

PODCAST: #1 – SUICIDE



Hi there! I'm Carolyn Spring and welcome to my podcast where I talk about all things trauma. I dig into the nuts and bolts of trauma, how we can recover, what blocks us, and all things neuroscience-y – what actually goes on in the body and brain during and after trauma, especially from the perspective of evolutionary neurobiology. This podcast is for anyone who's experienced trauma, or knows someone who has, which is pretty much everyone. For more podcasts, blogposts, books and training check out my website at carolynspring.com.

Welcome to episode 1 – simply titled 'Suicide'. In this first episode, I'm going to be talking about suicide because that's what trauma has driven me towards and it's the biggest, the most profound impact that trauma can have. So why is this and what can we do about it?

My caveat to start with though is that in reality I don't have any experience at all of suicide itself. Because I'm still alive. And by saying that, I'm not joking or being facetious. I'm saying that I think it's important that we recognise that what we know about suicide is by its very nature limited. And that there may well be a difference between people who go on to kill themselves, and those who engage in suicidal feelings and even actions, but who do not actually end up dead – people like me.

So, although I have a long history of suicidality, and I've talked to a lot of people and I've done tonnes of reading and research, it may be that people who end up killing themselves are in some way qualitatively different from people like me. So, in everything I train on and everything I say, that's my caveat.

What I do have though, is a lot of experience of suicidal feelings. I distinctly remember the first time I was hit by suicidality, even though it was so long ago. It was a Friday afternoon, possibly October or November, and I was, I think, about 15 years old. It

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was a couple of months before I went down with chronic fatigue syndrome or ME as it's also known. As a teenager, I had been super-sporty, very athletic, being involved in absolutely every sport I could, running on a morning, that type of thing - and in the January I went to hockey practice after school as usual, as I did on a Monday. And I came home and fell asleep on the settee before dinner. And I didn't really wake up. Not that day and not really for the next 9 months. I was completely bed-bound, absolutely exhausted, and in a lot of pain. I could only get around in a wheelchair because I was so exhausted. I was like that for about 3 years, all through my GCSE year and my A-levels.

Anyway, it was a couple of months before that happened that there was this day which was in many respects a precursor to that ... it was a Friday afternoon and I was at school in an English class. For some reason I remember the weather - it was threatening rain clouds but not yet any rain. And I remember that because that seemed to mirror my mood. I remember the class because we had been turfed out of the normal English class and we were in the physics laboratory for some reason. It's strange the details you remember. And it was a lesson with my favourite teacher, Miss Barr. But it was on my least favourite aspect of English, which was poetry.

And this dark cloud just seemed to be enveloping me and I felt like I'd fallen down, deep, deep down within myself. I felt utterly bereft and hopeless and empty and despairing. And I didn't engage in that English lesson at all – and that was very unusual for me, because I was a proper geek, I was a model student – but all I could think about in that lesson was how I wanted to die. It's like I got wrapped up in those thoughts and fell down into a chasm deep within myself.

Now, I can't really remember what happened next. I just remember the teacher noticing my black mood and being concerned about me. And I know what was going on for me at that time in my life – it was the accumulation of nearly 15 years of abuse – that was what was driving the depression, the hopelessness and the desire for escape.

And indeed escape, the need to get out, is such a common theme for suicide. You can't really understand suicide unless you understand just how trapped you feel. You're in this place of deep, deep pain, and it feels like there's no way out. It feels like you don't have a future. It feels unbearable, absolutely terrible. Like you're in a tiny little prison cell within your own mind and, as I wrote about at one point, you're being tortured to death by your own emotion. That's how I've described it elsewhere. It's just a place of intolerable suffering.





So, certainly for me it wasn't about a cry for help, it wasn't attention-seeking, I wasn't being melodramatic, which is what we often get accused of. It was the unbearability of it. It was the sense that you're in so much pain that it's intolerable so you have to do *something* about it. But you don't know what. It's like all your options have just closed off. You can't think of any options. And the only option that presents itself to your mind – what your mind gets fixated on – is suicide.

Looking back now, it's very clear that it was a kind of obsessional thinking for me. That my brain got a hold of this idea of suicide as an escape from this intolerable psychic pain and it just kept on obsessing about it. And actually there was some kind of comfort in that obsession. That it gave me some sense of control. So that I could manage the pain while I had the option to kill myself. That actually thinking about suicide reduced the pain. And I think that's what a lot of people don't understand. They think that if you're thinking about suicide it's because you've decided to do it. But, actually, that's not how I experienced it a lot of the time. I would think about suicide, the great escape, and it would actually decrease my distress at some level in the short term and make it a little bit more bearable.

