

To: Committee Secretary □

Senate Standing Committee on Community - Senate Inquiry into Suicide in Australia

Since first attempting to take my own life as a teenager, suicide ideation has been an integral aspect of my being, one that culminated in subsequent suicide attempt, several self-harming episodes and the experience and grief of a brother who 'successfully' suicided. His death in 2002 brought to the surface a deep underlying sense of failure that almost concluded in another attempt upon my own life. Because of my experiences I am well aware that discussing the issue of suicide can be a difficult, challenging and an emotional task for all those involved or affected.

In March 2009 having been awarded an APA Scholarship through Southern Cross University, I began an creative based PhD project that is looking at the personal, social and cultural ramifications of suicide. Since deciding to choose life over death in 2003 I have used my experience to create numerous artworks that began as part of a cathartic process. In a sense I have embarked on a quest to understand suicidality from both a deeply personal perspective and one that haunts the wider community also. I use my art-practice as a vehicle for expressing what words often fail to do and in ways that allow me to communicate what is happening deep within my psyche, to articulate emotions that for me can be difficult when using verbal language. The introspective nature inherent within practice based research projects such as mine provide opportunities for ideas and thoughts to become transformed into concrete expressions of the inner workings of the artist and thus allows for a sense of understanding to occur.

Through my research I have discovered that there is an enormous gulf in peoples perceptions about suicide. At one extreme there is the view that suicide is the ultimate act of free will and as such is a selfish act, whilst at the other end of the spectrum there is the belief that suicide and mental illness are the result of being possessed by satanic demons. These views are not from crackpots but the opinions of prominent leaders within my own local rural community. Between these two extremes there is a wide range of opinion that appears to depend on whether an individual has in some way been affected by suicide.

Although as a community we tend to focus on the numbers who die from suicide we know that there are at least twenty times that number attempting to take their own lives and as such, there are two types of suicide survivors – those bereaved by it and those who have lived through the experience. There is much research and support for those bereaved by suicide and it goes without saying that much more also needs to be done. For those left behind suicide is a catastrophic event for which few are prepared and is life altering. And for those of us who have tried to take our own lives the closet in which we reside is a difficult one to open but it is an issue far too important to ignore – more of us need to be encouraged to share our stories, our narratives and our experience. How else are we to understand the face of suicide?

*Nearing the end of my career in suicidology, I think I can now say what has been on my mind in as few as five words: Suicide is caused by psychache. Psychache refers to the hurt, anguish, soreness, aching, psychological pain in the psyche, the mind. It is intrinsically psychological - the pain of excessively felt shame, or guilt, or humiliation, or loneliness, or fear, or angst, or dread of growing old, or of dying badly, or whatever. When it occurs, its reality is introspectively undeniable. Suicide occurs when the psychache is deemed by that person to be unbearable. This means that suicide also has to do with different individuals thresholds for enduring psychological pain.*¹

Edwin Shneidman

When I first read Edwin Shneidman's definition of suicide as psychache, I was overwhelmed with emotion because here at last was a person who truly understood my pain and feelings of suicide ideation. I point this out because I have just returned from the International Association of Suicide Prevention held in Montevideo in Uruguay where I listened to many speakers (as well as presenting some of my own work) but only with a handful did I truly feel understood and empathized with the suicidal mind. Much research, to my way of thinking, was on the obvious and a complete waste of time and money.

The stigma surrounding suicide prevents many from speaking openly about their experiences/attempts and the ways in which they have dealt with and come to terms with life – some successfully others not so, yet ours is a unique experience. Suicide can be like a ghost that periodically comes to haunt us, for others it may simply be a single event or a cry for help. What is undeniable is the psychological pain associated with the experience.

Through my art practice I am now able to keep my demons at bay. I have chosen to embrace life and speaking about my experience and artworks has become very much part of an ongoing healing process for both myself and my family. It was also wonderful to hear and speak with Arnoldo Martinez Ramirez from Nicaragua at the IASP conference. It took great courage for him to write his book and share his experience but I believe that is precisely what is required for researchers to encourage and foster. David Webb, another 'survivor', is also an advocate of research into the 'original voice of suicide' or research on first person methodology that needs to be heard and carried out by mainstream researchers so that they have a better understanding of who and why we are. My story and that of Arnoldo's and David's are but three amongst millions.

One of my most recent artworks looked at the WHO statistic that suicide rates worldwide have increased by 60% over the past 50 years. When one looks at the growth in technology, the breakthroughs in science and medicine and the multitude of human achievements during those 50 years, the question begs to be asked – why the dramatic increase in suicide rates? Here in Australia there is much controversy as to the accuracy of numbers of people committing suicide, including those of indigenous Australians and although statistics suggest that numbers are decreasing, I seriously have my doubts although at this stage I have no research to back that perception up.

¹E. Shneidman, *Suicide as Psychache A Clinical Approach to Self Destructive Behavior*, London: Jason Aronson Inc., 1993, pp186-187.

Art-making is a living process that communicates and helps our understanding (Arrows, 2008), of the world about us. It is a process in which the artist expresses thoughts, feelings and emotions through specific use of materials and in the ways in which those materials are handled (Barrett, 2007). The multiplicity of art-based research practices express and communicate human experience through critical interpretation and contextualism in similar ways to storytelling. In my own life, since early childhood, stories have played an important role so it seems only natural that narratives and narrative enquiry have played such a pivotal role in both my research and artistic expression.

