

DARE TO LIVE

A Guide to the Understanding and Prevention of Teenage
Suicide and Depression

Michael Miller with Debra Whalley Kidney

Published by:

Beyond Words Publishing, Inc. Pumpkin Ridge
Road
Route 3, Box 492-B Hillsboro, OR 97123
Phone: 1-503-647-5109 Toll Free: 1-800-284-
9673

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The case studies in this book are real; however, the names, circumstances and locations have been substantially changed to protect the anonymity and confidentiality of all cases.

Printed in the United States of America by Arcata Graphics, Kingsport,
Tennessee

ISBN: 0-941831-22-1

Library of Congress Catalog Card Number: 89-061266 Cover design by
Jerry Soga

For information on the *Dare to Live* program for your school or group, please contact the *Dare to Live* office in Vancouver, Washington (360) 696-4009.

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A celebration of life through publishing.

Acknowledgments

The authors of this book want to gratefully acknowledge Dennis Elleson for his help with the drug and alcohol abuse chapter, Charlotte Kegley, Wendy Wood M.A. and Annette Selmer M.S. for their assistance with the sexual abuse information. Special thanks to Edith and Wayne Home, Jodie Suckling, Beyond Words Publishing, our spouses, Katrina Miller and Dan Kidney, and our families who helped and encouraged us.

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*Dedicated to the family of Paul Horne
and to all teenagers and their parents.*

Introduction

*"I have job security - and I wish I didn't."
- Michael Miller*

***Gresham Union High School Gresham, Oregon
April 1988***

The big auditorium is empty except for a few adults toward the front. One, a man in his middle thirties, paces in front of the stage, fiddles with a slide projector, and checks the clock. The students will be dismissed from class shortly for this special assembly. Now Michael Miller concentrates on the job ahead of him: speaking to 1,600 teenagers for an hour and a half about depression, suicide, and life.

A few students begin trickling in. The student body president comes forward, and she and Michael stand and wait as the bell rings and the kids pour through the doors. The noise level rises as the seats are filled and other students sit against the walls. Stepping forward to the mike, the student body president leads the school in the Pledge of Allegiance.

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Her introduction is brief. "Today our assembly is presented by Michael Miller."

Michael vaults onto the stage and begins his outreach to the fidgety students. Within minutes they have settled into the presentation and are receptive to Dare to Live's message.

"First I want to give you the rules to this assembly. There are three rules. Number one is no talking. You personally may not need to hear what I have to say, but that doesn't mean that the friends around you don't need to listen to what I have to say, and if you're talking they are going to listen to you instead of me. So give them a chance to listen. O.K.?"

"Rule number two really isn't a rule, its permission. This thing is an hour and a half long; it is rather boring if I do say so myself. If you feel the need to go to sleep, go ahead. But try not to snore. Some of the guys, especially the big football types, can really, you know, be disruptive.

"And the third thing is, and I hesitate to say this, but I was at another high school a couple of weeks ago and a young lady in the front row fell asleep. She laid her head on her boyfriend's shoulder, and she drooled all over him. That's really disgusting. So, ladies, if you're going to go to sleep, stuff a tissue or something in your mouth if you have that problem.

"We're going to start with a slide presentation. This is a baby picture. How many of you knew that? Good; you've all studied health. Now, I'm the father of four children, and after having four children I've come to the conclusion that babies are only capable of doing five things. They are basically lumps, and all they can do is eat, sleep, cry, mess, and stink. But we all started out that way.

"This is a baby picture of a young man named Paul Horne. Paul was born in Tacoma, Washington, about 18 years ago, and this picture was taken of him when he was only a couple of hours old."

That's the way I begin my program called Dare to *Live*, and over the next hour and a half I tell kids about suicide, depression, living, and loving. I touch on the subjects of drug and alcohol abuse,

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sexual abuse, self-esteem, the warning signs of depression, and where they can go to find help. It is a mini-course on life, and since its beginning in 1985, my program has saved dozens of teens' lives.

Teen suicide is a raging epidemic in this country. It kills thousands of our children every year. Statistics help bring this reality into focus. Since 1960, the suicide rate in the 15 to 24 year-old age group has more than doubled, from 7.1 per 100,000 in 1960 to 15.6 per 100,000 in 1985. That means that more than 5,000 young people in this group kill themselves each year. The United States has the sixteenth highest suicide rate of all nations, and suicide is the second leading cause of death for 15 to 24 year-olds. The leading cause of death in this age group is accidents, but many suicides are counted as accidents because the survivors want it that way.

One 14-year-old drove his motorcycle into a tree at 85 miles per hour. Two days before he died he was called in by his math teacher because his grades were so bad that he was in danger of flunking. He told the teacher, "I don't care if I flunk or not, because I'm not going to live past the end of the year anyway." His death was listed as an accident.

