Life-and-death matters

By PAULA ANN MITCHELL
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Peter Alexander had just gotten off from work two years ago, and he was feeling especially blue. To make matters worse, his girlfriend announced later that night that she “didn’t want to be with him anymore.”

That was enough to push the 19-year-old Kingston man over the edge.

Already depressed and on the prescription drug Lithium to treat his bipolar disorder, Alexander decided, at that moment, life was no longer worth living.

“I was in a depressed state, and the new medication wasn’t working for me,” he said. “For me, it was like ‘Why even be here?’”

So he flung open the door of the car traveling 55 mph in which he was a passenger and threw himself out.

It was one of six times that Alexander, now 21, tried to kill himself. The first time, he was just 13 when he tried to hang himself at his friend’s house.

“It didn’t work,” he said. “The rope just snapped.”

Alexander, a Saugerties High School student who went on to earn his general education diploma, said when he
looks back at his suicidal attempts now, it sends a shiver up his bones.

“I woke up on the other side of the guardrail, with gashes all over my body,” he said of the car incident. “It was just crazy, and now, I realize that I’m still here for some reason.”

Today, Alexander lives happily with his girlfriend. Together, the two are raising her son in Kingston.

He said he’s got clear goals for his life and wants to attend college next fall to pursue his love for creative writing and drawing. But it was a tough road to get to where he is now.

Alexander’s father died when he was an infant, and he was not raised by his biological mother. Instead, he bounced from home to home, living with an uncle and friends and eventually ended up homeless.

He is the sort of youngster Dr. Suzanne Button had in mind when she began researching the subject of teen suicide a few years ago.

“What we were finding was that suicide rates were starting to uptick nationally and regionally as well,” Button said Wednesday at her home in Red Hook.

She is a clinical psychologist and works as the assistant director of quality and clinical outcomes at Astor Services for Children and Families in Rhinebeck. A few years ago, Button said, the staff noticed that suicide attempts among those in Astor’s population were rising.

“The upticks started for us in 2009,” she said. “Really, the United States had a good 15 to 20 years of steadily declining suicide rates up until a few years ago.” But the Centers for Disease Control and Prevention statistics on suicide rates often lagged, Button added.

“So we had to do our own detective work,” she said. “At that point, we thought as part of our (Astor’s) services, we needed to start getting out there and looking at warning signs and what can be done about it.”

Through her research, Button has compiled revealing data that help her and others at Astor get the message out that teen suicide can be prevented. “Children who are at higher risk for suicide are generally kids who have psychiatric disorders or intense stressors in their lives,” she said.

That may include things like being a victim of bullying or being pushed too hard to excel in school or athletics, according to Button. Family stressors like a job loss, household discord and divorce can also trigger a child to think about suicide, she said. Other factors like lack of popularity in school or even a romantic breakup may also prove to be too much for some youngsters, Button added.

“Even a bad grade on a math test can move them to an action that can be self-harming,” she said. “so it’s very important that people know what the warning signs are.”

Things that every adult who has a child in his or her life — whether a parent, teacher or coach — should look for are personality changes or shifts in eating or sleeping patterns, Button said. Another red flag is when a youth begins engaging in risky behavior like drug or alcohol use, she added. There are also things like overreaction to a perceived humiliation like a breakup, Button said.

“The child might make statements like it’s the end of their life,” she said.

Other things adults or teen peers ought to look for are a persistent pattern of boredom, neglecting one’s appearance or even giving away personal possessions. Button said it’s important to pay attention to such signs because teen suicide is far more common than many believe.
"It’s the fourth-leading cause of death for young people," she said. “Annually, we lose about 5,000 teens per year.”

Alexander almost became part of that statistic.

Flash back once again to 2009 — just weeks after the suicidal attempt from the car — and he found himself in a similar predicament.

“People were bullying me,” he said. “I was always like a kid who tried to please everyone, and one of my friends and I got into an argument.

“My friend was like, ‘Oh, you’re worthless. You might as well kill yourself.’”

Alexander took his word and swallowed the entire contents of his prescription Lithium.

“I was in a self-induced coma and couldn’t get out of bed for a day and a half,” he said. “I was in a zombie-like state.”

Though Alexander is trying hard to stay positive, he said he still has moments when he thinks about how life might have been different if he had a normal childhood.

“I never had a chance to be a kid.” he said. It’s like a hard turn.”

Once in a while, suicidal thoughts still pass through Alexander’s mind, but he said he’s better able to shake them off now.

“I still haven’t made it to where I want to be in life, but I’m definitely not as upset or sad or depressed as I used to be,” he said.

Throughout his life, Alexander added, he’d seen many therapists. Most of the times, he added, he didn’t feel it made much of a difference.

“They would just listen to you. They’d never give you any advice,” he said.

Button said adults should step in to give advice and open the door for healthy dialogue.

“Time with and attention to your kids should never be underestimated,” she said. “It’s about having that trusting, loving, compassionate relationship with them.”

In fact, Button said the first step to suicide prevention is to “take action.”

“It’s (all about) relationship, relationship, relationship,” she said.

Beyond that, Button said something called “means prevention” is key to thwarting suicide among youths. “Don’t allow access to the means, and the impulsivity will be interrupted,” she said.

If, for example, firearms are kept in the house, Button recommended storing them in remote places or even removing them altogether. Prescription drugs should also be kept in a lock box, she added.

Above all, Button said adults should not be afraid to reach out to youngsters.

“Don’t be afraid to get the word ‘suicide’ out into the open,” she said. “And don’t dismiss their problems.
Remind him or her that you care and offer to help.”

That’s something Alexander wishes someone had done for him.

“I felt like I wasn’t here for a specific reason, and I felt like a waste,” he said.

But Alexander smiles brightly when he considers all he’s been through and how far he’s come.

“Things are definitely better now. It’s going to be all right,” he said. “I’m trying to stay positive.”