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No easy answers to Robin Williams's suicide

By CARLY WEEKS

Final act stems from complex psychological pain, expert says, but help is available and open discussion about it is key

In the days since Robin Williams's death, there has been a rush to explain and debate and judge his decision to end his life.

Some people assigned blame to Williams, calling him selfish and a coward. Fox News anchor Shepard Smith was one of several high-profile figures who issued a public apology for branding Williams in such a callous fashion. Others are calling for more awareness about the challenges of mental illness and the need for better resources to help those affected by it.

But the topic of suicide itself, and what drives a person to seek it out as an option, is an important and less well understood part of the complex discussion about mental illness. That could be because, when it comes to suicide, there are no easy or simple answers.

"We'll never have a full understanding of the factors that contributed to [Williams's suicide]," said clinical psychologist Dr. Marnin Heisel, director of research and associate professor in the department of psychiatry at the University of Western Ontario. "There's a variety of factors that go into an individual's death by suicide. It's never one occurrence, one factor, one consideration. It's important not to simplify."

In Canada, there were 3,728 suicides in 2011, according to a Statistics Canada report. The rate for males is about three times higher than that for females, which could be because men often use violent methods that are more likely to be fatal compared with women, the report says. The vast majority of those who die by suicide have some form of mental illness, with depression being the most common, according to Statscan.

Of the deaths by suicide in Canada in 2011, 43 per cent involved people between 40 and 59, 36 per cent were those aged 15 to 39 and 20 per cent were people 60 and older.

Heisel said that, although many factors are involved with suicide, there are some commonalities experienced by those who contemplate it. Specifically, a feeling of intense, unbearable psychological pain affects nearly everyone who has considered suicide, he says.

"As a result, some would say they don't even really feel it's a choice when they are experiencing that level. It really feels like suicide is the only thing on their mind."

It can be difficult to imagine that a loved one is contemplating suicide. And for that reason, it's often easier to avoid the subject, even if you suspect someone may be thinking about it. But instead of skirting the subject, Heisel

suggests that speaking about it openly can be key to helping the person overcome those thoughts. Allowing the individual to express how he or she feels is vital.

And so is getting help. Although much work needs to be done to improve access to mental health services in Canada, there are many resources to help people who are considering suicide. Heisel suggests seeking help from a family doctor, a walk-in clinic, calling a crisis centre or even calling 911 as the first step.

Helping people to see the broader context beyond the current anguish and pain they are experiencing can be effective, Heisel has found.

"A big part of that is helping people find something to live for, even in spite of the emotional pain they might be experiencing."

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