See Calendar of Events on page 2

Survivors After Suicide (SAS) helps people resolve their grief and pain in their own personal way, and helps them move forward in their lives, positively and productively.



“To every thing there is a season...”

By Rick Mogil, SAS Coordinator

Rick Mogil

Another season has passed and we have survived. And, if you will excuse my literary license, it was a time to weep, a time to mourn, a time to rend and a time to wallow (hey, I said I was taking literary license), all the things we are wont to do. There have been a lot of reminders of what our lives have become without our loved one. But we *have* survived and there is a new year awaiting us.

We are entering a time of new beginnings and renewal. We can use this time to heal, to laugh and dance, to embrace and to love. We can look forward with anticipation, or backward with regret and remorse. We can look up towards the light or down into the darkest pit. It is our choice.

Maybe, if we gather enough stones together (family, friends and sweet memories), this year will become brighter, more meaningful and well lived.

Peace and Love,
Rick

Lifekeepers Memory Quilt

Our quilts are displayed at national meetings, suicide-related conferences and other events. All 50 states have come together in this joint effort to educate the world about the need to reduce the incidence of suicide. You can share your pictures and sentiments by dedicating a square in the Lifekeepers Memory Quilt, offering the image of your loved one. A \$20 fee covers the cost of material, labor and postage necessary to create your visual tribute. You will receive a cotton square and instructions on how to proceed.

Yes, I want to create a quilt square to honor:

Send the material and instructions to me:

Name: _____

Address: _____

Phone Number(s): _____

E-mail: _____

Enclosed is my \$20 check or money order made out to Mary Halligan to cover the cost of material, labor and postage.

Mail to:

Mary Halligan, 21422 Grant Avenue, Torrance, CA 90503
or call Mary at (310) 316-4392 for information

Calendar of Events

41st Annual Conference

American Association of Suicidology

April 16-19, 2008

Boston Park Plaza Hotel, Boston, MA

For more information, visit suicidology.org

AAS-SPAN USA 3rd Healing After Suicide Conference

“Twenty Years of Sharing, Hope and Healing”

April 19, 2008

For more information, visit www.suicidology.org

Erasing the Stigma Leadership Awards

Didi Hirsch Community Mental Health Center

May 2, 2008

The Beverly Hilton Hotel

For more information, call (310) 659-5517.

Congratulations!

We congratulate our Suicide Prevention Center, which was recently recognized for its pioneering suicide hotline services in the United States with the inaugural lifetime achievement award given by the National Suicide Prevention Lifeline and the Substance Abuse and Mental Health Services Administration.

SUBMIT ARTICLES TO THE NEWSLETTER

Each of us have moments of insight, clarity of events, outbursts of emotion, obstacles faced, milestones passed, etc. Sharing these moments can help us and others continue to process our grief and to hold hope. Sharing them helps connect us and build community. We invite you to submit your moments to the SAS Newsletter by sending them to Marilyn Nobori at SASNews@sbcglobal.net.

A Good Experience

By Nancy Morrisey

This year was the first year I attended the survivor's holiday dinner. My brother Scott died March 1, 2006. It was a complicated death. He was my little brother after all. We were each other's support all our lives, but in the last year we had barely spoken. My life was really busy and complicated at the time. I just wasn't able to really deal with his death. It wasn't until February of 2007 when I got into a survivor group that I finally began to deal with it.

In this last month, I realized I had inadvertently assumed that my brother's death only affected me and neglected to work on his death with my children – my daughter at home, and my son who had already moved out. I realized, while attending the annual survivor workshop in November, that they also needed to talk about Scott's death. This had happened to them too, and so, when the holiday dinner came up, I asked my daughter to come with me.

Now, she's a tough one, this daughter of mine. She doesn't show a lot of emotion and when I asked her if she wanted to come, she didn't really want to. But she did, along with my mom, which was nice. I didn't tell her the real reason I wanted her to come - that I wanted her to see that suicide happens in all kinds of families. I wanted her to see that there were "normal," "regular" people that had experienced what we had experienced. We were not "freaks." I wanted her to see and experience the fact that the people that were there that night were the same people she might meet anywhere. Our experience, while sad and heartbreaking, was unfortunately not unique. It can happen in any family.

