



## Healing Conversations: Giving Value to the Life of a Person who Died by Suicide

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Dedicated to the young man who chose to take his life and to his parents who chose to survive his death\*

Rushing to work for an early start at the Shriners Hospitals for Children – Canada, I decided to listen to my messages in the event an important call had come in. I often have young people consulting me at 7 am, either because of an operation that day and a child needing help facing ‘fears’, or because a conscientious young person does not want to miss school. I knew I had one such conscientious person that morning. There was a call from the mother of a young woman I was to meet that morning. She had called late the night before.

“Linda, can you call me back as soon as possible; this is an emergency.” “Oh, no,” I thought to myself. I only gave the number to Shriners patients who talk of suicidal ideas because other calls could be screened by the hospital. This young woman had expressed such ideas but had felt certain she would not act on them. As she was 21 years of age, and had assured me they were only ideas, not to be put into action, I had not informed her parents. We had worked out a list of people she could call if she felt unsafe, and she had said she would go to emergency if uncertain she could control such ideas. We had discussed vulnerabilities, as well as reasons to stay alive. “What could this emergency be?” I tried calling back, but there was no answer.

When I arrived at work, feeling extremely worried, I saw the young woman. She asked to speak to me immediately. “Linda, I want to give up my appointment this morning for Trevor’s parents”. She then hesitated before adding: “Trevor took his life early Sunday morning and they really need your help”.

My thoughts flew back to the few consultations I had had with Trevor, a lovely and talented young man who had been so sad and disturbed about falling away from the Christian beliefs of his parents. He had just gone through an extremely complex and quite perilous chest surgery for a deformity. He had assumed such risks in order to live a better life. He was booked to see me the next day. I was in shock and soon realized that I would have to immediately pull myself together for his parents. I urged myself on with deep breaths; “Be strong, be brave,” I instructed myself. Although I did not know Trevor’s parents, I could only imagine what they had been through these past weeks with Trevor so very despondent while not understanding what led to such despair in their son. “They must be wondering why he had chosen to have this

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surgery if he had not wanted to improve his life and to live,” I thought to myself. I reminded myself to be curious about what they were thinking and feeling, to ask them how they were living through this experience and not assume that my thoughts were their thoughts.

The young woman introduced his parents to me in the waiting room. I told them how very sad and sorry I was. I asked myself, “What does one say in such a situation?” I made sure not to say that I was sorry for their loss.

That was said to me when my sister had died, and at the time it felt very wrong, “Does that mean I can soon find her?” I had thought at the time. Little did I know that, yes, I could find her in a new re-membered way (White, 1988). I reminded myself to keep that in mind.

I have accompanied parents through the death of a child in my work in palliative care (Moxley-Haegert, 2015a; Moxley-Haegert & Moxley-Haegert, 2019), and also in oncology with unexpected deaths (Moxley-Haegert, 2012) but I had never accompanied parents through a death of a child by suicide. This had never happened to me.

My thoughts immediately went back to Trevor. I had helped so many other children make legacies when they knew they were dying, and I knew they were dying, (Moxley-Haegert, 2015a) but I really had come to believe that Trevor was planning to live. I did not think from our conversations, that he was planning to die. Yes, he had told me about feeling suicidal and even about those two weeks of desperation a month or so ago during which he made some attempts but more recently in our sessions, he spoke so fervently about living. He explained to me that when he tried to suicide, first by pills and alcohol, that combination made him feel terribly sick. His next attempt a week later by carbon monoxide poisoning involved driving into a garage on a cold Montreal night, thinking he would just fall asleep. However, he began feeling so sick and dizzy that he abandoned his car. It was then, he informed me that he decided this was a message from God. He was fated to live! He told his parents of his attempts and assured them that he had work to do in this world and must live. He was going to help other young people. His parents told the young woman, who had generously given up her session for them, about the suicide attempts and that was when she suggested he meet me for help.

Reading the medical notes in his file, I felt extremely sad since it was clear that he had had a very strong psychological reaction to his deformity, that had been expressed to the surgeon. This contact and discussion about his negative psychological reactions had occurred eight months prior and no one had made a referral for psychological support. I regretted that we could not have met earlier. “If so, might he have found a way to keep on with his life?” I wondered. “Did I miss something? Did I do something wrong?” We had spent some of the first session talking about warning signs that a crisis might be developing. He talked of memories of his ex-girlfriend, who had said that she was Christian but was behaving in ways that he found immoral. He said certain smells, senses and even songs might bring up the memory of her which could lead to suicidal thoughts. This young woman was finding worrisome ways, according to Trevor, to secure money. Trevor was trying so hard to assist her to find another





way to resolve her financial needs. He prayed at length as well as read the Bible. He told me that under these circumstances he was reluctant to consult his pastor as he might have for other matters to protect her confidentiality.

