

UNTITLED

BY PHOENIX WANG

Desire. Not in the seductive, sultry, modern-day, romancing way, but in a longing, deep need to quench your soul, and connect in ways you've never thought possible. That is the kind of desire I need in my life. Maybe it will keep me alive.

I've been searching for an answer, an antidote to my tragic downfall. I am chronically suicidal. It is the ocean from which I desperately try to pull away from. It is violent, the chasm is unending, and the allure transfixes me. Somehow, my therapist believes that listening to my desires will buoy me to safer shores or, even better, help me ride the waves. But I am at a loss. I have tried everything and anything, and I still feel as if I am running out of time, exasperated. Each crisis could be my last go.

It started at age fifteen. I barely made it to graduation. The teachers were kind but didn't know what to make of a student who had straight A's all their life and was suddenly flunking out their senior year. That same year, I had an English teacher who nurtured my passion for poetry. One day after school, I confided in him about my suicidal thoughts. He sat there with me, sharing several reasons I should stay alive. None of those things mattered to me, and I remained despondent. Then, maybe out of desperation, he said, "You know what? It's you and me, and that's all that matters."

Those words made a dent in me, and somehow, I made it through high school. Unfortunately, that was only the beginning of my bouts with suicide. College didn't fare any better. I couldn't concentrate, I was crying all the time, skipping class, and aimlessly wandering the city, desperate to find meaning. If I had meaning, I thought, maybe I would know how to

bear with my suffering as if my suffering didn't matter. But none of it mattered. I dropped out of art school in my sophomore year. It was then I started seeing a psychiatrist. It was also when I started to self-harm.

Self-harm was my way of coping through awkward social situations, anxiety attacks, self-hatred, and thoughts of death. When I didn't think I could stand it anymore, I self-harmed. A cool, calm, feeling washed over me. I knew nothing about how self-harm worked, I only knew that I felt different afterward. The storm would subside, and I would feel back at my baseline.

Two years into my marriage to a man, I realized I was fundamentally attracted to women. This was when being gay was not widely accepted, especially in the Catholic faith I grew up in. I felt so ashamed of who I was. I talked to a priest—the one who married us—and he told me never to tell anyone about it, that I made a vow to my husband and my God, and that I should never break it. I turned that shame into self-hatred, and because of that, my self-harm grew worse. Thoughts of suicide began to occupy more of my time.

Devastated and obedient, I stayed in the closet for ten more years. "I love my husband," I would say. "We have a family together," I would say. But it wasn't enough. I pleaded in prayer, begging my desire to be with a woman be taken away from me. I was hiding my true self in plain sight. Everybody knew, yet I continued to play the part. This affected me so much that I already had four hospitalizations by the time my son was three.

Each hospitalization kept me safe, and tried to help figure out what was wrong with me. I was also diagnosed with borderline personality disorder. For the first time, I understood my thoughts and behavior using a medical model. This meant there was the possibility for treatment and, more importantly, the knowledge that other people shared a struggle as hard as mine. As soon as I left the hospital, I created a peer support group to meet every Monday in a community

basement in the city. I would also be in treatment with dialectical behavior therapy, an evidence-based practice known to help those with BPD, those who self-harmed, and those who had urges with suicide. DBT changed my life and led me to a therapist who helped bring these changes out of me. I knew I had a fighting chance from my first meeting with her.

With DBT skills and new behaviors, I could refrain from self-harm for good. I would be lying, however, if I said it was easy. All that anxious energy, agitation, aggression, and chaos still wreaked havoc inside me, but now, there was no easy way out. I had to learn new coping skills to bring myself down, and unfortunately, they weren't as effective. Time is always the answer, but it is also its own beast. Waiting for the pain to go away when every minute became an excruciating urge to hurt myself was sheer torture. And in what seemed to happen overnight, my brain found a loophole to the slow efficacy of coping skills. It was suicide. And so, it began. The monster, as I call it, surfaced.

It waits until it sees an opening, whether it's the tortuous pain, or when I've felt too much, or have become overwhelmed with emotion and cannot contain myself. Little sensations tingle at my spine and float up into my brain, soaking it wet like a sopping sponge. It slops around my skull, unable to focus, my mind mired in this transient state. I am caught in the grips of a dissociative episode. It's ready to pounce.

The monster jumps out and pulls in right close to my ear. I can feel its breath on my face, tussling my hair. Its proximity forces me to come to terms with my mortality. It badgers me, taunts me, and pulls every possible curse word my way, belittling whatever sense of self I have left. With an imposing threat, the monster wields a gun, cocked, and loaded at the right side of my temple.

“You’re better off dead. Did you hear me?” the monster asks. “If you stay alive, you’ll remain a burden to your family. Do you know what a liability you are? You’re always in the hospital, and it will never end. Why don’t you help them lighten their load and kill yourself already? Listen, I’ll let you in on a little secret—nobody loves you. You got me? Get a gun and kill yourself. It will be the best decision for you and your family.”

Each moment, the monster plays this scene repeatedly in my head. These experiences seized me. I am no match for its constant badgering, and when I can no longer endure or feel anything but excruciating pain, I relent.

