

Dennis Barbour ([00:00:03](#)):

Good morning. Welcome to the Partnership Symposium on Young Males and Suicide. I'm Dennis Barbour, the partnerships president. Thanks for joining us in our symposium, one of eight, we're sponsoring over the course of five months. Suicide is the second leading cause of death among young males who die from suicide. At four times the rate of young females we're honored to have a panel of nationally recognized experts in young males and suicide. Join us today. After their presentations and discussion, they will take questions from the audience, so if you have any questions, make sure to send them along. And the questions function by way of background, a word about the partnership and why we exist. The partnership is a consortium of over 20 national organizations that have a stake in young male health and wellbeing. As our mission states, we work with and on behalf of adolescent, young adult males to optimize their health and ensure that they thrive.

Dennis Barbour ([00:00:55](#)):

We're the only national organization who sole focuses on the health and wellbeing of these young males, otherwise known as Gen Z. Those between the ages of 10 and 25, young males this age are largely left out of our healthcare system. By age 13, 80% of males and females both stop seeing a pediatrician. Females largely transition to gynecologic care. Males, however, do not largely transition to a source of ongoing care. We exist to help fill that gap through awareness of this problem. And by providing the means to address it. Our 2022 symposia is designed to raise awareness and to guide parents and other caregivers and how they can address the health needs of young males. Before I introduce our guests, I'd like to reiterate that we will taking questions for our panel throughout the session. You will also receive a survey immediately after the session. We need you to fill the survey to help inform how we can better design future symposia.

Dennis Barbour ([00:01:51](#)):

Again, thanks for joining us. We're pleased to have the following presenters today, Mark Hillinski and his wife Kim founded the Hillinski's Hope Foundation to honor the life of their son Tyler, who died by suicide January 16th, 2018. Hillinski's Hope Mission remains scaling mental wellness programs for student athletes raising mental health awareness and eradicating stigma. Mark and Kim has spoken at over 85 universities, colleges, and high schools around the country, sharing ta Tyler's story in helping those suffering in silence to get the help they need. Michael Zibilich has spoken about suicide awareness to thousands of university students throughout the United States over the course of the past four years. Michael is a commercial real estate executive who resides with his wife Gail in Atlanta, Georgia. Tragically on April 21st, 2012, they lost their own child. Michael Keller Zibilich, a second semester Sigma Chi, freshman at LSU to suicide. Devastated by this inexplicable loss.

Dennis Barbour ([00:02:54](#)):

They have dedicated their time and resources to promoting suicide education and awareness to students throughout America. Ivan Maisel is vice president and senior writer at One Three Sports, a website that covers college sports. Ivan has covered college football for nearly 40 years, including at ESPN, Sports Illustrated and the Dallas Morning News. He has written three books, including, I Keep Trying to Catch His Eye, A Memoir of Loss, Grief, and Love. Published last year, the paperback edition debuts this week. Finally, Ross Szabo is the founding Wellness director at the UCLA Han Academy and the CEO of the Human Power Project, the social innovator who has pioneered the youth mental health movement. He is an expert at creating sustainable mental health curriculum and programs that reach large audiences. During the eight years, he was director of the National Mental Health Awareness

Campaign. He created the first national Youth Mental Health Speakers Bureau, the program that has inspired millions to address the mental health. He has also the coauthor of Behind Happy Faces, Taking Charge of your mental health. Mark. Mark. I'll now turn the program over to you.

Mark Hillnski ([00:04:09](#)):

Thanks, Dennis. Thanks, Sean. It's great to be with Ross and Michael and Ivan. It's a, uh, it's a club nobody wants to belong to for sure. As was mentioned, we lost our son, Tyler, 21 years old. Uh, he was a quarterback at Washington State University. He was our middle child. And, uh, as we tell, you know, the student athletes that we go speak to around the country, we love all of our boys, but we really liked Tyler. Um, we spend our time the last five years or so, four years or so, still trying to figure out exactly what happened. And I think in our case, um, losing Tyler was such a shock. Um, kind of the worst thing that can happen to a parent. We're also dealing with, you know, what, what most of us on this panel have, have seen or personally experienced is a loss by suicide without a lot of explanation.

