

Personal Tragedy – Community Emergency

A gifted artist, young mother and friend
lost all hope... took her own life.

Her death,
a blow to both family and few remaining friends.

Her suicide was a personal tragedy, but
I also believe, an emergency
that our community failed to see coming.

Whether death was preventable
may never be clearly determined.

True, she distanced herself from her family.

Alienated her few remaining friends.

But, indications of her physical ailments,
legal difficulties, mental and emotional distress
had been noted by case-workers, counselors, medical personnel.

She could not hold a steady job.
Had no income, savings or insurance.
Lost custody of her two children.
Suffered repeated migraine headaches so debilitating
she repeatedly went to the emergency room for temporary relief.
When at an earlier point there was insurance,
she was seeing a neurologist, though treatments brought no lasting relief.
She developed a series of medical ailments;
untreated, or when medications were prescribed,
did not respond.

As neither case-worker, counselor,
doctors, or drugs were able to help her reclaim
control of her well-being... she may have lost hope.

And felt her life was simply
too much to bear.

For me her death raises questions having no answers.

Are we collectively able to recognize
how and when personal emergencies are also
community tragedies?

Could, or can we, learn to see connections
between needs of the former, and
the latter's ability, means or will to respond -
and eventually impact the kind of community we live in?

People injured in car accidents...
Folks or animals trapped in burning buildings or barns...
Damaged homes and downed power-lines...
Rescues required from rising flood water...

These emergencies are visible and direct:
The need for action apparent, and later
friends and neighbors offer support, hold benefit suppers ,
communal barn raisings.

But how do 'we' respond
to less visible emergencies?

The personal ones,
particularly those where there may be a perception...
some of an individual's struggles are (were)
self-inflicted?

How well are we willing and able to care for the most vulnerable among us?

Asked what happens when a patient can no longer pay...

Her neurologist replied:
"She will simply ball-up on the floor
writhing in pain."

Such a response seems hardly adequate or compassionate.

At the time of her death
there was no coherent, continuous communication
between multiple caregivers.

Given various patient confidentiality policies,
no comprehensive holistic plan could be developed
addressing her diverse needs
in an integrated manner.

Had she received the care and support necessary
to reclaim, even a modicum of control over her life,

What kind of contribution might this talented,
but deeply troubled person, in time,
afford our community?