Every suicide leaves six to 10 other victims - family and friends who must go on living. They feel abandoned, angry, and guilty. It takes these victims years to recover. Some never do.

Many suicides are covered up, and many suicide attempts are never revealed. Paul Home, a young man whose story is central to my program, wrote in an essay that he had attempted to take his life once before. His mother, who read the essay after Paul's death, had no idea how or when. The second time he tried, he succeeded.

Estimates on the number of attempted suicides by teenagers range as high as 500,000 a year. Most experts say that there are 100 attempts for every success. I've been out there, in

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the hospitals and at the sites, and at first I was skeptical of this number. But in Clark County, Washington, where I live, a teen attempts suicide every other day. That means 183 Clark County students attempt suicide each year. Multiply that by 39 counties in Washington and the total for this medium-sized state is more than 7,100 attempts a year. There are 3,049 counties in the United States, and while my calculations may not be scientific, using Clark County as an "average" county brings the total number of teenage suicide attempts in the United States to 557,967 a year. That's overwhelming.

It is disturbing for parents to think they wouldn't know if their kids were in trouble, but many times they *don't* know. I was talking about the prevalence of teen suicide to a friend who has a teenager of his own. He was disbelieving, so he called his daughter in and asked her, "Emily, have you ever thought about taking your life?"

She looked at him as if he were crazy and said, "Yeah, I've thought about it. A month ago I was really depressed and I tried to kill myself." Kids are attempting suicide all the time. Parents rarely find out about the ones who try and fail. They know about the ones who succeed, or nearly succeed, because these teens have to be hospitalized or buried.

Throughout this book are excerpts from a typical assembly that I presented at Gresham Union High School in April 1988. The assembly is the vehicle that I use to reach the kids. It brings them the message of *Dare to Live* - a message that has saved the lives of many teenagers who were depressed, hopeless, and helpless to know what was wrong or how to fix it.

There are several reasons why *Dare to Live* has succeeded. First is that its purpose has always been to reach young people. My program has been turned down by many schools because they have already educated their teachers about teen suicide. The problem is that they forget to educate the students.

Second, *Dare to Live* succeeds because it reaches adolescents on their level. I communicate to them as 13-year-olds,

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16-year-olds, or 18-year-olds. I tell stories that teens find funny, and I use examples they can relate to. I not only talk to them, but they receive my message.

Third, as you will see in this book, I am not approaching teen suicide from an academic or professional background. I am coming from a common-sense, practical-experience, I'm-apparent-too background. I'm using the lessons I have learned in dealing with kids over the last 15 years.

What we discuss in this book is not deep, dark, mysterious, psychological mumbo jumbo, or technical medical knowledge. The information is presented in a down-to-earth, easy-to-understand format so that parents, counselors, teachers, pastors, priests, administrators - *anyone* who works with or deals with teens - and especially the kids themselves can pick this up. It is meant to be a one-on-one study of suicide and depression, communication and love, respect and consideration for others.

The young people who are attempting and committing suicide are all around you. They are not just the ones who are disturbed because of terrible circumstances in their lives, although depression is much more likely among teens suffering through abusive situations. The main purpose of this book is to alert parents and teachers that the teen who kills himself or herself may be just like the one at your home or in your class. Meet three of these "typical" students. (Except in the case of Paul Home and his family, all names of young people and their parents have been changed to protect their privacy.)

Molly

Molly has naturally curly brown hair, an open, friendly smile, and a willing-to-please attitude. I met with Molly and her parents, Janet and Mark, after she attempted suicide. Molly is the kind of young person who keeps most of her anxieties deep inside of her. She has a cheerful "everything's fine" demeanor that often covers how she is really feeling.

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Most of Molly's pain began at school. "I'd walk by groups of people," she explains, "and they'd be talking about me. They'd say I had an afro, and because I'm tall, girls would spread rumors about me. They were just total snobs." Molly felt as if she didn't have any friends.

Her schoolwork began slipping, and Molly's teachers told her that they were going to call her parents. At home Molly heard her parents fighting with her older brother and sister; the tension from the anger between her parents and siblings also affected her. "I was worried and all nervous, and a whole bunch of things were piling up."

Molly says she tried to tell her friends how she felt, but when she did they would tell other kids and everyone would get mad. She didn't consider talking to her parents, brother or sister about her feelings. "I thought they'd say, 'It's all right; just ignore it,' but I couldn't do that. And my mom has a short temper. Whenever something goes wrong she yells at us. I wasn't sure I could talk to my dad. I wasn't used to talking to him at all; I was more used to talking to my mom."

After considering the situation, Molly decided to kill herself. "Then I wouldn't be around anybody, and I wouldn't have to think about those kinds of things, and I wouldn't be so nervous and scared." So one night she went into the bathroom and took between 30 and 40 Extra Strength Tylenol.

