

Do No Harm
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I wrote my recent memoir *In Her Wake: A Child Psychiatrist Explores the Mystery of Her Mother's Suicide* over eighteen years. In the middle of the night I tried to resurrect my mother, to have her come alive across time, to create someone that the reader cared deeply about. It was a private exploration.

My mother died by suicide when I was four years old, after a protracted custody battle with my father in 1963. As a child psychiatrist, mother, and daughter I had a missionary's zeal (and sometimes dread) of what I might find out. I pursued any lead, combed through newspaper articles, and interviewed my family and my mother's friends with the curiosity of a detective investigating an unsolved mystery.

Neither my teenage patients nor my colleagues knew anything of this private process. I thought at times of William Carlos Williams writing his iconic poem *The Red Wheelbarrow* on a prescription pad. My healing and my dogged determination to understand about my mother's life and suicide seemed separate from my day job as a child psychiatrist. I never considered that *In Her Wake* could become a platform for me to speak to prevent another suicide, but it brought me opportunities to reach out to community groups, professional meetings, and even TV and radio audiences. I found unanticipated benefits from taking the risk of sharing my story.

Doing call-in radio shows always makes me anxious. I have done a fair amount of public speaking about such cheery topics as adolescent depression and suicide or "mad, bad, sad, in the classroom", so I am somewhat adept at thinking on my feet. However, I feel uneasy about the possibility of oversimplifying when doling out advice on the air, giving just a two-minute sound bite where I run the danger of missing the mark. One call in particular has stayed with me.

The caller's husky voice struck me initially as belligerent, but as he talked what struck me more was the heaviness, the way when someone is very depressed that each sentence seems to be constructed with an enormous, determined effort. He told me with precision that he anticipated that we all have the right to die when we are elderly and decrepit. He said ominously that he "expects to someday induce my own departure". He followed this comment with an inflated statistic about how many elderly die by suicide. He saw suicide as the acceptable, dignified way to go. I quickly tried to make the distinction between the Hemlock Society and their belief in the orchestrated termination of life. I cautioned that elderly depressed white men (I assumed from his voice that he fit into this demographic) were at high risk of killing themselves. When someone is depressed, I counseled, he is convinced that nothing will ever change for the better and that no one will care if he is gone. This is often the faulty logic of depression. At that point, the announcers faded him out and he was lost in the radio air.

After this radio show I felt particularly forlorn. The dictate for practicing doctors is Do No Harm. What if my efforts to publicize my memoir, to give my message that love lasts longer than death, my message of hope and making meaning from loss was exploiting the despair of this anonymous listener?

Exposing my life story for instructive purposes is exhausting, and at that moment I felt depleted. The publicity push of talk radio and traveling to speak at conferences with names such as the

Association of Death Education and Counseling and the American Association of Suicidology left me drained. Over the eighteen years I spent writing *In Her Wake*, I would frequently hit the wall and look for an outward sign that I was on the right path.

The day after the radio show, I went for a run to regain my equilibrium, asking for a sign that all this effort was worth it. When I returned, I opened my email to see a note from the elderly man's wife. She told me that a friend of hers had called her to let her know he had heard her husband on the radio. He was worried about how desolate her husband had sounded. She immediately sought professional help for him. She was extra vigilant and they went to a different psychiatrist than his regular one at her urging and he was admitted to a hospital that same night. With relief, she said that she thinks that he is getting the help he needed. She wanted me to know that in spite of her husband's deeply unsettling remarks, or because of it, she with her new doctor and supportive friends were able to intervene on his behalf. An unanticipated effect of writing and comfort for me risking bearing my soul. A gift.