When God did not answer his prayers for a way to assist this woman, he began to doubt his God. The more he lost his faith, the sadder and more desperate he had become.

We also talked about what he had been doing to manage the thoughts recently. He mentioned running, playing video games with his best friend, watching movies, drawing and playing his guitar. I referred him to art therapy because of his interest in drawing. At the end of that last conversation he had stated categorically, "However, I will not try. Period! This is over". When I asked what was over, he replied, "This trying to take my life is over."

He stated that he had felt very sad and hopeless after trying to bring this young woman, whom he felt in love with, to believe in Christianity in the way that he had been taught to believe in it. His decision for surgery had been because he had decided that he needed surgical correction to live and to help others, including his ex-girlfriend.

Trevor did not know how to tell his parents that, although he still believed there was a God, he did not believe in the way they believed. "I am a theist," he said. "There is a lot of good to follow in my previous learnings, being kind, forgiving, learning from mistakes. Seeing the best in this world is something that I will not follow." Trevor's family belongs to a very close-knit religious community. He felt that leaving this faith would mean losing his family and friends. We discussed the subject of love and wondered together whether the love might be great enough to outlive a change in his beliefs. He decided it was a possibility. Trevor did believe that he was loved. He related a story of another young man of his community who had left the faith and was still part of his family. However, Trevor was still certain that he would disappoint his parents greatly with this loss of faith.

He felt that his 'deformity' now with scars from the corrective surgery, ("deformity" was Trevor's own word regarding his chest difference), would not be accepted by others. Thus, he felt with the loss of faith he also lost an accepting community regarding 'deformities.' We explored the possibilities that there are others in this world who accept 'deformities' even if they were not of his faith. We wondered together what he might be able to do for Shriners Hospital for example, where every patient has a 'deformity' of some kind? We explored the implications of 'deformity' and how his negative feelings about having a different body from others might be culturally developed from our Canadian society and did not have to be taken for granted as true. That even the word 'deformity' is a culturally created word. He thought maybe he could be of help to other Shriners patients.

Regarding accepting deformity, I contemplated inviting a past colleague as an outsider witness (White, 1995) to speak with us. She is a young woman who is wheelchair bound, due to what is known colloquially as 'brittle bone disease.' She is currently studying to become a clinical





psychologist. As a prior Shriners' patient and later part of our employee community, she had assisted me several times previously, telling her story of how she managed to escape from shame of deformity and fear of others' judgements. Those consulting her had found these conversations helpful. She is such an inspiration and has many humorous stories. But now, he had died. Taking his own life. None of these ideas could be put into action.

When Trevor and I had further conversations together we spoke at length about his plans for life and for living. We explored the idea that even with his altered faith, he was creating his own but slightly different moral code. These discussions seemed to give him hope for finding a new life without his former religious beliefs. I had written in his notes that he had said, "I can take what I have learned and try my best to be a good person". When I asked how he thought he could use this new moral code he replied with, "I have to find new hopes."

I learned that Trevor was a musician, an artist and a writer. He had planned to use his talents to promote his past faith and now he had lost his goal in life. I remembered in detail his creativity. "I was writing a book trying to get through my current life story troubles. My character had to redeem himself for mistakes he had made. That person is really me". "Are you thinking that you have made some mistakes for which you need redemption?" I asked. Trevor answered, "Maybe I could go and take fine arts at Concordia University." I realize now that he did not answer the question of redemption and mistakes.

I now think that in a manner of speaking I had been doing palliative care practices with him as might all narrative therapists in that we are always creating legacies. The book he was writing might now become a legacy that his parents could appreciate. Trevor had planned that his main character, really himself, who lived in a completely different Trevor-created world, would die. We talked of what the ending might be now that he planned to live. He stated when he left this last session; "I have some ideas that I can use to write a new ending to this book. Do you want me to bring this to our next session?" I replied with a hopeful, "Yes." Maybe I was too presumptuous. I truly expected to see him another time.

All these memories were going through my head in a whirlwind as I invited Trevor's parents into the room. I felt that it was probably too soon to discuss legacies with his parents, even though Trevor and I had discovered resources, hopes and dreams, which could now allow him to leave legacies. He had written a book, he had his art, and he told me that he had recorded music with his guitar. There were the plans of finding a way to use these arts to help others.

However, in this beginning of our journey together with his parents, I needed to listen to their pain, listen to their story. We were challenged that morning, because at least three times there was a knock at my door. This was very unusual because when my door was closed, most of my colleagues knew I was with someone. Finally, I answered the door since the knock was so insistent and persistent. I discovered my lovely supervisor standing just outside. She explained that she and my colleagues wanted me to know that they were there to support me at any





time. This knowledge gave me strength to return to the room and have courage to start my uncharted journey with Trevor's parents.

"How does one start such a journey on the day after a child has died by suicide?"

LINDA: Again, I want you to know how sorry I am. How do you feel that I might be of help to you?