It turned out to be a good experience for us. I heard from my son a few days later. He told me that his sister called him and told him about the night. She also told him that she really loved him and that she wanted him to know that she was always there for him no matter what.

So, it was a good night for my family. It was a night shared with fellow survivors, a night of memories of Scott, and a night that served as a gentle reminder to my children of the significance of their sibling bond.

Light at the End of the Tunnel

By Wila Chunbomrung

It was my first time at the SAS Winter Potluck. In fact, it was my first time attending SAS support group sessions back in February and first time attending the AFSP Survivor's Conference in November. There have been a lot of "first time" events for me this past year since my brother's suicide a little over a year ago.

Being at the Winter Potluck surrounded by so many survivors helped me to realize that I wasn't the only one suffering from such a tragic and senseless loss. There was so much warmth and kindness in the room despite the underlying sadness. Strangers opened their arms and gave comfort to those in need. The link that brought us all together, the shared sadness, has brought strangers together to forge new friendships.

I had expected to be sad and was prepared for it, but what I had not foreseen was the hope I felt when hearing from survivors, who had lost their loved ones many years earlier, doing well, coping with their pain and memories. As these "veteran" survivors told their stories, I began to gain more strength from their comforting words. I also recalled my aunt's words saying that my brother is now in a better place, a place that has no pain, and that he is no longer suffering. These wise words came back to me that night, and combined with the hope from other survivors, I did not cry as I had expected to, nor felt as forlorn as before. If other people can survive their loss and move on with their lives, so can I. There is light at the end of the tunnel.

Contributions

November 1, 2007 to January 31, 2008
A million thanks for your generosity!

IN HONOR OF

Jeffrey, from Cheryl Tabellion
Mark Brenner's 60th birthday, from
Maggie and Rick Mogil
Helen Glick's 90th birthday, from Anita
and Burt Levinson
Dr. Nina J. Gutin, from Jane and Tim
Sanders

IN MEMORY OF

Chuck Anderson, from Linda Anderson

Laura Roanne Cole, from Barbara and
Melvin Cole

Dean M. Jacobsen, from Patricia
Simpson

Barbara Kearns, from Anne Gibson-Lott
Tim Kearns, from Anne Gibson-Lott
Deborah Purmort, from Marilyn Peppin

Survivors After Suicide is privately funded by generous contributions from individual donors, proceeds from the Alive & Running for Suicide Prevention 5K/10K, and grants from private foundations and corporations such as the B.C. McCabe Foundation and the Irving and Barbara C. Gutin Charitable Fund of the New Hampshire Charitable Foundation.

How To Volunteer

We always need people to share their energy and talents!

- Volunteers for SAS may co-facilitate support groups, offer telephone support counseling, help with filing, plan events, etc. Call Rick Mogil at (310) 895-2326.
- Volunteering as a counselor for the Suicide Prevention Center's Crisis Line involves seven Saturdays of training and a minimum commitment of one year (one weekly four-hour shift). Call Dave Smith at (310) 895-2325.

Words that Comfort, Words that Heal

Survivors were invited to share words that brought them comfort and healing at the Holiday Potluck. Here is a sampling.

SHARED AND WRITTEN BY JOSIE SHAHABI (FROM HER BOOK *POEMS FROM A GRIEVING HEART*)

A long, long time ago
There was a young man
Who deeply touched my heart
He went away - gone
And my heart does not feel
Empty - now

I can feel his presence
Though he's gone away
I have shed many tears
He's been gone
All this time - so many years
I think of him, I love him still

When I saw him last
He told me that he loved me
That he knew I loved him too
But he couldn't stay around
The time had come
For him to go

I know that -
I wish him happiness and joy
And all my love goes with him -
I know one day we'll meet again
And all of this will be put behind
Tell him - that I love him still

As I listen to these songs
I think about this young man
When he was here
Once, a long - long time ago
And I feel this pressure
A hurt - in my heart
I still miss him so

If he were here
I would tell him -
How much I loved him
How much I love him, even now
How I wish, that he were here
But he left, a long
Long time ago
And I don't think
He's coming back

If you see him first, before I do
Tell him - that when he left
A part of me, went with him
Yes, I lost a part of me -
And not a day goes by
That I don't think of him
Tell him - that I miss him so