My artworks and installations oscillate between analysing and exploring the inner experience of suicide and endeavouring to understand the phenomenon and its implications from a much wider social and cultural perspective through engagement with the imagination. My work seeks to humanise the issues surrounding suicide and to allow for insight to occur through macrocosmic and microcosmic perspectives. In using art to express the *original voice* of suicide, I seek to remind the audience (and myself) that we are more than just a body and a mind, that our humanness/soul/spirit also needs nurtured and (re) considered both in academic research and in daily life.

In an attempt to draw attention to the issue of suicide and help those who have been affected by it (whether directly or as health care professionals) I designed an experiential workshop in conjunction with Dr Erminia Colucci (psychologist and suicidologist) which we ran in April 2009 that focused on the issue. Called *Surviving Suicide – The Art of Introspection* we held them at the University of Melbourne's, Centre for International Mental Health.

Below are comments/feedback from some of the people who attended

“...people have such extraordinary stories and can be so resilient. That overcoming or traveling with and through the desire to die can bring rich life affirming view to living. Being vulnerable together is powerful...”

“We are all different, like the boxes that we made. So is life, everyone has a story behind, no box is a perfect ten, life has its ups and downs, its how you deal with them.”

“Thank you for bridging traditional art making with therapeutic meaning making.”

“That suicidal ideation is more common than I thought! It's healthy to talk about it and explore it.”

“Unsure about saying, ‘it wasn't my time.’ (Said in regard to my own failed attempts at suicide) Does this mean for others they were meant to go??

This last comment above all others got me thinking about the language we use and required me to deeply examine my own religious, spiritual and philosophical beliefs. I am still unsure of my answer but will definitely be more mindful in my use of language in the future.

In conclusion suicide is an incredibly complex issue and those of us who suffer from suicide ideation and who are trying to embrace our everyday lives need to be encouraged to talk about our issues, past, present and future. When my daughter was suffering from what the doctors called clinical depression and literally unable to walk I carried her. I had no thoughts of suicide because she and her mother needed me and I needed to be strong. It was only after she was well again that I was visited by my ghosts and began planning my third attempt at suicide.

There is much discussion on suicide that focuses on the word depression. Suicide and suicide ideation are much more than depression. The word has come to mean anything from sadness and melancholy (which I might add is the state in which I produce my best work) through to suicide. I believe that we need to create life-affirming programs of which suicide prevention is a component rather than simply focusing in on suicide prevention and or depression.

I thank you for your time and apologize for the haste in which this letter was written as I have had some health issues since my return from Uruguay.

I wish the committee well in its endeavor.

Yours sincerely

Mic Eales

References:

Arrows, F., 2008. *The Authentic Dissertation Aalternative ways of knowing, research and representation* Abingdon, Oxon: Routledge.

Barrett, E., 2007. Experiential learning in Practice as Research: Context, Method, Knowledge. *Journal of Visual Art Practice*. Bristol, UK: Intellect, 115-124.

Supporting Information

In 2008 I was invited by Dr Erminia Colucci, a Research Fellow, from University of Melbourne (Centre for International Mental Health) to speak at the 2009 Congress of the World Association of Cultural Psychiatry in Norcia, Italy as part of an arts-based symposium about my research into the personal, social and cultural ramifications of suicide. She also asked if it were possible to exhibit my Honours installation, *too few ladders* as part of the conference. I later applied to the Windmill Trust Scholarship (an award for regional artists) for funding to help me travel and freight my work to Italy and was fortunate to be the 2008 recipient of that award. This became a reality in September 2009.

On 15th May 2009, at the invitation of Dr Colucci I presented a seminar at the Centre for International Health in Melbourne titled, *Imagination Inspiration and Improvisation, a visual arts enquiry into understanding suicide*. In addition Dr Colucci and I ran two experiential workshops on *Surviving Suicide – The Art of Introspection*. Whilst in Melbourne, I was approached by Professor Pranee Liamputtong (PhD) from the School of Public Health, La Trobe University to present a seminar there on my art based research.

On the 22nd May 09, I presented a seminar/workshop on suicide at the 2nd Postvention Conference held in Melbourne after being approached by the conference organizers.

Following on from this I presented a similar seminar/workshop at the 2nd Australasian Narrative Enquiry Conference at the University of New England on the 12th July 2009.

Dr Colucci and Professor Liamputtong have decided to collaborate on a book dealing with artists who have tried to suicide and I have been asked if I would be willing to write a chapter or two and help co-edit the book. An art exhibition will occur in conjunction with the books launch.

Opening of Solo exhibition at nextgallery in Lismore, NSW on 20th July 09 that included my Honours installation and several new works that all deal with the issue of suicide.

Presented *Arts and Suicide: A short documentary on a suicide survivors artwork*, at the XXV World Congress on Suicide Prevention of the International Association for Suicide Prevention held in Montevideo, Uruguay in October 2009. The documentary features film of my Honours work, 'too few ladders', video taken of workshops, stills of various artworks on suicide and includes an interview between Dr Colucci and myself.