Trevor's mother (MANDY): I need you to hear what happened. We were so sure he had decided to live. (I identified with that). He had made an appointment with you for tomorrow, and also made an appointment with the art therapist.

Trevor's father (BRIAN), interjected: I asked him how strong the suicidal thoughts were, just Saturday morning, the day before he died. He died in the middle of the night sometime between three and four am. Trevor reassured me by saying, 'Dad, you know I have decided to live'. And he went to the church youth group.

LINDA: It sounds like you were working really hard to be sure that he was safe. Is that so? (This felt like such a feeble response).

However, Trevor's dad's answer seemed to suggest appreciation of this question:

I don't know what else I could have done! He was sleeping in our room for the first few nights after he told us about his suicide attempts; then he asked to sleep back in his room. He had his computer set up there and he liked to play both games and his guitar late into the night, and we thought he was better. He seemed better. We had taken him to see a psychiatrist a few weeks ago and they kept him over night and then discharged him the next morning. We figured if the psychiatrist thinks he can come home, he must be OK. Actually, two psychiatrists sent him home, first from our local hospital, they sent him home with medications, then we took him to the city psychiatric hospital, and they sent him home. We asked for a diagnosis and they said, 'Well, here we are not big on diagnoses. They just suggested he keep seeing the psychologist.

LINDA: Would you say that you were trying your best to get professional help for him and thus thought you could relax a little and let him sleep in his own room?

BRIAN He was almost 19 years old and had confided in us. We had to trust him at some point, though we would both wake up in the middle of the night and go down to his room and check on him. I asked him almost daily, 'On a scale of 1 to 10...' and every time Trevor answered with 'Zero'. The local





counseling center would call him every day and ask him how he was doing. His youth pastor contacted Trevor regularly and took him out to coffee to talk with him. I took him out a few times for coffee to talk to him outside of the home. We couldn't keep him in our room forever.

**MANDY:** I woke up about three am that morning. I prayed and prayed to God to guide me in how to keep him safe. I prayed for nearly an hour. Then I got up. I thought of checking Trevor's room and then I felt, no, he went to the church group last night, he said he was fine, so I decided not to check. In some ways I am so glad I did not check. I do not think I could have stood it, to find his room empty and know that he was dying while I was praying.

I thought it might be helpful for her to understand more about this.

**LINDA:** Mandy would you be willing to help me understand what it means to you that you prayed that whole time?

MANDY paused as she considered my question, she seemed to want to think about this question:

God was telling me that it was his time to go. Trevor had been suffering so. He could not stand it. That is what he said in his note. He told us not to blame ourselves, that we were good parents, but that he was suffering too much, so he had to go. The file where he wrote the note was called, 'I am sorry'. I know that he is no longer in such pain, but I am in so much pain now. If only he had known how much I love him.

I worry for my husband, Brian, who found him hanging in the garage and had to cut him down. He dropped Trevor because he was so heavy. I worry that my husband will not be alright.

**BRIAN:** I didn't know how I would tell my wife. How will she stand this? She is not so strong physically and has many family members not so strong psychologically. I went to try to gently tell her and she insisted on seeing the body. She wanted to see him before we called the police. I didn't want her to remember him like that.

**MANDY:** I had to see my son. I had to hold him one last time.

**LINDA:** Does that mean you were showing him your motherly love or were you trying to figure out how your heart would not break, how to hold your heart together or something I totally could not even think of?





MANDY: I think it was a bit of it all. I didn't want the police touching him and moving him but now I don't know what to do because I cannot get that image out of my mind. That was not my son lying there on the floor.

LINDA: Sooo that was not your son lying on the floor. What are your thoughts about what your son is like now, or where he is now?

MANDY: I know that he is with God. He is no longer in harm's way; he is safe.

I tried to formulate my next question.

LINDA: So, (so is a word I realized I use as I try to organize my thoughts and think of what I want to ask), if you wanted to replace the image of something that is not your son with another image that is your son, what image would you want to be thinking of?

Mandy paused and then she actually laughed. What a lovely sound for this moment. I truly felt it was not that the situation was in anyway lightened, but I could see her eyes go off to the side and she was for a moment somewhere else.

MANDY: He used to say, even sometimes recently, "Mum, look at me, see how fast I can run". That is the image I want to hold on to. That was a bit of the Trevor that we lost when he was about 12 years old. He changed then. He withdrew from us, isolated himself in his room. Maybe something about his deformity at a time when boys care so much about their bodies. But sometimes he would come out of his room and say, "Mum watch me". Just like that lovely little boy he used to be. That is my 'true boy'.

I do not know whether you know or not, but we have a lot of mental illness in my side of the family. I was especially concerned about his hatred of his brother. I thought he had experienced some trauma he was too afraid to share with us that kept him isolated and angry. He denied it when I asked him. I kept searching for anything else I could think of and asking everyone I could think of like doctors, counselors, social workers, other people who had sibling hatred in their family.