Tell him if you see him
Peace he has at last

Once, a long - time ago
I knew this young man
And still, after all this time
I feel a choking of a kind
Sadness - pain - sorrow
In the deep of me - many tears
He's gone - no long is he here
He left-----
A long, long time ago -

Far into the distance
I can still see his face

SHARED BY MARY HALLIGAN

i carry your heart with me

i carry your heart with me (i
carry it in my heart) i am never
without it (anywhere i go you go,
my dear; and whatever is done by
only me is your doing, my darling)

i fear no fate (for you are my fate,
my sweet) i want no world (for
beautiful you are my world, my
true) and it's you are whatever a
moon has always meant and
whatever a sun will always sing is
you

here is the deepest secret nobody
knows (here is the root of the
root and the bud of the bud and
the sky of the sky of a tree called
life; which grows higher than the
soul can hope or mind can hide)
and this is the wonder that's
keeping the stars apart

i carry your heart (i carry my
heart)

- ee cummings

SHARED BY LOIS BLOOM

I am standing on the seashore. A
ship within my sight spreads her
white sails to the morning breeze
and starts for the blue ocean.
She is an object of beauty and
strength. I stand and watch until
she's gone from my sight...

The someone at my side says,
"There she's gone."

Gone where, I wonder! Gone
from my sight . . she is just as
large in mast and hull and spar as
she was when she left my sight.
Would I forget her beauty and
strength - never!

And just at the moment when
someone at my side says,

"There she's gone"...Other eyes see
her coming ...and other voices
shout...

"There she comes" ...

Yes, she's gone from my sight
but within sight of others, all
intact with her beauty and
strength!

Life is Eternal

- Anonymous

SHARED AND WRITTEN BY
MONICA HOWLAND

Destiny

I'm in love with someone who's died.

Even in death he can not hide.

He's my angel in heaven.

And I'm his girl twenty four seven.

Forever he'll be in my heart.

And we'll never be apart.

I thank God for eternity.

And that he'll be waiting for me.

SHARED AND WRITTEN BY LEAH
BRYANT

As flowers taste the morning dew,
my love for my brother always
remains true.

And though it hurts that we had to
part, his spirit remains forever in my
heart.

SHARED AND WRITTEN BY
ERIKA FABIAN

On his latest KCET appearance, Wayne Dyer said, "If you change your thinking, you can change your life." He used clever word play - he said that "you can be nowhere, or you can be 'now here'."

I've been so hurt by the suicide of my "significant other" three years ago, that I have shut down emotionally. I work, I see friends, but I have not even tried to have a new "significant" relationship in my life.

When I heard these phrases - nowhere or now here - it struck me that I could spend the rest of my life in my emotional vacuum or, by some miraculous way, I could change my way of thinking and change my life - crawl out of nowhere and accept that I am "now here".

In the meantime, I decided to bring these words to you, for there might be someone with whom these words will resonate as they did with me, nudging me to find some way to leave the land of nowhere and be "now here."

As I finished writing, these thoughts formed themselves into a poem, and I'd like to finish with that...

Nowhere or Now Here

Nowhere is a land of sorrow
Where I've lived for no tomorrow,
Roaming paths of yesterday
To no ally.

Now Here is a land of today
Where I cautiously foray
Watching my way
Hoping to stay.

SHARED BY STAN LELEWER

When We Remember Them

Months or years may have passed, yet we feel near to them. Our hearts yearn for them. Though the bitter grief has softened, a duller pain abides, for the place where once they stood is empty now forever. The links of life are broken. But the links of love and longing cannot break.

Their souls are bound up in ours forever.

We see them now with the eye of memory, their faults forgiven, their virtues grown larger. So does goodness live, and weakness fade from sight. We remember them with gratitude and bless their names. Their memory is a blessing forever...

In the rising of the sun and in its going down, we remember them.

In the blowing of the wind and in the chill of winter, we remember them.

At the opening of buds and in the rebirth of spring, we remember them.

In the blueness of the sky and in the warmth of summer, we remember them.

In the rustling of leaves and in the beauty of autumn, we remember them.

In the beginning of the year and when it ends, we remember them.

When we are weary and in need of strength, we remember them.

When we are lost and sick at heart, we remember them.

When we have joys we yearn to share, we remember them.

