PHOTOCOPY FOR YOUR PATIENTS

PATIENTS AS PARTNERS

Brought to you by The South African Depression and Anxiety Group



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- Ryan G. Edmonds SADAG

"I don't think I'll ever truly forgive them," begins Claudette Peterson*. "He was only 22-years-old. He had such dreams. I think it's the thought of those dreams, unfulfilled, and how he had no choice in how he left this world. I mean, yes, do you ever really have a choice with how or when we die? I guess it's more about me now. I suppose it's the feelings I am left with. I can tell you one thing – no pill can take away this pain; or the empty hole in my heart that once was lit by the living, loving smile of my only son."

Rudi Peterson* was killed in 2011 – a victim of a homophobic hate crime. A second-year medical student at a well-known South African university, Rudi was brutally attacked one night on his way to his car after leaving a movie, having celebrated the third-year-anniversary of being with his boyfriend. "They met in school," Claudette continues. "I've always loved my son, no matter what. Kyle*, his partner, was the love of his life. They had goals, and dreams, and hopes for the future. Everyone loved those boys. And how could you not? Rudi was always the brightest star in the proverbial sky; head boy; top of his class in med-school; good looking and loving. He didn't deserve this. No one does. But him of all people..."

It is common for loved ones left behind by those whose lives have been taken in a violent manner to experience many different side-effects from the emotional trauma experienced. Death, especially violent death, affects everyone differently. No one can be certain just how the survivors of such an experience might choose to deal with, or recover from, a mental and emotional blow as the one described above. Emotions can range from anger and hatred to guilt, fear, remorse and regret. "Not only were we absolutely traumatised by the news of our son's passing, but the way in which the police told us is just as unforgivable as the act of murder itself. I'll never forget the phone call: 'Is this Mrs. Peterson? Your son is dead. Please send someone to come and pick up his car. The hospital he was taken to will provide someone for you to talk to. The address is...' That was it. What had this man said? Police? They must have the wrong number. How can you do that to someone? I was sitting watching my favourite reality show. I almost carried on watching when I put the phone down. Had someone just called?" As can be seen in Mrs. Peterson's statement above, those left behind by violent death have many unanswered, often unanswerable questions. They want to know when, how, what if and WHY?

Dr Rangaka, a psychiatrist in Johannesburg, feels "the family may often blame themselves for the occurrence. The revenge brews; they feel like donning an Avenger Zorro Mask and going to annihilate anything that looks like the cause of the loss of the loved one. "Rangaka continued that the onset of grief can vary according to the personality of the bereaved person, the spirituality of the bereaved and whether they are the principal mourner who will also feel that they cannot let down their guard until after the funeral".

As a mental health or medical professional, the responsibility falls upon one to ensure the bereaved are immediately seen for some form of debriefing. Unlike the passing of a loved one as a result of natural causes, or long-term health issues, violent death often raises so many more questions in the minds of those left behind. Not only one person suffers, but friends, immediate family, extended family and their partners are all part-and-parcel of the same shared experience – our loved one was "taken" from us. It wasn't his fault. She didn't deserve to die this way.

Debriefing, however, is only the beginning of a long and often painful road. "It wasn't only that I had to deal with losing the love of my life; the one person I had given my entire heart to," Kyle Williams* states, mixed emotions apparent in his voice. "I also had to try and fathom the reasons he was killed. I know why, but the thought remains – how could anyone be filled with that much hatred for another human being? I know I'm supposed to try and forgive these guys one day. That day is not today. For the most part, I often imagine the worst sorts of punishments for people like that. Such a bright light should never be allowed to be extinguished by such darkness." Kyle was present when the attack occurred. He himself was beaten within an inch of his life. This leaves the questions: "Why him? I know it sounds like something you see in the movies, when the person left behind says he would rather swop places with the one who died. But it's a real feeling. Every day I wonder why I was spared, and Rudi not. It's been nearly two years now. The intensity of the questions decreases. The anger isn't as raw as it once was. But the questions anger still does remain."