Looking back then, the way I view it now, extrapolating backwards, I'd say I wasn't actually intending to kill myself, to be

dead. It was more about these obsessive thoughts. But at the time - and I can't really explain this - it's like you're not thinking. Your brain is shut down. Now, I go into the neuroscience behind this on my suicide course, but it bears up in my experience too, so it's not just a piece of abstract science, but there's a brain science explanation for what it felt like. When I was suicidal, I couldn't think of anything else. Like, literally couldn't. I guess there was an element of it being a bit of a dissociative experience, because I felt like I was lost within myself. Like I'd fallen down into a big hole. I think it's called a 'pit of despair' for a reason, because there's a very real sense of falling down within yourself, being enclosed, and in darkness. The metaphor is a really good description of the visceral experience I had.

So, was I serious when I was thinking suicidal thoughts? Absolutely Because - and this is the point really - I was in unbearable emotional pain and suicide seemed like the only option. And that's probably the big difference between then and now. Now, I've found more options. But that's not to say actually, this might surprise people - that's not to say that I don't have suicidal thoughts. I spent so much of my life from 15 years upwards obsessing and ruminating on suicide, that I think it became a habit. So, it's not unusual for me to face a difficult situation and for those thoughts to pop into my head; it's like a default response. I think the



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difference nowadays is that mostly I don't fight them and I don't engage with them. I just acknowledge them. I know where they're coming from. I know they're trying to help me, I know those thoughts are trying to help me find a solution, to be rid of the pain. But I also know that I don't want to choose that option, because although it's effective – suicide is extremely effective at ending pain – it's by far the worst option.

And I think it's key, when you're talking to a suicidal person, that you don't rubbish it as an option. That you don't tell them, 'No! Suicide is NOT an option.' Because we know it is. *Of course* it is. It'll always be an option.

Telling someone it isn't an option can increase their distress. There they are, in terrible pain, and it's the only option they can think of right now to reduce that pain. And you tell them it's not an option. What effect is that going to have? Surely, it's going to increase the distress! I'm in all this pain and there is absolutely no way out. How does that do anything other than increase our sense of helplessness and hopelessness? I always found it much more helpful to be told that, yes, it's an option. Suicide is always an option. But it's not the only option, and it's by far the worst option.

My recovery really has been about discovering those other options for reducing my distress. And alongside that, what I really began to learn was that although suicide takes the pain away, it doesn't eradicate it. It just passes it along. I'm in unbearable pain, I choose suicide as the way of dealing with that, but that doesn't mean that that pain is gone. I've just passed it to everyone around me. When someone kills themselves, it causes immense suffering. It's caused by suffering, and it then multiplies and causes suffering to other people. That's why it's the worst option. I think a much better way of reducing the pain of distress is to do it in a way that does actually reduce the pain, rather than just pass it along.

But obviously for a long time I didn't think there was anything I could do. I saw the pain as irremediable. I saw it as this big evil, the big enemy in my life. I saw it as bigger than me. I didn't know the first thing about how to deal with pain. I thought the only way was to kill myself so that I didn't feel the pain any more. But my recovery has been based on learning that suffering can be resolved. Pain can be reduced, it can be handled. And we can do that in ways that don't then cause pain to others. That seems like a win-win to me.

Alongside that, what's very important, I think, is that we learn to get good at pain. Looking back, I realise that I had a sense of 'specialness' in a way. That I didn't deserve to suffer. That I should somehow be exempt from it. Now I'm





not saying that anyone does deserve to suffer - not at all. But suffering is part of the human condition. There isn't a single human being alive who won't suffer, who doesn't suffer. And yet I thought that I should be exempt. I felt picked on, I suppose. And it's true that, with the extent of the abuse I suffered in childhood, I was indeed picked on. But there's two ways to respond to that. You can take it personally. You can believe that you're abused because of YOU. You can believe that it's got something to do with who you are, being singled out by the universe. Or you can believe that you were in the wrong place at the wrong time and that you were abused because of your abusers, not because of you.

That was the big shift that had to go on in my thinking. I had to realise that, firstly, suffering is a universal human phenomenon and that some people are better at dealing with it than others. And secondly, I had to realise that I hadn't been singled out, personally, by the universe for suffering. The only reason I was abused was because my abusers decided to do it. That's it. A lot of the time we blame ourselves because it gives us a sense of control, and I get that, but the downside is that we then heap up suffering on suffering.

And I think it's a subtle distinction but an important one: that I was victimised, but I didn't have to be a victim. What I mean

is, that while I continued to think that I had been singled out by the universe for suffering, I was positioning myself as a lifelong victim. I'll tell you what helped, and it's really bizarre. After one particular serious suicide attempt, my therapist gave me a book to read. It was Victor Frankl's book 'Man's Search for Meaning'. It's about the holocaust, about the concentration camps. It's all about suffering.