So long as we live, they too shall live, for they are now a part of us, as we remember them.

From "Gates of Prayer," Prayerbook of Reform Judaism

SHARED BY NINA GUTIN

Are you a Grief Victim or a Grief Survivor?

A victim is a state of mind dictated by others. A survivor dictates their own state of mind.

A victim fears the moments of grief. A survivor welcomes those moments.

A victim knows about feeling down and tries to stay up. A survivor knows feeling down is okay.

A victim tries hard to hide the tears. A survivor never leaves home without kleenex.

A victim struggles to maintain a state of normalcy. A survivor knows normal has changed.

A victim gets caught in isolation. A survivor reaches out when they need to.

A victim is afraid they in time will forget. A survivor knows they never will.

A victim sometimes feels guilt laughing. A survivor laughs through tears.

A victim tries at times to block out the memories. A survivor embraces memories of all kinds.

A victim wants someone to cure their grief. A survivor just wants someone to share their journey.

A victim struggles to get over their grief. A survivor fights to get through it.

A victim tries to get on with their life. A survivor lives their life knowing nothing will ever be the same.

A victim says, "Oh, I'm okay" - then secretly cries. A survivor openly cries - and says, "I'm okay."

- Author unknown

Thank you: The Holiday Potluck found over 50 people sharing a wonderful meal and program. Thank you to Rachel Zients-Schinderman, Eileen Douglas, Nina Gutin, Stan Lelewer, Josie Shahabi, Erika Fabian, Mary Brandis, and Sandra Aden for sharing words of comfort and healing. Special thanks to Mary Halligan and Lois Bloom for a lovely closing ceremony, and thanks also to Patricia Serrano, Debbie Pikul, Maggie Mogil, and all who helped with set up, clean up, programs, centerpieces - all that made this a meaningful evening.

student. I advised the principal to take immediate steps to get the girl who had written the note into professional care and to inform the threatened student's parents as well as local law enforcement. More importantly, I asked her to begin talking with all members of the school community – teachers, administrators, students and parents. The following day, I went to the school accompanied by one of our suicide prevention outreach youth panelists.

Our job was to educate the faculty about the warning signs of teen suicide and how to intervene. The teachers listened attentively as she told her story. At 15, she had made a suicide attempt. She described how she took the pills in school after telling her best friend what she planned to do. One of the most powerful components of this workshop was having the teachers talk openly of their experiences with suicide during their own youth. This critical component of our training encourages identification with and empathy towards the suicidal youngster.

A few days later, the TEEN LINE outreach coordinator and two of our teen volunteers facilitated a teen suicide prevention workshop for the students in that school. As has occurred in previous interventions of this nature, we were able to identify two other students who were also suicidal. A final component of the intervention was a series of parent meetings.

This kind of collaboration between a school group (including faculty, students, and family members) and a community agency exemplifies an optimal teen suicide prevention effort. Our outreach was originally designed to inform students about the hotline as a resource to talk about problems and concerns. It is also an important way to recruit teens interested in being involved in meaningful community service. To date, more than 1,400 teens have taken advantage of this opportunity to train to become teen line listeners. Each year, we serve 10,000 teens through our hotline, email and live chat services while we connect with more than 35,000 through presentations at school and youth groups.

Over time, we noticed that calls to the line were becoming more serious. The numbers of depressed and suicidal callers increased, as did the calls from self-destructive teens who were cutting themselves or had eating disorders.

At the same time, we were also hearing more frequently from other troubled youth – gang members, runaways, rape and incest survivors, pregnant teens, HIV-infected youth, gay, lesbian, bisexual and transgender teens, and others experiencing the myriad issues associated with growing up in a society rife with stress. Yet, despite the rise in very serious calls, the majority deal primarily with relationship issues. They need to be heard. They need help to explore options, clarify concerns and to problem-solve.

Too often the public perceives teenagers as rebellious, troubled, bad, acting out and violent. The fact is that the majority of adolescents survive the teen years without difficulty. Sadly, we do not hear much about youth who are doing well, or of those doing something to make their world a better place.