"I didn't want my parents to walk in and see blood all over my room or something," Molly says. "[And afterward] I went to my mom and told her I took a whole bunch of Tylenol and had a stomach ache. I threw up about three times and my mom called the poison center. They told her to take me to an emergency room."

Molly's mom, Janet, put the events together a little differently. When Molly began vomiting, she assumed her daughter had the flu. It wasn't until the next morning that she remembered Molly telling her that she had taken "lots" of Tylenol, and it was not until she was on the phone to the poison control

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center that she asked Molly exactly how many pills she had taken.

Molly was lucky. She had to spend several days in the hospital, but she did not have any permanent damage. She and her parents began seeing a counselor, and Molly is working on telling her family how she feels. Molly now says her attempt was "really kind of stupid," and she has learned some mechanisms to help her cope with the kids at school. "I know that people who talk about me aren't my friends. I know to stay away from them and be myself instead of trying to impress everyone."

Molly has done a lot of growing up in the five months since her attempt, but she also has a lot of growing up left to do, because she is still a little girl. Molly was 10 and a half years old and in the fifth grade when she overdosed.

Rob

The second time that I met Rob, a year after our first meeting, the circumstances were considerably different. I first spoke at Rob's high school during the spring of his junior year. He approached me after the program because a week earlier he had survived a suicide attempt but was still feeling desperate. Rob is tall, well-built, and handsome. Now finishing his senior year, he is graduating with a 3.94 cumulative grade point average (out of a possible 4.0) and is the class valedictorian. He has won honors in football and basketball and an appointment to the Naval Academy, where he hopes to pursue a career as a pilot. Talking to Rob on this day 11 months after he tried to kill himself, it seems impossible to believe that anything could have driven this confident, well-adjusted, successful student so close to death. I will let him tell his story.

Rob's problems began with his girlfriend. "I'd been going out with Erin for a little less than a year, and it wasn't working out. We were arguing, she'd get mad at me for everything, and I

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had it in my mind that we should break up. Then I found out she was pregnant."

The news did nothing for the shaky relationship. Rob shouldered his responsibility, he and Erin discussed the alternatives, and they agreed that an abortion was the logical solution. The young couple scrambled to come up with the money, and during this time Rob says they fought even more.

After the pregnancy was terminated Rob broke up with Erin. "I broke up with her, but I still talked to her and associated with her because I wanted to make sure she was o.k. But I guess I didn't do a good enough job of it. I just didn't know what I was supposed to do, because I'd never been through it before."

Erin was bitter following the abortion and breakup. She began talking about Rob to her friends, and rumors about him began circulating through the school. "The rumors that were started about me were really bad. My friends would come up to me and ask, 'So, Rob, I heard this about you. Is it true?' I traced the rumors back to Erin and her friends."

Soon another of Rob's friends became involved in the situation. Kelly was a good friend of both Rob and Erin, but Erin began to hate Kelly because she still associated with Rob. "Erin thought I didn't deserve any friends," Rob says. When Kelly's difficulties with Erin continued, Rob felt responsible for dragging an innocent party into the mess.

"I was feeling pretty down because Kelly was going through some bad times that I believed were my fault. I thought if I weren't around, Erin wouldn't have anybody to pick on and start rumors about because the cause of the problem would be gone. And Erin wouldn't hate Kelly, and Kelly would get back together with all her friends."

To Rob the easiest solution was to kill himself. Rob never tried to talk to anyone about his painful feelings before his attempt. He thought about suicide for a few weeks, and then one weekend, with his parents out of town and his sister away at college, the opportunity was there.

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"I was in the bathroom brushing my teeth and the medicine cabinet was open. I saw all the pills in there, and I just took a few of each and a lot of aspirin, and I think some codeine. I just randomly dumped them in my hand."

After taking the pills he went to his room, lay down, and became sick a little while later. Eventually he fell asleep, and then he woke up with a headache. "I really dragged for the rest of that day and the next, and I didn't feel too hot."

Rob says he felt some relief when he woke up and found he hadn't died, because he realized that he couldn't do that to his parents. "What would they do if they came home and I was dead in my room?" he asks. "I couldn't believe I could do something that bad to my parents. But at the time I was only thinking about all the people at school."

A week later, following the Dare to *Live* assembly, Rob talked to me, I talked to the school counselor, and the counselor called Rob's mom. It was difficult for Rob to have to tell his mother about his problems. She contacted a psychiatrist to help Rob. It wasn't until four months later that the rest of Rob's family, his father and sister, found out about his attempt.

Rob explains his reluctance to tell his father about the suicide attempt. "I didn't want my dad to know about it. My dad's old-fashioned. He grew up on a farm and I guess he still thinks he's on one. The way he handles things is a little different: he yells. I don't like it and I don't like to make him mad. He just gets really unreasonable. I wrecked the car once and he took away my keys for six months.

"I knew he wasn't going to be forgiving. I thought he was just going to kill me. And he did yell. His reaction was basically what I expected. At first he yelled and screamed, 'How could you do that? How could you do something like that? I raised you up not to do things like that,' because he also heard about the mess with Erin.