Yes, he had this deformity and I know that for teens that can be terrible. But it seemed to me to be something more. Then we found you, and I felt hope, he was coming for therapy; he was even going to start art therapy; he had seen a psychiatrist; he was going to get better. But then, it was too late.

LINDA: If you could hold that image of that little boy, your 'true boy' and that young adult who is saying, "mummy watch me, see how I can run", what





difference might that make to this horrible pain that you are experiencing now, and that horrible image of something that is not your son?

MANDY: Yes, it would make a big difference. That is what I need to remember.

LINDA: Would you be interested in having some more conversations so that we could re-member Trevor as Trevor used to be before he withdrew from you and to learn what you appreciate about him?

Mandy responded with a strong “yes.” Brian said that he felt that Mandy was the one who really needed the help.

BRIAN: I think I will get the help that I need from my community and from my pastor.

I asked Mandy if she might want to bring some pictures, or other memories of Trevor to the next session, cautioning her to do so only if she wanted to and thought it might be helpful to her.

LINDA: I don't know that person who asks his mum to watch him run, your 'true boy', and maybe the pictures could introduce him to me.

After this session, I reviewed the chapter that Michael White (2011) had written called 'Engagements with Suicide' to get some ideas regarding how best to work with this family. Michael stated that often the person who took his or her life could become invisible and the suicide could be cloaked in shame. I did not want this to happen. I thought about how I could discover from the parents the values or skills required of Trevor to both live and to take his life? What kind of decision would this have been to make? Was the suicide mindful of what Trevor gave value to throughout his life? And thereby, we could try to link his living life and the decision to take his life to what he stood for so these parents could still feel connected to Trevor. I also remembered Michael saying that some cultures think differently than ours about death by suicide. I remember the old Japanese Samurai movies where suicide was considered an act of honour. And as Michael had suggested, perhaps it would be possible to investigate and honour the 'insider meaning' of suicide.

I also wondered if a book I had co-authored with parents whose child had died of a medical condition, might provide helpful ideas for the family (Moxley-Haegert, 2015b).

The next session, both parents arrived for our therapeutic conversation together. They wanted to know what Trevor had told me in our sessions together. Again, my thoughts went into a bit of a whirl. “Do I let them know that it was a change in faith that was troubling him? What about what he had told me about this girl who he was so worried about? They may know her.” I decided to begin more generally and to refrain from discussing the information about the girl that Trevor did not want to tell the pastor about. I did not know whether they would have the right to read his file because we are a children's hospital even though he had turned 18. I had







given no such details. (I always work out with the adolescent I am consulting regarding what they agree can be placed in the medical file, after explaining the limits of confidentiality and the way we, at the Shriner's Hospitals for Children, work as a team). I was conscious that this was all new to me. I had never, even after many years of working with those who expressed suicidal ideas, experienced someone who had consulted with me end their life by suicide. "How do I navigate this? What are Trevor's rights? What difference does it make if I do not tell them about his change in faith? Could telling cause them potential harm?"

However, I soon found out that they had read what was on Trevor's computer. They knew about the young woman in Trevor's life and how he felt so hurt because of decisions that she was making. They also knew that he questioned their faith. I decided to discuss the potential legacies that Trevor and I had discovered together. In particular, I thought of the book he told me he was writing.

LINDA: Did you find the book that he was writing, and the 'Trevor-created new world'?

MANDY: No. We did not find that on his computer. I wonder where he put that book. I would love to read it. However, what I really want to know is what diagnosis you gave him. Did he have a mental illness?

It was evident that Mandy was interested in other things than legacies right now. In narrative therapy (White & Epston, 1990), we want to follow the lead of the person who is consulting us. This question, however, produced another dilemma for me. I wondered what it meant to them to have a diagnosis. Psychologists have the right to diagnose mental illness, but this is not my usual way of working and I had not been thinking in diagnostic terms but in therapy terms. When working with a young person I am aware of how diagnoses can make it hard to distinguish the young person from the problem (See Marsten, Epston and Markham, 2016, Chapter 7 for more information on this idea). I wondered if a diagnosis could help these parents heal from their grief.

LINDA: What would it mean to you if there had been a mental illness?

MANDY: Well I have a sister who has been diagnosed with bipolar, and an aunt and my grandmother had agoraphobia and my father may have had depression, so it runs in the family. Having a diagnosis would mean a lot to me because someone else who met with Trevor would have insight into his life and I so desperately want to know everything about my son, especially now that there are no new things to ever learn about him.

LINDA: Well Trevor and I named the problem 'Trauma'. He felt that some of his experiences with his ex-girlfriend were very traumatic, and he felt that having a deformity was traumatic. When his ex-girlfriend did not want anything more to do with him after he tried so hard to help her, that felt





like trauma for him. But he also told me in our last session, “It seems pretty amazing with all that ‘trauma,’ I still want to try to live”. Do you think, ‘trauma’ just got too strong for him?