And you know what happened when I read that book? I stopped thinking that I was the only person in the universe who had ever suffered, and the only person in the universe who was suffering right now. It helped me realise that suffering is part of the human condition. I realised that I'm not the only one. It kind of shook me out of my childish selfcentredness about suffering. Because I was like a child stamping my foot and saying, 'It's not fair.' No, it's not fair. So what you gonna do about it? As a child stamping my foot, I was expecting the universe to respond and say, 'Oh, okay, you don't like this. So let's get it to stop then.' Obviously, that's not the way it works. Suffering is. So we need to get better at dealing with it. And we need to do something about it. The universe doesn't press a button when we pout and stamp our feet and it doesn't stop it for us.

So part of being suicidal, for me, was this sense that I was the only person in



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the universe who was suffering or had ever suffered, and that because I'm the only person, I couldn't be expected to learn how to deal with it. There was an element of petulant revenge in me – you know, a kind of, 'It's not fair! I'll show you – I'll get my own back – by killing myself. And then you'll be sorry!' Yes, I wanted the escape and the relief from the pain, but I was also really angry at what had happened to me and this was how I was going to get even.

That's why my first book is called 'Recovery is my best revenge' because that's the journey I've had to go on – where it's still okay for me to want revenge, but for it to be a *good* revenge. Killing myself as revenge is just plain stupid. It's not going to accomplish anything. There's absolutely no revenge in it at all!! It was actually just helping my abusers, because it would keep them safe. A dead victim can't go to the police. A dead victim can't testify in court. A dead victim can't speak out about what happened to them. A dead victim can't help others to recover.

And ultimately that's not what I wanted. For a long time, I'd been told, in various contexts, to let it go, to forgive and forget. Like that was easy! But it never sat right with me. It was wrong what happened to me – really wrong! It was unjust! Of course, I wanted revenge. And the more I tried to just stuff that feeling down and ignore it, the more vocal it

became. It came out in wanting to kill myself, to get even.

And so the change for me was realising that I could indeed have revenge, by changing the script. It's not really a Hollywood blockbuster, is it, to have a script that goes: child is abused. Child grows up. Child kills themselves. Where's the reversal in that? Where's the revenge? Where's the plot twist? There just isn't one.

A better script is: Child is abused. Child grows up. Figures out how to recover from that trauma. Gets revenge by recovering. Gets even more revenge by helping others to recover.

Suddenly we're cheering. It's a massive plot twist. It's a satisfying end. And a big part of my recovery was recognising that Act 1 has been written already, but I've still got the power over Acts 2 and 3. *I* can write the script from now on. This is borne out in the attachment research, that it's not what happens to us that matters as much as how we think about ourselves as a result of what happened to us. It's not the experience; it's the stance of the self towards that experience.

And I found that really empowering. I didn't need to stay a victim, and just let the script play out in the expected way. I could plot twist. I could change what happened in Act 2, and I could write a





completely different future for myself in Act 3. And that's what I think I've managed to do.

If I'd killed myself, the script would have been written for me and it would have been a tragic story devoid of meaning. My abusers would have written my script and no-one would have been inspired by it. But by choosing not to kill myself, by figuring out how to manage pain rather than through suicide, I got to rewrite the script for the rest of my life. And now, I hope, I'm helping to rewrite the script for other people's lives too. So that's what I mean by recovery is my best revenge.

And so I had to learn to manage pain in ways other than via suicide. And this is the fascinating thing that I found in my researching which I talk about on my suicide course, that being suicidal offers a temporary reprieve from distress, like I said, by providing the glimmer of hope of a way out. And so it can become addictive as a result. But overall, all it does is serve to increase that distress. The brain science shows that when we are in what researchers call 'the suicidal mode', we're in the same state as when we're traumatised. It's an almost exact carbon copy of a brain scan. And I was puzzling over why this was. I knew it was relevant but I didn't quite understand why.

And here's what I realised: we go into a traumatic state of mind when we are in a life-threatening situation, right? It's what I teach on various of my other courses about how, when we're faced with a threat to our lives or our physical integrity, the front brain switches off, the back brain lights up, and we shift from daily life mode to danger mode. We can't think clearly with our front brain. We act on instinct. We go into fight, flight or freeze. It's a very clear sequence of events.

And when we threaten to kill ourselves, we're activating that same sequence because it's a threat to our life. So we're effectively traumatising ourselves. That's distressing. And when we get superdistressed, we contemplate suicide as the way out, as the escape. And that starts the cycle all over again. So it's a horrendous, a vicious cycle.