"I told him, 'Well, I made a choice, dad, and I just made a mistake. It's my fault and it's my life.' He calmed down in about half an hour. I realize now that yelling is his way of

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caring. It's nice to know he's there and he cares. Before, I thought he was just there to yell; he was just a disciplinarian and didn't care how I did, he just yelled. But now I know he cares.

"My dad gave me a lecture on morals. I've been raised a Lutheran and premarital sex is against my religion. He was a little upset about that. I said, 'Dad, God forgives, can't you?' And he said, 'Yes, I can. It just takes me longer.'

"The psychiatrist told me I have to realize that I just screwed up. I made a mistake. It's a mistake I've got to live with for the rest of my life, but I don't have to think about it, and I know that I certainly don't have to die over it. I realize that now. There is help."

Stacie

Jean and Tom Turner, and their second daughter, Colleen, are sitting around the kitchen table. Jean and Colleen are smoking as they talk about Stacie, the youngest child in this close-knit family. Jean speaks carefully and deliberately about the tragic event that shook the family less than 10 months earlier. Colleen, who is 30, adds details or confirming evidence. Her emotions - anger, frustration, and grief - are revealed more often than her mother's as she talks about her little sister. Tom listens most of the time, and then quietly adds his ideas. When he speaks, his statements are thoughtful and concise.

It is obvious that this family has gone over this ground before. They have examined every nuance of every statement, considered every action. The details are familiar to all. One begins a story and another finishes it. Questions are probed from every angle, and yet the answers still elude. Maybe the answers will always be just out of reach. For a family that has lived through a teen suicide there are many, many questions and far fewer answers.

The Turners' story began in 1971 with the birth of their fifth

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child, Stacie Anne Turner. Stacie was born far from the family's home state during a period when Tom Turner's job had forced the family to relocate. The Turner children were separated into two distinct groups: the first three, two girls and a boy, had been born close together in age; then after a seven-year lapse, the two youngest girls, Amanda and Stacie, were born.

Being the youngest of this brood had its natural advantages. With three older siblings the perfect age and size for hauling around the littler ones, Stacie was doted upon. But in addition she was born with a fragile, benign facial tumor. It was removed later, but as a toddler she could not fall down for fear she would bump her face and cause it to bleed. Three youngsters and two adults danced attendance on the bright and busy one- and two-year-old Stacie.

Stacie grew comfortably within the warmth of her family cocoon. But even the most stubborn of butterflies are eventually forced to fly. For Stacie the first big change in her life occurred when she was four. The Turners moved back to their home state, the older children began graduating from school and leaving home, and mother Jean went to work outside the home. In retrospect, Jean says this was a hard time for all the family, but maybe especially hard for Stacie.

The next year kindergarten beckoned, but there was a dilemma. Stacie's birthday fell on the cutoff date for school entry. She could enter, but she would be the very youngest in her class. Jean considers this decision 10 years later and shakes her head. "I think it was a mistake," she says. "She sailed through, she did wonderfully, but the school always said that while Stacie was right on intellectually, socially she was a year behind."

Her father has no doubts that his youngest child was the brightest of the family's children, but beginning as early as the fifth grade, she began having social problems. The problems Stacie Turner experienced were the same ones that hundreds of other young people experience every day: the push and pull of

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friendships, the struggle to balance expectations of relationships with the reality of being young and fickle, and the intense desire to be accepted by those one likes.

Her father says, "Stacie wanted friends, and yet she was really critical of those friends and their imperfections. When they did something wrong she would chastise them. In a way, she caused her own problems, but everybody does that. She was also kind of lazy. She wouldn't go out of her way to work on friendships, therefore the few she had were more important to her. And when something happened between them, it was very catastrophic."

Indeed, something catastrophic happened between Stacie and a close friend, Terri, the year both girls were juniors at a private high school. Terri attempted suicide. Stacie stayed right by her friend during this difficult time. She talked to Terri's mother regularly about how Terri was feeling and spent hours with Terri, putting herself on the line for a friend who was hurting. And that too fit into Stacie's profile.

"Stacie was a real helper," Jean says. "She was totally consumed with helping, not just Terri, but everyone. She was a giver."

Tom adds, "The only group Stacie had trouble with was her peer group. People older than her and younger than her, she just loved them and they loved her back."

Terri's cry for help seemed to "super-bond" Stacie to her. But three or four months after Terri's suicide attempt she began pushing Stacie away. Tom Turner: "One of the things that was so traumatic for Stacie was kids her own age rejecting her. It caused her a lot of pain," says her father

Colleen adds: "Stacie felt so bonded toward Terri. Here she thought she saved Terri's life. To Stacie, what better friend could you be? Then Terri wrote the letter."