**BRIAN:** I think that trauma got stronger when he was playing his videogame with his best friend and the game died. His friend whom he was playing with said that the last thing Trevor said to him was that on his screen it said, ‘Fatal Error’. He then wrote a letter to the girl asking her if it was worth it not changing her life and doing wrong actions. He actually used much stronger language. That also was so unlike him. We have another letter he wrote this girl that was just beautiful. Then he wrote us a most beautiful letter. He can write beautiful letters. In his goodbye letter he said he was only trying to survive so that he could join the military and die in battle. But he was too ‘tired of fighting’ and gave up and that is why he committed suicide. He had to have had the idea of hanging because we discovered that he had studied knots on his computer and he had a rope, so I don’t know if trauma was what it was or not?

**LINDA:** Might it help to think that ‘trauma’ had gotten too strong, and that the game ‘dying’ and ‘fatal error’ somehow gave trauma its hold on him and these ideas of suicide or something different?

Brian thought that this would be better than thinking he had planned suicide all along and was being devious to them all in making them believe he planned to live.

**MANDY:** The letter we have that he had written before is of grace and love and kindness and mercy.

**LINDA:** Could it be a bit helpful to remember how he was able to write such beautiful letters? Could that be more helpful than trying to understand whether he was planning this or not? Or maybe, do you think Trevor was a ‘mindful’ young man? A ‘true boy’ of grace and love and kindness and mercy? It seems that ‘mindful’ might be a word to describe the beautiful letters and the having a rope and studying knots?

**MANDY:** I actually have his note here to his friend. He just said there was some sort of error. At 2:57, the game ‘died’ – I do not like that word anymore but that is what they use. At 3:08 he wrote to this girl. And at 3:21 he wrote to us. I think he was going through a spiritual battle. It was Trevor’s own will to go through with the decision of death. Yes, I think he was mindful all his life. But I think his death was really something like depression trapping much of him inside a sick mind. Maybe that was trauma caused.





LINDA: Might it be helpful to find your own term for this feeling of Trevor being trapped – trauma caused or something different?

MANDY: I woke up at three am that night and I prayed and prayed for Trevor. I prayed for angels to circle him wing to wing. Angels are ministers sent to help. I wanted them to help break the chains that bound him. I realize now that the angels were also for my benefit. The breaking of the chains I thought were to free him from pain. I just did not know that this freedom would be for him to die. I do need some help with the memory of his body and how it looked after the hanging. It haunts me.

LINDA: Well might that be something that we can work on next session if that is something you would want?

Mandy came to the next session with a photo book. She had created a photo book of her family every year and wanted to show me the year that Trevor changed. She also wanted me to see some of the pictures of the beginning of that year when he was the happy little, ‘watch me run mummy’ boy, her ‘true boy’. There was a note to Mandy written by Trevor saying, ‘I love you the most in the hole world’. Written exactly like that. I discovered from Mandy that even his voice changed that year. He would speak, either in a robot voice or in a kind of baby voice when he was asking, ‘Mummy, come see me’. She discussed how she so much wanted to help her son. She had searched and searched for help. Mandy said that she and her husband had telephoned the psychiatrist from the psychiatric hospital which had kept Trevor overnight. The psychiatrist stated that Trevor had been diagnosed with ‘major depressive disorder’. Both Mandy and Brian seemed relieved to get such a diagnosis.

(Trevor’s dad later explained the meaning of diagnosis for him:

Trevor’s suicide provoked not only trauma and grief, but an investigation. Suicide was not something we, in our wildest nightmares, would ever think our family would struggle with. Trevor was so talented, so full of life and self-confidence. He was the first to get a full-time job on his own, buy a car, buy his own cell phone, get a bank account. When we got the diagnosis from the psychiatrist that he had a Major Depressive Disorder we felt that it explained so much to us. In his last weeks I saw his feelings of worthlessness and inappropriate guilt. He felt he was a failure. Suicide presents multiple layers of trauma and inquiry that are not present with a simple tragic death.

During this session Mandy explained that she was feeling very upset having to live in this world where her son had hanged himself. She wished she had a chance to get help for him early enough.

(Brian later recounted that he felt similarly:





This has been hard for me too. Now that we have a diagnosis, every fatherly instinct in me craves the chance to go back in time to help him through this illness, and to explain it to him. He suffered all those years thinking he was just a jerk. He couldn't help it. He was suffering and didn't know it had a name. This had to play into his perception, somehow attaching to his deformity. He suffered alone, in my home, under my care, without any help. That destroys me inside. This is an added layer of severe grief in my heart, almost unbearable).