Let me tell you about a young woman who is doing just that. She represents all that is positive in our young people today. Her name is "Jennie." I met Jennie several years ago when I was putting together a panel to speak at the TEEN LINE Annual Food For Thought Luncheon. Each year, the luncheon is focused on a topic relevant to youth. That year, we chose to address the issue of "Growing Up Gay". We honored Ellen Degeneres and her mother Betty, but the real impact came from the four gay, lesbian, bisexual and transgender youth panelists who told their stories to an audience of five hundred. The most remarkable feature was the quality of their presentations. They were proud of who they were. They had overcome adversity, harassments, and familial rejection. There was not a dry eye in the house.

I had not known until I interviewed Jennie that, in fact, she had been a caller to TEEN LINE. Jennie spoke openly about struggling with coming to terms with her sexuality, and the two

years during which she wanted to die to end the pain she was enduring. Finally, at age 15 she called TEEN LINE and, as a result, found understanding and acceptance. This call helped her to find the support she did not previously have.

Jennie's experience highlighted how instrumental it is for the depressed person to have an empathic listener – someone who will not judge them, nor tell them what to do, but who will listen empathically, with care and concern and, most importantly, with patience and the willingness to just "be there."

This young woman is one of many dedicated young people who have given selflessly to educate their peers and the adults who work with them. They enrich and illuminate the important and sometimes tragic issues that our youth encounter. Most importantly, they are the human face that enlighten and illustrate these concerns. Finally, they prick the conscience of adults and spur us to make changes so that other young people will be heard.

TEEN LINE
P.O. BOX 48750
LOS ANGELES, CA 90048
310-423-3401
drleader@earthlink.net
www.teenlineonline.org

Veterans' Mental Health

Continued from page 1

It also appears that certain aspects of this war may cause even greater psychological harm. Two factors that tend to increase vulnerability to traumas involving extreme danger and harm are whether other humans are the cause (versus natural disasters) and the intensity, frequency and length of one's exposure to the traumatic event. This is largely a ground war fought among civilians, and a study done by *The New England Journal of Medicine* (2004) found that 71% to 86% of the soldiers and Marines they surveyed had been in at least one firefight in Iraq, with the median number totaling five. In addition: 1) Compared to previous wars, far more soldiers are surviving major injuries that leave them with extreme physical, personal and psychological challenges. 2) About 150,000 people serving in Iraq have suffered head injuries. 3) Historically, suicide rates among troops on active duty have been lower than the national average, but the unanticipated assignment to war zones and unexpected extensions of their tours seem to be causing unusually high suicide rates among National Guard members while serving and a higher incidence of mental health disorders after discharge than enlisted personnel.

The true magnitude of mental health disorders among those who serve in the Iraq War is sure to be underestimated given the stigma associated with seeking treatment in general and the particularly negative impact it can have upon a soldier's military career. But the data we have so far is disturbing enough:

- Nearly one third of U.S. military personnel stationed in Iraq seek mental health services after their return.
- About 20% of troops returning from Iraq have post-traumatic stress disorder (PTSD), which also increases the risk of alcoholism and substance abuse.
- Major depression and generalized anxiety disorders are common among returning veterans.

- Because of the impact of rocket blasts and explosions, at least 20,000 veterans who were not classified as wounded manifest symptoms associated with traumatic brain injury such as memory problems, trouble concentrating, anxiety, emotional lability and depression.

If nearly one third of 1.5 million veterans of the Iraq War are seeking mental health services, it means that almost 500,000 have asked for help so far. How many more did not ask? How many more will ask for help in the future? We need to make sure we don't end up using police sweeps to manage a new generation of homeless veterans. If you or someone you know needs help, some resources for veterans and their families are listed below. If the VA doesn't live up to its promises, contact your local Congressional representative or *Los Angeles Times* columnist and social conscience Steve Lopez (steve.lopez@latimes.com) and let them know our nation has let you down.

