Wisconsin Initiative for Stigma Elimination

**Speaking of Recovery in the Context of Suicide**

Finally! We are talking about living in recovery with mental illness. The focus is on highlighting the hope that exists even for people with the most persistent mental illnesses. We understand that the stigma of mental illness will not lessen until people are exposed to the reality of recovery from a broad spectrum of people living with mental illness.

And, what does this mean for those whose story includes the death of a family member or friend by suicide? How do they talk about the hope of recovery? How does the mental health advocacy community address suicide while working to increase the perspective of recovery? Let’s honestly delve into this important area. Let’s listen to those affected.

**Here are some considerations to help with the conversation:**

Contrary to what most people believe, recovery is possible, it is not a guarantee.

Death by suicide does not negate the recovery experiences of a person with mental illness any more than a death from cancer negates the extra months or years that a person lives after engaging in the recovery practices of chemo, radiation and self nurture.

Not having hope for recovery (stigma) gets in the way of access to recovery.

How can a person talk about hope of recovery as they talk about the loss of a friend or family member to suicide? They can talk about:

- The hope of recovery from the current psychological pain that their loved one had or didn’t have.
- How acceptance of their illness or situation of great psychological pain brought about willingness to seek help. (reduced self-stigma)
- The real experiences of recovery their loved one had and the added time it gave them.
- The pain their loved one experienced and the brave, hard fight he or she fought against it. (tough path to effective medications, access to services, dealing with hard life stressors, etc.)
- What they wished had been available to their loved one to increase their sense of hope. (knowledge of many options, peers who connect with them and share realistic hope, etc.)
- What they wished had been available to their loved one to increase their access to effective services.
- The recovery that people experience who have the same illness/major stressor as their loved one. The vast majority of people with these disorders do not die by suicide.
- Tips for letting people know they are not alone and that they are supported.
- Their desire to highlight recovery options for others through suicide prevention efforts.

One worry about the recovery movement in mental health is that while highlighting the hope for recovery, the reality of the pain and difficult work involved in battling the illness is somehow minimized. Our friends and colleagues who bring the experience of suicide to the table, bring a reality that we must incorporate into our messages to the general public. Trust in the message of recovery will only come as we maintain honesty about mental illness and major life stressors and the diverse and sometimes too brief paths of recovery.