Mandy and I did some work around the image of seeing her son dead and how it made her feel that she failed because she could not save him. She also, in times of great distress, would feel that she was not loveable enough because it felt at times that Trevor did not love her. We discussed the possible relationship of this, 'I am unloveable' thought to her thoughts as a young child when her mother left the family for another man.

Mandy wanted the little boy Trevor, who needed her to watch him run, to stay with her. She remembered again praying for her son during the time that he was organizing to take his life. She believed that praying was for God to protect him and to protect herself. She kept going over and over what Trevor must have done that night. But she came to the realization during our conversations, that she was praying him out of this life and into another life without pain and with God. She stated that this realization was helping her feelings of panic reduce in intensity. She also explained that she believed it was Trevor's responsibility to make his own decisions now that he was almost nineteen, and it was her responsibility to pray for him.

When I arrived at work the next week I had a telephone message from Brian. He was concerned that Mandy might have the same diagnosis as Trevor. She had been very upset that morning and wanted to climb on the roof to be closer to Trevor. Brian restrained her and asked her if she was feeling suicidal. She said that she was feeling sixty percent suicidal. I phoned him back and suggested that Mandy might be feeling intense grief. I told him of other parents I had worked who had a child die explaining to me such very strong feelings, especially at first. It had only been a few weeks since Trevor died. I also stated after talking to Mandy, that if either of them were worried about being suicidal they could go to the same psychiatric hospital where Trevor had been admitted. They did decide to go.

Mandy came to her next session saying that the psychiatrist told her that she was having a normal grief reaction. I was beginning to like the psychiatrists at this hospital who were not so ready to think of DSM diagnoses and medications. Mandy had been given Ativan by her family doctor after Trevor's death and Mandy believed that maybe these medications were making her have suicidal ideas. She therefore had decided to take no medications for now and was feeling better.

LINDA: Mandy, are you worried for your life now?





- MANDY: No, I am not worried that I will actively do something, but I sometimes wish that I would get the Coronavirus and die. I have weak lungs and I could just die. I miss my boy so much.
- LINDA: Does that mean that you feel that you do not have reasons to live anymore?
- MANDY: That is exactly what my pastor said. He reminded me that it is not my time. That my work is not over here on earth. I have three other children and many other reasons to live. I am reminded that Mary, mother of Jesus, suffered too. She had to watch her son be tortured and see her son die tragically. I was watching my son in a different sort of torture. I just need peace. I just need God's peace and I find that in scripture.
- LINDA: How can you live God's peace?
- MANDY: Knowing that Trevor is in heaven with God, and I will be there with him some day, but he will be waiting so long, too long. I can read the Bible and it brings me peace. But that long time of waiting hurts me. However, I will see him again.
- LINDA: Do you believe that the time in heaven will be the same as the time on earth? Might it be that Trevor will only feel it as minutes when you feel it as years, or something at least differently than here?
- MANDY: Yesss. Time would be different. He is in heaven after all. And here I am and here I will stay, even if it will be hard to live in a world without Trevor. I know I tried. At least I do not feel guilty.
- LINDA: Do you see this as a gift, knowing that you did the best you could and tried so hard to help him?
- MANDY: It IS a gift. I never thought of it that way. It is truly a gift; I tried so hard.
- LINDA: Mandy, what are some of the many ways that you think the pastor was thinking of when he told you that your work on earth is not over?
- MANDY: Well we have decided to help others who might have problems like Trevor's and use his life and him taking his life as an example and a message for others. We want to help parents to find help for their children. We are working on suicide prevention. Thank you for giving us that document that can be used in the youth group. We plan to have his funeral as both a homage to Trevor and as a message about youth problems and ideas for how to get help.



LINDA: Do you think this is showing some of your hearts concern that you showed for Trevor now being used to help other young people in difficulty? Trevor wanted to help others as well.

MANDY: Yess, I must not forget that this is my plan for life, and this was Trevor's plan. I need to help other children to get the services that they need.

Our fifth session started just after isolation for the coronavirus began. Mandy was having the telephone session in Trevor's room where she could have privacy and thoughts of Trevor's death felt very close to her heart.

MANDY: I am having a lot of incorrect thinking. I wake up every night at the time he died. I am so sad.

LINDA: Mandy, could you help me understand something? When 'incorrect thinking' tries to take over, what is it saying to you and how do you respond to it?

MANDY: It is that coronavirus idea thing. I could easily go into public and expose myself to the virus. 'Incorrect thinking' keeps saying, this could be good, this virus. I would probably die with my lung problems.

LINDA: Might 'incorrect thinking' be kind of 'missing Trevor' thinking? You said last week, 'I am here to stay', but staying might still be pretty challenging?

MANDY: Yes, I AM here to stay. I just don't like a world that I have to stay in when my son died by suicide. We were looking for the book and for notes about it. We did find some little notes and a long letter. I printed them out. They are precious. That was my 'true boy'- those notes and letters.

LINDA: Mandy, I wonder if you would be so kind as to describe that precious 'true boy' for me?