The letter was Terri's attempt to break off her relationship with Stacie. Stacie took it hard. Her family lists other factors

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they now believe to have contributed to Stacie's depression. Her father had been laid off and without a job for over a year, her mother had recently had two operations, money was tight, the private school was demanding, and finals were just around the corner. Then an escapade with Terri and another friend ended with Stacie's hand badly hurt, but neither friend willing to stay and help her. To Stacie it must have seemed that her friends abandoned her during a time of need. Terri's subsequent letter rejecting Stacie's friendship was the last straw.

Jean explains, "I think Stacie was hurting real bad. Her sisters talked to her a lot, but even so, there was a new tone to Stacie's voice that made the hair stand up on the back of my neck. Two or three times I felt that, but I thought it's because she's a teenager, this is our fifth child who's gone through this. I was lulled into thinking that."

Colleen echoes this thought, "One time I even asked her, 'Stacie, are you thinking of suicide?' She looked at me and said, 'No,' and I turned around and walked off. I kept saying to myself, oh, she's just being 16."

Memorial Day weekend: Finals were looming at school, Stacie had recently been hired at a fast-food restaurant and was working 20 hours a week, and had been spending hours writing poetry and walking the floors late at night. Most of the family had left town for the holiday. Colleen and her family had gone to the mountains. Her father had left to target shoot. Her mom and an uncle were at home with Stacie and her sister Amanda.

"Stacie was asked to take Mandy to work so she could have the car," Jean says, "and she didn't want to take her. Stacie said, 'Don't let me have the car. Don't make me take her.' But Amanda had to be at work. Stacie seemed kind of depressed, I guess. She was harried. I thought it was school. She got ready to take Mandy. She took a bath and put on her school basketball sweatshirt. It's all really symbolic now. I helped her get ready. I brought her a towel and found her a clean bra. All these things;

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now I think, oh my God, I helped her get ready. She got in the car with her sister. Obviously she had the gun that was under our mattress.

"At the front door she turned around and gave me the saddest little look. I guess the sadness that I will die with is that I didn't give her a hug. And that was it."

From what the family can piece together, Stacie left Amanda off at work and went to Terri's house. Terri was not there, but Stacie left a poem with her mom. She then went to see another friend, and the family believes there were angry words exchanged. Stacie left the second house and drove up to the top of a local viewpoint. It was the same place where Terri had attempted suicide. Stacie pulled her car over to the side of the road behind a taxi.

The taxi driver watched Stacie in his rearview mirror. He saw her bend over. He saw cigarette smoke, and then he heard what sounded like a rock dropping. Two men walking up the hill behind the car saw what had happened, and the taxi driver called the police. On Memorial Day, at 16 and a half, Stacie Turner shot herself and died.

On her lap was the letter from Terri. Copies of the following poem were left at Terri's house and sitting beside the phone at the Turner home:

You want to die when you're with me,

But I can't live without you, can't you see. So, there is only one thing left for me to do I have to do it to protect you.

Please understand, it's not your fault

I've felt this for awhile, and it's got to halt But before I do, I'll give it one more try But if it doesn't work then I'll say good-bye. I am sorry to do it up there

But it's the only place I could figure where.

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Because, you see I've had dreams too

But in them, this person doing this is me not you. There is really nothing left here for me

*And this is the way it has to be. Please realize it's for the best
It really wasn't this problem it was all the rest.*

The pressure just builds up and there's nothing to do. Can't you see it's better to be me than you.

God I'll miss you. Good-bye.

Colleen lights another cigarette and takes a deep breath. "At first when she died I'd think that if I could have her back I'd just hug her and tell her how much I loved her. Later I felt that I'd first tell her how much I loved her, and then I'd slap her. And now if she came back, I can't honestly say I wouldn't slap her first.

"I wish those who want to commit suicide could experience being dead for a week. I know her death affected her friends, but she wasn't thinking about us, about how much her family loved her. She was so tunnel-visioned with what she thought was important in her life. If she could just see

Dare to Live

When I was 16 years old I decided to become a minister, and that desire marks the beginning of what is now the Dare to *Live* program. My calling has always been to help youth. I began working with a junior high Sunday School class when I was 19, and I have never looked back. Working with teens is still what I do best.

After high school I did the "normal" things. I joined the Navy and left the Navy. I went to Bible college and then left that to get married and have a family. (My wife Katrina and I

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have three daughters and a son: Heidi, Matthew, Hannah, and Katie.) I became a youth minister, and I knew that was really what I wanted to do. Then I got sidetracked and pastored for four years. (The advantage to working with kids is that if they don't like you, they'll tell you to your face. If an adult doesn't like you, he'll often smile and then tell everybody else what he really thinks about you.)

When you pastor a church, you can get stilted in your views. You work with Christians and talk mainly to Christians, so you have an unbalanced perspective on the real world. In the Bible, Jesus went out and talked to the multitudes. I felt I needed a way to get back into the community, to keep my ministry fresh. That is why I became a volunteer chaplain for Clark County Fire District Five.