“You win, monster. I can’t live like this. It hurts too much.” I said. And the planning begins. The decision is set. A sense of relief comes over me. I have become single-minded and determined. I go to the store to buy something to kill myself, and as I walk through the parking lot back to my car, something inside me cries out, “But what about Quinton?”

Quinton is my son, my miracle baby. When my husband and I tried for a family, we knew we had to use the fertility clinic. As I became fertile, the medicine they prescribed me caused me to become suicidal in a matter of days. I was admitted to the hospital, and we decided that having children was out of the picture.

A year later, however, I was pregnant, and then, to our surprise, Quinton arrived two months early, weighing only four pounds. He was so fragile and yet determined to survive and flourish. Despite all the hope he gave me, I ended up in the hospital two months after his birth. I felt like nothing could keep me alive, not even my son.

By the time Quinton was three, I was on my fourth hospitalization. As I sat on a bed on the eleventh floor of a psychiatric inpatient unit, two psychiatrists pulled their chairs next to me, concerned. This time, I found a gun store and a gun that only cost a few hundred dollars,

something I could afford. The pain was so great I would do anything to feel something different, and the answer my brain found was by way of killing myself. Looking back, the last thing on my mind was wanting to inflict my son with a death sentence, but one of the psychiatrists set me straight.

“You know, if you choose to kill yourself, your three-year-old son will grow up to most likely die by suicide himself.” As I listened to her words, I couldn’t believe it. I was mad that she would blame me for his future death. “I can’t control how suicide works through me,” I thought. “This isn’t something I have a choice in!” This wasn’t his battle, yet she told me my actions would determine his relationship with suicide. Our deaths would forever link us. Before she finished her thought, almost as if to spite her, I vowed never again to try and take my own life.

The vow was dramatic, well-intended, and resolute. I would never hurt my son intentionally, I declared. But the reality was I was struggling. I have lived with the thought of suicide for all my adult life. Three decades. Nine hospitalizations. Cocktails upon cocktails of meds. Nine therapists. Thousands of hours of therapy. And still, the long-enduring compulsion to kill myself rises to the surface.

At that moment in the parking lot, the monster responded to my question about Quinton. “Don’t you know Quinton is better off without you?” the monster said. “How do you think he will feel when he understands why you’re in the hospital all the time, that he can only see you through a glass window, that you can’t hold down a job, and you’ll never amount to anything? What life are you setting him up for? He has the support he needs. They will raise him well. He doesn’t need you.”

I believed the monster. The plan was set. There was only one last thing I had to tend to—a promise. When my English teacher told me at age fifteen that only he and I mattered, I

promised that if ever I found myself in a suicidal crisis, I would say goodbye to him. I owed him that much.

And so, after the parking lot, I drove to his house, and we watched a college football game together. I didn't plan on telling him the details of my plan. He just knew I wasn't feeling well and could use some company. During the football game, however, something shifted. I realized he wasn't there with me out of obligation, because he was bored, or because I asked him to keep me company. He was genuinely there because he wanted to be with and spend time with me. And I thought to myself how precious this moment was, that an ordinary conversation between two human beings could mean the world to me.

I broke down and told him the whole plan. He helped me call the hospital and drove me to the emergency room. I would stay in the inpatient unit for two weeks. It didn't heal me, but gave me time for the demons to pass, the urges to dissipate, and my thinking to gain perspective. I realized I didn't want to die; I wanted the pain to end.

That last hospitalization, the ninth one, was only a few months ago. It's hard to trust myself, to know that I'll make it out of a situation alive, that tomorrow will come. But I guess that's my lot in life. This is what it feels like to live with chronic suicidality.

I met with my therapist this morning after discussing my last suicidal crisis. "Phoenix," she says, "If you would only get out of the way of your desire and let it come to the surface—frequently and regularly—you would be a force to be reckoned with. As long as I've known you, I have asked you: what is it you want, Phoenix? What is it? What are you so afraid to say out loud? The more authentic and genuine you are, the more alive you have behaved. True? If you deny what you want, your brain fixates on dying."

And so, can you picture what it feels like in your body when you think about writing with your writing coach or standing in front of a crowd on an open mic night? Can you feel that? Or, when you are with Quinton, standing next to him, loving him the way you do? That's desire."

What she asks of me is a risk. Could I open myself up like that and listen to my heart? All my longing for connection, meaningful experiences, and desire to show the world who I am in the most genuine way possible—dare I do it? What else are we here for, if not one more day or fifty more years? I know I live with suicide on my mind, and I don't know if it will ever go away, but maybe I can be audacious enough to stand face-to-face with the monster and say, "I'm not going anywhere. You won't trick me into dying this time. I have too much to do with the time I have left, and you can try your hardest to throw me down or get out of the way. I am going to live this life the best way I know how. Just wait."

Quinton is turning eight this month and I'm still alive. With much support, medication, and a willingness to open up to my desires, I will be there for him. I will show him a love only I can give. We will share our journeys, one step at a time. It's the best I can do.