MANDY: I remember two-year-old Trevor with his red tennis shoes. He had a scooter and he was so agile that even at that age, we put him on the scooter, and he rode in circles, his little shoes so eye catching. His bright blue eyes so sparkling. I always wanted a fair boy who looked like my side of the family, the others are dark haired. I began praying, asking God specifically if my next baby could please have blonde hair, and blue eyes, and if it weren't too much to ask, curls on top of all that. God gave me it all!





He had a yellow and black coat. He was so happy and thoughtful then. He asked such hard questions about God. I am so blessed to have been his mum.

LINDA: Is that one of Trevor's legacies to you, to give you the opportunity to be so blessed to be his mum? Do you have some ideas how to get even closer to the reasons why you are so blessed to be his mum, while still living in this world that you have decided to stay in and find the precious 'true boy'?

MANDY (very tearfully): I blogged daily, writing little stories about all my children. I was recording it for my family who were far away. They are invaluable now. I sleep with his two stuffies (soft toys) called Nache and Thunder that he always slept with. I kiss them on the nose and tell Trevor that I will take care of them for him.

LINDA: Mandy what do the tears speak to?

MANDY: That I forgive him. I am in his room and his smell is disappearing. That frightens me.

LINDA: Do you have some ideas how you can keep his smell closer to your heart and soul?

MANDY: I have no idea; it scares me. I am losing him.

LINDA: Could you describe the Trevor smells?

MANDY: The smell is a bit of outdoors, like sun on wood; it is warm skin, Trevor's warm skin. Independence.

LINDA: We are creatures of words. Would it be helpful if I write this down on a separate paper that I can give to you when we are out of this coronavirus isolation or mail to you now?

(I always make notes during the session that usually those consulting me can take with them, but I am doing these sessions by telephone and I wanted to write these beautiful ways of remembering Trevor very carefully. I thought I might type or send all our re-remembering in a written narrative letter (for more information on therapeutic documentation see Bjoroy, Madigan, & Nyland, 2016; Epston & White, 1992; Ingamells, 2018; McAllum Pilkington, 2018; Paljakka, 2018).

LINDA: Mandy, I am curious, what does independence smell like?

MANDY: It smells like sun on wood. That's my 'true boy', independence. Oh yes, please write it all down.



LINDA: I am writing this, 'sun on wood, a bit of outdoors, warm skin, Trevor's skin, independence'.

Do you think he can feel that forgiveness?

MANDY (very softly): Yes, he knows that I forgive him.

LINDA: What do you think that would mean to Trevor to hear you saying that you will look after Nache and Thunder for him?

MANDY: He would know that there is nothing he could tell me that would make me love him any less. But it is a bit painful to think of bringing him back to hear what I am saying. I don't want him to know that pain I feel of his loss. You know a mother is only as happy as her saddest child.

LINDA: You don't want him suffering through knowing the pain that you feel. Do you believe that he is suffering now?

MANDY: No, he is at peace. His body and mind are healed, in the presence of God. HE NO LONGER IS SUFFERING. His place and his job is in heaven. But he left us with a job on earth.

LINDA: What is that job on earth?

MANDY: My job now is, as is part of his job, to help others who suffer like him. I was reading Genesis 50:20. It is the story of Joseph. His brothers wanted to kill him, and he managed to escape and save Egypt. He said to his brothers when he saw them again, 'You meant evil, but God meant it for good to bring this about'.

LINDA: Mandy, can you help me understand your meaning of Genesis 50:20?

MANDY: Well, we are going to help others benefit from Trevor's experience and his death. God meant it for good. I hope he knows now that what he did was not him but the illness, and we will help other young people who are suffering like he was.

LINDA: If he were to hear you now, even though it is a bit painful as you told me, what might he think of your idea of carrying on his wish to help by helping other young people who might be suffering like he was?

MANDY: He would feel relief that he did not ruin our lives. If he could have stayed on this earth longer, he would have been able to turn around the voice of depression, he would have had more tools in the toolbox. If he only will know that his dying was not for nothing. That we are going to use his life and his way of dying to help others. He would know that he didn't ruin





our lives, and his life had meaning. He actually is going to help others live a better life than he was able to live.

LINDA: Mandy, I can't imagine a better legacy for Trevor than the one you plan to bring to us all. I am so curious about your ideas, how are you going to make Trevor's life and death be helpful to other young people who are suffering. (I realized that in my role as a narrative therapist, I need to lead people to find their own legacies of their child. This was a much more powerful legacy than what I had first considered, which was the book Trevor was writing).

MANDY: Well we have developed this website. It is to help others find hope. We are discussing what tools he had and what tools we wish he had. We are going to give resources, where you might go.

LINDA: Yes, you told me about how you organized his service to be both a memorial to Trevor and a help to others. Would you be willing to describe this in a bit more detail?

