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LOOKING BEYOND THE FAÇADE: A WHOLE PERSON PERSPECTIVE OF SUICIDAL IDEATION

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it's a story that begins like others with a boy admissibly happy led a life that was fairly admirable a daily grind that was probable according to a country's statistics, at least from what was observable

for the time being he got to thinking "things might be tolerable", although he was far from invisible it wasn't like he was memorable he may have passed through life unnoticeable had it not been how it came to a close

> it's a story I'd like to say ends like no other but I think it's quite repeatable leaving marks, on lives that are pretty indelible

Looking beyond the façade: a whole person perspective of suicidal ideation Jennifer L. Lapum

he built up such a façade it was truly quite plausible cloaking his feelings and playing his role methodical, with a mask that was *nearly* infallible

although it seems unimaginable how something like this could happen it's sad to say he felt quite discountable and so it seems, he was more than a little breakable

he knew the things he thought were likely incurable not something operable, although probably loved he didn't feel loveable, and things became so flammable he no longer felt viable so he made himself disposable

I composed this commentary based on suicidal ideation stories and encounters with people who had subsequently committed suicide. As reflected in the poem, a person's external representation of self does not always reflect his inner self. I learned early in life that one's façade can obscure the true state of one's inner world. The façade can appear so real that another person may not see through the illusion. When I was sixteen years old a traumatic event occurred that led me to contemplate this.

I didn't have access to a gun. She did. I never thought of killing myself. I guess she had. We were both outwardly happy. I guess she was also inwardly sad, and I—

> had no idea.

There are things from that time that are imprinted on my mind even though it has been twenty-seven years. I recall receiving a message from a teacher to go home at lunch; this was odd because I always went home and I also had never received a message at school from my mom.

My older sister's friend stopped me in the hallway, "did you hear?" "Hear what?" I replied. "Nothing" she said and quickly walked away.

I went out the backdoor and headed up the grassy hill. The beaten trail revealed the dirt path that I had walked hundreds of times before. I felt this pull to turn around, but headed home thinking my grandmother died. When I got home, I only remember the words, "she died." No one was excessively distraught, but they all seemed concerned for me. It wasn't until I went upstairs that I realized who they were talking about. I don't recall crying at that moment. I remember being told that I could stay home this afternoon, but I headed back to school.

I didn't walk the beaten path that my feet knew so well. I don't remember how I got back to school. I just remember going in the front doors instead of my usual entrance at the back. I felt oddly unemotional, maybe stunned and numb. I think I put up a façade that afternoon. I felt such a silence in me even though the halls were packed with students. I didn't mention it to anyone. One of my friends took me aside and asked "are you okay?" "I'm fine." She looked at me with a puzzled face. Strangely, I don't recall ever speaking to her again. I shifted in so many ways from that day forward. It was an experience that consumed me and I put a stunning façade on to disguise what was below the surface. I coiled up for a long time because I couldn't understand why she did it and why I didn't know that she was inwardly sad. Even as I reflect now, I still can't see the warning signs.

I was sixteen when I was told that my friend shot herself in the head. She was the person in my life that I least suspected would commit suicide. Since then, I have asked: Why does suicide happen? Who is at risk? What is my role? How can I fix them? As a nurse, I was drawn to understanding the façades that we create for ourselves and how this should be part of whole person approaches to care.

The memory of this event resurfaced when reading a physician's poignant account of bearing witness to a suicide. As a family medicine resident at the time, Hughes¹ reflection was prompted when listening to a radio show; a husband was recounting his efforts to prevent his wife's suicide attempts by hiding anything she could use to harm herself, yet "he couldn't hide the bridges"¹. Hughes recalled while driving to work, observing the car in front of her pull over and then witnessing a man climb over the railing of a bridge and plunge to his death. While he was not her patient, she wrestled with not being able to fix him or work with

this unknown man by routinely asking her "patients about their mental well-being ... openly, sincerely"¹.

A whole person perspective involves individualized and contextualized approaches to caring for the psychological, emotional and spiritual needs of a person in addition to the physical². By extension, I would propose a whole person perspective to family care involves looking beyond a patient's façade to discover what is occurring within him or her. Akin to Hughes¹, I honour my friend by looking for sadness in people who are outwardly happy – in case, it is an illusion of something, covering up what is below the surface.

REFERENCES

- 1. Hughes L. You can't hide the bridges. Ann Fam Med. 2015;13:181-3. doi: 10.1370/afm.1759.
- Mc Namara H, Boudreau JD. Teaching Whole Person Care in medical school. In: Hutchinson, TA, ed. Whole Person Care. A New Paradigm for the 21st Century. New York: Springer Science + Business Media, LLC; 2011:183-200.