As the chaplain it was my duty to go to the scene of major accidents, fires, and deaths to offer emotional support to the victims and survivors. To facilitate my work as chaplain I also became a volunteer fireman and volunteer Emergency Medical Technician.

It doesn't take long when you're working in emergency situations to see suicide and the results of attempted suicide. What struck me immediately was the number of young people who were taking their lives.

It haunted me to see kid after kid after kid attempt to take his or her life and to go to scenes where kids had successfully committed suicide. I remember the suicide of one 14-year-old girl. The day before she died her mother had taken her to the mall. It was a few days before school started, and they must have spent \$1,000 on clothes. This teen had four pairs of \$50 jeans, with the tags still on, laying on her bed, plus dresses and blouses, a whole wardrobe. That night she went outside, put her dad's pistol in her mouth and blew her head off. Her father found her the next morning when he went out to go to work, his gun still in her hand. When you see things like that it is obvious that suicide is a total waste. I felt a real need to reach these kids.

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I talked to teens who were not as successful as the 14-year old as they lay in hospitals recovering from attempts, and I detected a pattern to their actions. They were hurting, they had nowhere to go, and above all, they didn't understand their depression.

"Why didn't you talk to somebody about this?" I'd ask. They would answer, "I didn't have anyone to talk to." "Why didn't you call the fire department? I'm the chaplain. I would have talked to you."

"I didn't know that."

Or, "Why did you try to kill yourself?" "Because I was flunking out of school."

The truth is that these teens were flunking out of school because they were depressed, and they were attempting suicide because of this same depression. They weren't depressed because they were flunking. They were looking at the symptoms rather than the cause. They weren't dealing with the cause of their depression because they didn't understand it.

It became a calling. I wanted to reach these kids and give them a chance to understand what was happening. Simply put, *Dare to Live* came from seeing a need that wasn't being met. I decided at that point that I no longer wanted to be a pastor.

Working with kids was what I liked to do and what I was good at doing, yet I didn't want to go back to youth pastoring and working with a small group. The idea for the *Dare to Live* program came to me one day while I was taking a shower. That's when I decided that I wanted to go into the schools and talk to students about teen suicide.

With my experience, I felt I could do something about this. I cared about kids, I related well with kids, I had talked to many kids who had problems, and I knew I could communicate basic common sense that would get through to them. I resigned my job as pastor and began finding out all I could about teen suicide.

I read everything I could lay my hands on. It was February

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1985, and there hadn't been much written on the subject. Few books had been published, but a lot of magazine articles covered what was beginning to be recognized as a national problem. I also checked out all the related psychology information that I could find.

Building on my library research, I went back and interviewed teenagers I had worked with over the last six years who had attempted suicide. I asked them what they wished they had known before their attempts, what they thought their friends should have known, and what could have been done to prevent their pain. I talked to parents, to counselors, and to ministers. I examined the issue from every conceivable angle.

I knew that if I wanted to go into the schools, I had to go in with absolutely the best program the schools had ever seen. First, I had to figure out exactly how to approach the subject. I knew I had to be able to sit down and talk to 25 teens, or 1,000 plus teens, at any given time about depression and suicide, without making the talk depressing in itself, *and* give them useful information. My talk even needed to be humorous. But how do you treat a subject like death lightly?

It took a lot of trial and error to figure out my approach. I would talk to kids and clarify their reasoning, and then bounce stories and ideas off my friend (and now associate) Jodie Suckling, her husband Tad, and my wife Katrina.

For the next step, I decided I needed a video presentation to use with the program. Jodie volunteered to write a script based on true stories from three teens who had attempted suicide. Then she found actors from the high school and community, located a video crew, and directed the production of the videotape.

After eight months I was confident I had a good and meaningful program. *Dare to Live* was not quite in the polished two-hour (or 90-minute) format that I use today. It was two days long! The seniors at Fort Vancouver High School in Vancouver, Washington, were my first "live" audience, and they sat through

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two hours on two consecutive days. I know the program reached them. I also realized that it had to be shortened.

When I approach schools about *Dare to Live*, or they contact me, they often react with stunned silence when I say that the assembly is an hour and a half long. It is difficult to schedule that much time outside the classroom, and I'm sympathetic to that problem. But if the school can't give me at least 90 minutes, I won't do the program. I feel that if I can't do a good and thorough job, I would rather not do it at all. I always wonder what they want me to leave out. Should I cut the part on the warning signs, or the part about where to go for help? Everything I say, even the funny stories, has a purpose; it is all vital to the *Dare to Live* message.

The program is not static; it is in a constant state of change. For example, depending on the audience I make changes in the program itself. I can tailor it to a junior high audience -

I usually hit the sexual abuse problem harder - or an inner-city or suburban high school. I can also adjust the program to emphasize certain areas that a school may want to target, such as, drug and alcohol abuse, teen pregnancy, or self-esteem.