RESOURCES

- ☐ 24-hour Suicide Prevention Line for Veterans and their Families | 800-273-TALK (800-273-8255)
- ☐ National Center for PTSD | 802-296-6300
www.ncptsd.va.gov
- ☐ Anonymous Mental Health Screening and Referrals for Vets and Families | 877-877-3647
www.MilitaryMentalHealth.org
- ☐ Free Sesame Street DVD | Talk, Listen, Connect: Helping Families During Military Deployment | 800-342-9647
www.sesameworkshop.org/tlc

Resources for Survivors and Suicide Prevention

HELP LINES

Didi Hirsch Community Mental Health Center's Suicide Prevention Crisis Line

Los Angeles and Orange Counties:
(877) 7-CRISIS or (877) 727-4747

National Suicide Prevention Lifeline:

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

TEEN LINE: Suicide hotline for teens staffed by trained teens 6-10 p.m.
(800) TLC-TEEN

Trevor Helpline: Suicide hotline for gay, lesbian, bisexual, transgender or questioning youth
(800) 850-8078

RESOURCES

For full resource list go to www.didihirsch.org

Didi Hirsch Community Mental Health Center: Nine sites throughout Los Angeles provide mental health care for those with severe mental illness and little money
(310) 390-6612
www.didihirsch.org

For survivors, click "Suicide Prevention Center" then click on the Survivors After Suicide program page for the link to all Didi Hirsch publications; current and past issues of the SAS newsletter are available as pdf's through this site. There is also additional information about SAS.

SAS Group Meetings

Everyone who has completed an eight-week Survivors After Suicide Support Group is invited to attend scheduled monthly meetings at any of the locations listed below. There is no charge.

MONTHLY DROP-IN GROUPS

San Gabriel Valley: San Marino United Church of Christ, 2560 Huntington Drive, San Marino. Meetings are held in the Choir Room the last Tuesday of each month from 7:00 - 8:30 p.m. *Meeting dates: Feb. 26, Mar. 25, Apr. 29.*

San Fernando Valley: Beginning in February at Sherman Oaks Hospital 4929 Van Nuys Blvd, Sherman Oaks. Meetings are in the Doctor's Dinning Room. Both on the 2nd Saturday of each month from 11:30 a.m. - 1:00 p.m. *Meeting dates: Mar. 8, Apr. 12.*

South Bay: Little Company of Mary Hospital, 4101 Torrance Blvd., Torrance, in the Center for Health Education Bldg. (located behind the hospital). Meets on the 3rd Monday of each month from 7:30 - 9:00 p.m. Meetings will convene in March. *Meeting dates: Mar. 17, Apr. 21.*

West L.A.: Didi Hirsch Culver-Palms Center, 11133 Washington Blvd., Culver City. Meets on the 3rd Wednesday of each month from 7:00 - 8:30 p.m. *Meeting dates: Mar. 19, Apr. 16.*

EIGHT-WEEK GROUPS

For 2008, our eight-week support groups for those who have lost loved ones to suicide will take place on the following schedule:

Group 2: Begins mid-April

Groups meet once a week for an hour and a half for eight consecutive weeks, with locations in Sherman Oaks, Culver City, Redondo Beach, San Gabriel and Montrose. To be placed into a group, please call Rick Mogil at (310) 895-2326.

Didi Hirsch Community Mental Health Center
4760 South Sepulveda Boulevard
Culver City, California 90230

SURVIVORS AFTER SUICIDE NEWSLETTER

A quarterly publication of Survivors After Suicide (providing support groups for those who have lost a loved one to suicide), a program of Didi Hirsch Community Mental Health Center.

SAS Program Number: (310) 895-2326

Crisis Line Number: (877) 7-CRISIS (Toll-free in LA and Orange Counties).

Editor: Marilyn Nobori | SASNews@sbcglobal.net

Editorial Board: Lois Bloom; Samuel C. Bloom; Norman Farberow, Ph.D.; Rick Mogil; Lyn Morris, LMFT

Designer: Joanne Uy

Special thanks to Didi Hirsch's Development Department.

REPRINT POLICY

You are welcome to reprint material from our newsletter if you are a nonprofit support organization that produces periodicals. We do require the item to include the author's name and title and the following:

Reprinted with permission from the Survivors After Suicide newsletter, a publication of Didi Hirsch Community Mental Health Center: Suicide Prevention Center, 4760 S. Sepulveda Blvd., Culver City, CA 90230.

Also include the issue date and year the article appeared. Kindly send a copy of any reprints for our authors to Editor Marilyn Nobori at her e-mail address above.

Thank you.

View this newsletter online at www.didihirsch.org.
Click on the "News" link, then the "Publications" page
to view the list of previous newsletters.

Non-profit
Organization
U.S. Postage
PAID
Los Angeles, CA
Permit # 509