Mark Hillnski ([00:05:13](#)):

Um, we understand Tyler towards the end of his life, uh, was doing a very good job of hiding what was bothering him. He didn't share that with his teammates, his roommates, his coaches. And we felt after Tyler passed, after speaking with these groups, there were a lot more Tylers out there, you know, and I think as we, as we continued to search for answers, I think that's a lifelong for us. My wife and and I and my other two sons trying to figure out exactly what happened is important, but it won't bring him back. And so we spend our time trying to share Tyler's story around the country with student athletes and their unique sort of experiences at the collegiate level, the additional time and, and pressure that they, uh, they have to give and sustain while sort of completing their, their studies. It doesn't make them special, It just makes them a little bit different. And as we, we see in across the country, the, the impact that NIL has had, name, image, and likeness on our sport, the transfer portal and the overall changing really of so many conferences and the possible super conference alignment that gets talked about, it adds pressure in a different way to these student athletes. And

Mark Hillnski ([00:06:48](#)):

What they've told us, you know, throughout the years is it's a very macho thing to play football. And it's, it's a very macho thing for, for these young men to play just about any sport. And when they get to the collegiate level, often they move away from home. They lose their support system, they have to act tough, they have to fall down and dust themselves off, and they don't have a lot of folks to share their troubles with meeting new friends and new teammates trying to learn their sport at a new level. And they often don't wanna share the things that are bothering them. So we spend our time encouraging these young student athletes to share their story, to ask for help when they need it, and to encourage them to think of their mental health, like they do their physical health. They shouldn't be embarrassed. They shouldn't be worried about losing playing time or looking weak, but we know this happens. And they've also shared with us how difficult it can be to heal from these things. And I think this goes back, you know, we've spent a lot of time doing this, and this, this goes, this predates Tyler for sure, but we don't talk about this as the kids are young

Mark Hillnski ([00:08:19](#)):

At PE in class every day. We spend a lot of time focused on their extracurricular activities, but we don't teach them even the vocabulary around mental health. And often as Kim and I move around from school to school, it feels like we're screaming at these young people to talk to us, to tell us their story, to not be

embarrassed. And yet it's so much easier to stand up here as an experienced older guys and and say that to them and encourage them. But if they don't have the vocabulary, they don't have the understanding of what's happening to them, it can be very difficult and challenging. So I think we need to start much younger and educating our young men,

Mark Hillnski ([00:09:11](#)):

Not just on what it means to be a leader in how to take care of each other, but to recognize that our health is the most important thing. And these student athletes are much more than their sport and our family, Tyler was, was the middle child. He was the, he's the B type personality. He was our peacemaker. He was the one we turned to when there was a tie for where to go to dinner or how to spend time on vacation. He was the one always kind of smoothing things over when, when those conversations got competitive, which they often did. We miss Tyler every day. And we think of new ways to recall some of those stories that we had when we were young. And each day brings a new sort of perspective as we meet with other young people around the country, engage them in a conversation about mental health and speaking directly about suicide, what happened that day to Tyler. And we don't do this to scare them, obviously. We're here to try to make them feel more comfortable to talk about the things that might be bothering them. And it can be difficult as, as a high school young person student growing up,

Mark Hillnski ([00:10:38](#)):

What those feelings are and how to deal with them. And it can be more of a challenge than I think we realize in our family, we didn't have the experience of mental health or mental illness close to us for that matter. We didn't have much loss either. And so losing Tyler was not just the most difficult thing we've ever been through. It continues to be. And suicide is often the bomb that continues to go off well after we lose a loved one. I think that Kim and I have spent so much time thinking about the why we've had to transition somewhat understanding. We may never know and yet talk about Tyler, talk about all of our young folks that have struggled and lost. And we think it's an important story to try to tell. We have a number of professional athletes and collegiate athletes that have spoken on this topic. They give a story of hope, how they've struggled, how they've overcome. And those are important stories for sure to hear. But when you lose a child to suicide, you want that story to be heard just as much. And they're not here to tell it. And so at Husky's Hope we've been trying to do that very thing, is to share Tyler's story and try to give the young people that we visit some information around the process and how we experience that.