I have had to defend my program from the very beginning because everyone is a critic. I have heard that the program is too polished, it's not polished enough, it's too funny, and it's too depressing. I can only reply that *Dare to Live works*, it reaches teenagers, and it saves lives.

Once the program was ready for presentation I was ready to go. But not all the schools were ready for me. Getting into schools is a struggle. First, the school must be realistic enough to admit they have a student suicide problem. Some administrators feel it is a weakness to say that they need help in this area. Second, competition is sometimes a problem. When one school or district has presented *Dare to Live* first, a neighboring school may not want to follow.

Many districts also think that if they merely teach their

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staff about teen suicide, then the problems will be resolved. I contacted several school districts in a state where I planned on vacationing, because I thought it would be a good opportunity to introduce my program. They wrote back and said, "We had a workshop for our counselors and a psychologist came in. He told them all about teen suicide." *The problem is, no one bothered to tell the kids.* So the students were sitting over here hurting, and the counselors were over there saying, "We know about this problem." The program I've developed doesn't educate the counselors and teachers, because I assume they are already educated. I go directly to the kids.

I do talk to the teachers and counselors before I do a program in order to alleviate fears that the school will fall apart because I have talked about death, dying, and suicide. The teachers worry that students may come back from the auditorium a great big mess. They worry the program will be a huge bummer. So I tell them it is an uplifting, alive program and then answer questions.

Even after I have given an assembly I can get surprising responses from the adults. The principal at one high school looked at all the kids who wanted to talk to me and said, "Boy, you caused a lot of problems."

"No," I said, "the problems were already here. This just brought them to the surface." He wanted to be the ostrich with his head in the sand; he didn't see any problems because he wasn't looking for them. But you can't wait until a student commits suicide before you realize someone may be hurting. When I first put this program together a great number of schools told me, "Yes, teen suicide is a national problem. But we don't have that problem here." That's ridiculous. How many schools would say, "We don't have a drug problem." Realistically, if you have a high school you have a drug problem. You also have sexual abuse problems, you have depression, and you have a suicide problem - *because kids hurt*. It matters not what neighborhood or economic strata they come from, or

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whether their religious affiliation is Christian, Jewish, Buddhist, or pagan; kids are kids are kids, and they hurt.

A lot of politics is involved in such a volatile issue. If there has been a suicide, people want to know why the program wasn't held earlier. Once, following a suicide, I was invited to a school by a counselor. But the program got nixed by the principal because he felt the student who died wasn't popular enough to warrant the assembly. If there hasn't been a suicide I face the classic denial, "We don't have a problem," or the superstition that talking about suicide will trigger it.

The myth that talking about teen suicide encourages it is just that, a myth. To talk about teen suicide in an educational, informative setting, in a factual, non-emotional, non-glorifying manner is good and healthy. The same can be said about sex education. If you talk about sex, do kids have sex in the halls? Not if you teach sex education in an informative setting and give the kids appropriate knowledge. The same is true about depression and suicide; the outcome of education depends on how you approach the subject.

Teen suicide should never be glorified or exalted, because that encourages other suicides. At one school the mother of a suicide wanted a page in the yearbook dedicated to her child, she wanted a moment of silence, she wanted a day of mourning, and she wanted to come to the school and talk to the kids about her son. The school called me up to ask if they should do all this, and I said, "Absolutely not!"

I don't believe in glorifying suicide because that encourages it. Suicide is bad behavior in its most extreme form, and bad behavior should not be glorified. If you make it a big deal then other lonely, hurting kids will think that if they commit suicide they'll get some attention, even if they aren't around to enjoy it. Cluster suicides are an example of glorifying the act. Kids as a group start dwelling on suicide and talking about it in an emotional, non-constructive manner. This is destructive; in effect they are glorifying death.

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In my assembly I talk very little about suicide, and a lot about life. Depression is a fact of life. Everyone gets depressed. My underlying premise is that if you deal with depression on a rational, logical level you can prevent it and can teach kids how to recover from it.

I begin the *Dare to Live* program with the introduction at the beginning of this chapter. Next I show slides. Why slides? In the public schools, kids are pretty hard-core. The average American teenager has seen 18,000 violent deaths in 22,000 hours of television viewing, plus many more murders in the movie theater, by the time he or she is 18 years old. You get a distorted view of death when you see Charles Bronson in *Death Wish I, II, III* and *IV* blowing bad guys away one week, and a week later the bad guys are alive and well in another movie.

The reason for the slide show is so that students can identify with someone who was alive but is not alive anymore. The slides are of Paul Home, a young man who committed suicide at not quite 16 years old in Clark County, Washington. The pictures the students see are included in the photos at the end of this book. Paul is not an exception. His is a very typical story.