MANDY: Well, we had twelve counsellors come to be there for the young ones of our congregation. They are all so close we were concerned about them. The counsellors talked to the young ones on an individual basis and gave them ideas of where to go if they need help. We had moved here from another country and did not know what services existed. The surgeon who did Trevor's chest surgery asked if he could have Brian's talk at the memorial service. Brian talked about what it was like to be a parent of someone with such problems that Trevor had suffered from. The surgeon hopes to use this in some way to help other children at the Shriners with deformities as a way to try to prevent such an outcome as happened to Trevor.

LINDA: Oh, I am very interested in how he might use this. I will talk to him, perhaps I can be of some assistance to your ideas and to his, in relationship to the Shriners Hospital for Children.

What would you like to do about appointments?

MANDY: Well I know you are so busy, Linda.

LINDA: It is truly up to you.

MANDY: I think I would be OK for two weeks.

Mandy called and cancelled her next session. I had planned to spend our last few sessions exploring ideas about how she and Brian could help other young people. We were still in





isolation for coronavirus isolation when we began to co-write this article. Mandy told me again about blogs when Trevor was so happy and living what she called a wonderful life. She was reading books to understand suicide and discussed them with me. She would still question the cause of Trevor's challenges. She talked some more of all that she had done to try to find the cause when he was alive and to get help for him. With a few questions she came to the conclusion that Trevor died to protect his parents from more pain, pain that he lost his beliefs, pain that he couldn't feel better.

She also talked of her 'true boy' who could be around even later in life. For example, she mentioned how he wanted to be so independent, he wanted to pay for his own counselor. He even wrote in his 'I'm sorry' note that they could sell his car, perhaps to pay for his funeral.

She suggested this was his warmhearted way of showing that he did not want them to be in debt by his death. And most importantly she discussed how she believed Trevor had a healed mind and a healed body and that now he is free. She read to me his wonderful, kind letters. She told me beautiful stories of navigating the parenting journey as Trevor developed from childhood into adulthood and of walking alongside him even when he was making choices she would have preferred that he not make.

But mostly Mandy described her hopes and dreams for being of service to other youth, to follow Trevor's hopes and dreams. She understood better what Trevor stood for. Mandy believed that God has a purpose for every life, and both her purpose and Trevor's purpose was to call greater awareness to youth challenges and help youth with this calling. There was no more talk of catching the coronavirus and meeting Trevor sooner. Mandy felt that she and Trevor now had a common, earthly goal that her husband and her complete congregation were getting involved with. She felt that this was keeping her 'true boy' in her heart and soul. Mandy requested that we do one last bit of work together when the isolation due to the Coronavirus was over. This was to work to help her manage better some of what might be called day and night dreams of the last image of 'her boy who was not her boy'. She planned to replace these images with her 'true boy' and with other young people who were living instead of dying. Finally, Mandy explained to me, that somehow, Trevor did not disappear but will live on in the helped lives of others.

Brian wrote to me when I asked him to edit this paper. In his letter he expressed words similar to those I have heard from others who have had a child die. They were so poignant and heartfelt that I wanted to honour his thoughts here. This is Brian's perception of his particular experience of having a child die by suicide.

I am not the man I was before February 8, 2020. When Trevor died my life changed. My wife changed. My family changed. I changed. And I'm trying to come to grips with the new me and my new world. Life has a different meaning. My faith has more gravity. My perspective on my life in this world has been elevated beyond the temporal in a way it has never been before. When I walk beyond the curtains to grief and back into life where my heart and mind are





released from the shadow of my son's suicide, who will I see when I look in the mirror? My grief is not just grief. A transformation is occurring. A lot of people who lose children have a very difficult time getting past the loss, as if their legs have been cut off from under them, and they will never stand on their two feet again. I have been in the depths of these waters, but I will not stay there. I know that these ashes that cover me now will be redeemed by God.

I feel so honoured to be a part of such conversations which could explore what Trevor gave value to and then to witness Mandy and Brian finding ways to use what Trevor gave value to help others. I was able to assist them to develop Trevor's legacy and to carry it forward with their family and others who loved him. I feel that this journey that we took together was also a healing journey for me.

I got to know both parents so much more through our co-creation of this paper. I have co-written papers before with those who consult me and am always so appreciative of the experience. I am happy to add Mandy's final remarks when she returned this final draft to me:

I also just want to say thank you again. As I was reading through the paper as a whole, it helped to be 'counseled' again. In grief, your mind so quickly forgets what you've determined, or learned. Now I will have this paper to get a quick reminder of the progress and conclusions you've helped me with. Brian wants to say he really enjoyed working with you on this paper. Me too! Blessings.

\*All names are changed at the request of the parents. The young man's parents have read this version of the paper and feel comfortable for it to be published so others can learn how they managed to survive the almost unsurvivable and to carry on their son's legacy wishes.

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