Instead we have to find ways of soothing our distress rather than threatening ourselves all the time. That's what I go into in much more detail on my course. But the foundation of it is a complete about-turn in our approach to dealing with pain. Some of us have been so used to pain and distress, all our lives, horrendous abuse, terrible trauma and we end up thinking that that's the way it has to be. And we actually maintain that status quo by continuing to abuse ourselves. And that can be by threatening to kill ourselves too. After all, think about it: If someone turned up at your house every night and threatened to kill you, that would be traumatic, wouldn't it? It would be distressing. It's the kind of thing that people seek therapy for, to



resolve. And yet that's what we're doing to ourselves – sometimes every single day. The trauma of our past is in the past, but we're replicating it ourselves on a daily basis.

That was one of the breakthrough moments for me, to realise that that's what I was doing to myself. And that's why I bang on about self-compassion all the time. That's the only way to be free of the effects of abuse, it's to refuse to continue to abuse ourselves. It's absolutely vital.

One of the online courses I have available is 'Dealing with Distress: Working with Suicide and Self-Harm' and writing it was an interesting experience. To be honest, it was quite tough. Like every day you're knee-deep in the literature on misery. It wasn't fun. After a little while of doing this, reading stuff every single day, I really started to doubt that I wanted to do it. You know, how much misery can you read about without becoming utterly miserable yourself?

And in the midst of all of that, it really occurred to me that I think we're getting it the wrong way around, and that this is a microcosm of the world of mental health generally. We're spending all our time looking at the minus 10 – mental disorders, trauma, suffering, dysfunction, suicide. And we're maybe trying to get people to move along the spectrum, from minus 10 to minus 9. And then maybe a bit more. If we work really hard, we might

one day get them to zero and that's what we'd call recovery.

But you know what? It's not what I call recovery at all. Recovery is not about the absence of suicidal thoughts or the absence of disorders. That's not life! Life doesn't consist of just not wanting to kill ourselves! Life is full of health and joy and passion and goodness and love and freedom. Life is good, *really* good – and it's not just the absence of the bad. It's so much more.

And so that was the spark behind the course. First of all. I wanted to challenge the way that we currently deal with suicide, because it just struck me over the last few years how hugely unsuccessful our approach has been. Our focus is just on death rates, which of course is important, but we're missing the huge amount of suffering that exists with people who are suicidal but who don't go on to kill themselves. It's like in the world of DID (dissociative identity disorder) - almost everyone I know with DID at some point or another is, or has been, suicidal. And yet the vast majority of them are not dead. So for the suicide statistics it's like we don't count.

The main emphasis is on *preventing* suicide. Which obviously sounds like a good thing ... so what am I saying? That prevention isn't important? Ha! Of course not. Of course it's important. But I don't see it as the main thing. Instead I see the main thing as reducing distress.



And the side-effect, if you like, of reducing distress is that you also prevent suicide. Whereas our current system is all about locking people up to stop them killing themselves, and yet when we do that – we call it sectioning – we *increase* their distress. And that distress can just escalate over time. So our prevention model sucks, as far as I'm concerned. We're dealing with sticking plasters rather than actually solving the problem.

So on my course I go into that, and I really look at what it takes to move from the minus ten of suicide and despair not just to the zero of not being suicidal any more, but to the plus ten of living a full life. Being happy. That's unimaginable for most people who are suicidal, and there's a very good reason for that: because the suicidal mode, like the traumatic state of mind, shuts down our imagination. The parts of the brain involved in imagination literally don't fire. We cannot imagine a better future for ourselves.

So for me a big part of this is that we need to get the parts of the brain that are shut down to fire up again. So I do a whole section on that – what does the suicidal mode look like in the brain? What is shut down? And how can we get it firing again? Rather than just what I think is often a fruitless debate with the suicidal person all the time where we advocate for life and they advocate for death. That just gets us into this adversarial relationship, and I just don't think it's very effective most of the time.

What is effective is creating something much more inspiring than just trying to avoid people killing themselves. Plus ten rather than simply the avoidance of minus ten. Something that has consistently come through in the feedback from that course is people saying, 'I expected this course to be really hard work - you know, a course on suicide and self-harm. And yet it's the most inspiring, uplifting course I've ever been on.' And that's really pleasing because that was intentional on my part. I came out of spending all my time reading about misery, and ending up feeling miserable myself, and realising that that's not going to help anybody. I didn't want to have a focus on misery. We have to give people reasons for living, not just argue with them that they shouldn't die. We've got to have hope. We've got to have imagination for a better future. And I think that starts with the way that we think about suicide. We shouldn't fill with dread at the thought of doing a course on suicide. We should be super-excited - as I am - at the thought of reversing adversity and leading people from minus ten to plus ten. As far as I'm concerned, it's the most exciting thing. I'm really quite passionate about it!

So that's all we have time for in this episode. Thank you for joining me. You can subscribe on Apple Podcasts, on Spotify, or you can listen direct from my website at carolynspring.com/podcasts.

Speak soon!