Gresham Union High School

This is Paul when he was two. If you look closely you'll notice he is looking at his birthday cake. He is a typical two-year-old in that he is getting ready to wear it. Now my oldest daughter -she is in junior high school now - when she was a baby her favorite food was mashed potatoes and gravy. The way she would eat it is, you'd give her a spoon and she'd throw it on the floor. Then she would scoop up a handful of potatoes and she would wear them all over her face. Kids are disgusting. What can I say?

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This is Paul when he was about three years of age. That's Paul in the middle with the football. He's pictured with two cousins that he spent a lot of time with as he grew up.

This is Paul with the same two cousins you saw in the earlier picture. He's in the middle, not looking too happy about having his picture taken.

Now this is Paul with the family dog. Paul wanted a pet, and he begged and begged until his father finally bought him a dog. The family still has the dog. It is a white cocker spaniel named Snowball, and it's a lot older and a lot fatter now.

This is Paul with his older sister at camp. (In the slide, Paul is riding a donkey.) Ugly, isn't she? Actually Paul didn't have any sisters. Paul would spend every summer at his grandfather's farm in Hawkinson, Washington. His grandfather bought this mule for the kids to ride. Paul was really close to his grandfather.

Another picture of his grandfather's farm. (Paul is sitting, beaming, on a tractor.)

This is Paul with his only brother, Wayne, who was two years older than Paul.

Paul again with his brother Wayne. They rebuilt the engine of this pickup truck together and were really proud of it.

Look at this picture. This is a cute picture. This is Paul at 12 years of age. Look at him. Typical 12-year-old: ruffled clothes, big cheesy grin, dirty hands, and a skinned-up nose.

Now look at the next picture, Paul at 13. What a change! You know what happened to him? Paul discovered girls. Nothing makes a guy comb his hair faster than discovering that girls do not carry the dreaded disease cooties.

This is Paul at Christmas. It was taken a few years ago. The Home family's Christmas tradition is that they have the gift exchange early on Christmas morning and then have a large family breakfast. This picture was taken of Paul after the family's gift exchange and before breakfast.

This is a very interesting picture, because it is the last picture

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taken of Paul Horne before he died. This was taken in August before he started his junior year at Fort Vancouver High School in Vancouver, Washington.

Now, he went ahead and started his junior year at Fort Vancouver High School, and his first-period class was a health class. Mrs. Boggs, the instructor, had everyone write an essay in class on self-image. She had them title the essay, "Who Am I?"

In that essay Paul wrote that he thought himself to be extremely ugly. He actually thought he was the ugliest person who had ever lived. He said he didn't see any reason for living. He said that life at its best is a cruel hoax. He handed that essay in at the end of the period, and Mrs. Boggs read it during the day. She thought to herself, "This kid is really hurting. I need to talk to him." She couldn't find him the rest of that day, so she decided she'd talk to him the next day during first period.

But the next day Paul didn't come back to school. That night Paul wrote a letter to his brother, and in the letter he wrote: "Dear Wayne, if I stay here I'm just going to blow my brains out and that will hurt everybody. But I can't stand to keep living the way I am now. So I'm going to run away. And hopefully somewhere, somehow, I will find happiness. And if I do, I'll come home." He signed it, "Love, Paul," slid the note under his brother's door and left.

He packed a backpack, and he got about five miles from his home. He moved into an abandoned barn in the east part of Clark County. He stayed in the barn three or four days. One of the last things Paul Horne did was to take a .22 caliber pistol he had taken with him, take his driver's license out of his wallet and shoot his driver's license picture six times. Not the entire license, just the picture.

He then found a rope in the barn, made a noose, threw it over a rafter, stacked two boxes on top of each other, placed the noose around his neck and jumped off. Paul hung in that barn for five days before anybody discovered him.

As the chaplain of Clark County Fire District Five, I was called

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to the scene. It was my responsibility to go to scenes like that, to offer any kind of support that I could.

The deputy sheriff came up to me and said, "Mike, we found the young man's driver's license." That's when I saw how he'd shot his driver's license.

He said, "Would you go notify the parents?" That was my job. I drove to the address on the driver's license and knocked on the door, and Mrs. Home answered. I said, "Mrs. Home, I'm Mike Miller. I'm the chaplain with the Fire Department."

She said, "It's about Paul, isn't it?" I said, "Yes, it is."

She asked, "Is he all right?" I said, "No, he's not."

Before I could say anything else she asked, "Is he in the hospital?"

I responded, "No, he's not, Mrs. Home. Your son is dead." And I had to tell her that her son had taken his own life.

I went in the house and sat with her for four hours. During that four hours Mrs. Horne cried and cried and cried and cried, and she kept wanting the one thing I couldn't give her. The one thing I couldn't give her was her son.

And she kept asking me, "Why?" I couldn't give her an answer for that either.

It was while I was sitting in the living room of that home that I decided, "Mike, something has to be done."