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After much conversation with Claudette and Kyle, both courageous enough to share their experiences in the hopes that others might benefit in some way, a few interesting points have come to light:

- Those who have lost a loved one due to natural causes may not understand all the complexities of the loss resulting from a violent murder.
- People may feel anger longer, and more intensely, than from other deaths. It is helpful to find constructive ways to let one's anger dissipate over time. Survivors need to know that it's okay to be angry. A horrible injustice has been done to their loved one, the family, friends and the world no one should tell them to not feel angry, or put a time limit on their grieving process.
- Violent death has its own deeper level of denial and shock. The event might seem unbelievable, unexpected, tragic and a crime, all at once. It is not uncommon for anger, sadness, guilt, grief, fear, regret, hatred and love to all present at any given time. Whichever emotion experienced by the person it is just right for them at that time. There is no 'correct' way to grieve.
- Unresolved crimes can often cause complex and unresolved grief. It goes without saying that it will be harder to find peace in a world where your loved one was killed, knowing the murderer still walks free.
- Murder is especially horrifying to those left behind because another person's actions took an innocent life. The concept that the
 sudden loss of a loved one can be determined by another person's decision is devastating. It can also be incomprehensible that
 another person could be capable of such an act.

"Every aspect of what I have always known and believed has been tested since Rudi died," Claudette says. "I have been in therapy for over a year, and still the pain is real, and with me throughout the day; some times more than others. However, my psychologist has helped me to realise certain inevitable realities (such as these crimes are not 'personal' – those men didn't even know my son – but they were acting out on whatever issues they have). It's not like my therapist is telling me anything I don't know, but it is nice to have someone shed light on other angles, and just be an objective, unemotional third party. I don't know how I would have coped without her. I've obviously been depressed, but I think it would've been worse without the support of my therapist, and loved ones."

This obviously brings in the multi-tiered approach to treating survivors of violent death: Firstly, it is often necessary for those most affected to be put on an anti-depressant or anti-anxiety medication, the time limit depending on their recovery. Because sleeping is very often affected in such cases, psychiatrists and GPs might also choose to prescribe a mild benzodiazepine to assist. Medication is but one route to prevent loved ones from slipping into Depression, or versions of Post Traumatic Stress. Another vital element is psychotherapy of some form, to allow for reflection, and catharsis to take place in a safe environment. Support Groups for bereavement

is another wonderful tool to use, as people can hear from other survivors of loved ones who have lost loved ones from a violent death on what they might have done to help bring resolution to internal conflict, or even just to feel like that person isn't alone. Says Rangaka "The main thing about the management of grief is for the support system to be there and remove as much as possible the responsibilities of the bereaved. All communities and cultures have standard ways of supporting the bereaved-they stress that life and death are sides of the same coin and death and loss are inevitable. The Calm and reassurance brought by a priest is very appropriate, sometimes more than medication.

"The tunnel is long, and dark. Life is a little bit emptier still. Yet, slowly, I am learning that there is life after death. Day-by-day, I am choosing to live." Said Claudette. "Forgiveness of both themselves and the perpetrator are crucial," Says Dr Rangaka, "and for this they will need the time and space to process the loss at their own pace, and eventually recognising the finality of the death"

For more information on who to contact, specialists in the field, or for guidance for the patient themselves, contact the South African Depression and Anxiety Group (SADAG) on 0800 20 50 26 or www.sadag.org

IMPORTANT NUMBERS TO REMEMBER

Suicide Crisis Line: 0800 567 567 or SMS 31393

Pharmadynamics Police and Trauma Line: 0800 20 50 26

AstraZeneca Bipolar Line: 0800 70 80 90

Sanofi Aventis Sleep Line: 0800-SLEEPY (0800 753 379)

Dept. of Social Development Substance Abuse Line: 0800 12 13 14 or SMS 32312

Dr Reddy's Helpline: 0800 21 22 23

Office Lines: 011 262 6396

Website: www.sadaq.co.za