Mark Hillnski ([00:12:29](#)):

We'll never get over not having Tyler. And we're finding each day to be a struggle. You know, there's no new pictures, there's no new videos or texts. And often as you share Tyler's story, it can be difficult because it sounds like you're repeating yourself. But I have so much faith and hope in our young student athletes. In our case, that's where we spend a lot of our time talking to them. And there's so much hope in that room, so much passion for what they do. So much excitement in doing the new thing, meeting new people, new experiences with new coaches against new opponents, that they often don't take care of their mental health. And so our story is a story of hope and story of encouragement. To share the things that are, that are bothering you to,

Mark Hillnski ([00:13:33](#)):

To always remember you're much more than your sport. And that we don't, at least Kim and I don't say committed suicide for this, this age group any longer, You don't commit cancer and you don't commit

ALS, you die from the disease process. That can be overwhelming to so many of our youth, young males in particular in, in a sports setting, in a collegiate sports setting, setting, have a difficult time believing that the things they've heard growing up, what it means to be a man, to be tough, to be strong, to not cry, to not be weak. Those are confusing messages when their experiences turn to the spectrum of mental health and they start to struggle with depression or anxiety. They've heard these terms, but they don't know themselves often what that even means. I can only imagine that it's heartbreaking for young men to be put in that predicament.

Mark Hillnski ([00:14:42](#)):

And so myself and, and our tremendous panel here try to talk openly and transparently about what happened in our family, what happened to our young men, in the hopes that that brings about a bigger conversation, helps reduce the stigma and encourages others to participate in this conversation. So I'm thrilled to be here. I'm gonna turn this over to Ross Szabo here in a minute. Ross, we met early on in the process at Hilinski Hope, and we've shared the stage in talking to this, this group of young men. I'm very proud to call my friend Michael and Ivan as well. I'd you to listen to their stories as as closely as you can. Ross.

Ross Szabo ([00:15:34](#)):

Yeah, thanks so much, Mark. Um, always really impressed with everything you and your family has done and, and the, the face of such a agony and, and like you said, trying to figure out the whys you have, uh, found a purpose to, to go out and do something that is so needed, especially in, in student athletes because their identity is often tied to their sport and they don't have a chance to see, see past that. So it's, it's really important work that you're doing. Uh, I'm gonna talk a little bit more, uh, kind of what Mark talked about, which is how to educate young people. Um, in my introduction, everything you heard is accurate. I am the wellness director and a founding faculty member at Definit Academy at ucla, which is a school for students of grade six through 12. I have a company that creates mental health curriculum on the side.

Ross Szabo ([00:16:25](#)):

Uh, the only thing that, that I didn't mention in that introduction is that, uh, I was diagnosed with bipolar disorder when I was 16, and I was hospitalized for attempting and take my own life when I was a senior in high school. So throughout my life, uh, as a male, I have experienced a lot of different mental health issues and struggled in different ways. And you know, I think one of the things that often gets missed when we talk about suicide is, is how much self hatred somebody can have, uh, when they're in that place. And, you know, I know for myself, part of the reason that I didn't seek help, and part of the reason I didn't take care of myself was because I hated myself, and I really didn't care what happened to me. And it, it wasn't until I was able to find ways to like myself that I was even willing to be compliant in treatment because, uh, like Mark was saying, as a young male, there are so many messages out there about being tough, being strong, sucking it up, get through it, um, everything else.

Ross Szabo ([00:17:24](#)):

And so, you know, when I, when I look at this issue, the, the one thing that Mark brought up that, that we've worked really hard on at Geff Academy and I've worked on really hard throughout my life, is how do we teach young people that mental health is like physical health? It's become somewhat of a buzzword in this country where we keep saying mental health is like physical health. And obviously I agree, but we actively have to teach that. And there are a couple ways to do that. First, uh, most people

don't have a clear definition of what mental health even is in most of the presentations I give, and even in my own school, when I say the words mental health, people tend to think of a person who has a problem. They think of somebody who has a diagnosis, They think of somebody who has something wrong with them.

Ross Szabo ([00:18:11](#)):

But the actual definition of mental health is not having a problem. The actual definition of mental health is how you address challenges in your life. And I think that's a really important diagnosis, uh, definition because everything that comes after that is, is if, if your definition of mental health health is wrong and everything that comes after that also doesn't make sense. And so when we teach physical health, we teach that you need to eat right. You need to exercise, you need to know your family history. You need to take care of your body, and here's how to take care of your body. When we teach mental health, we have to start teaching that mental health is how you communicate. Mental health is what your relationships are like. Mental health is the coping mechanisms you use. And mental health is how you take care of your mind, and you can work on your mental health without having a mental health disorder.

Ross Szabo ([00:18:58](#)):

And I think that's one of the most important factors because young people today constantly get messages from older people that are like, they have to have their mental health completely figured out. They have to get eight hours of sleep and not have stress, take care of themselves and do all these other things. And the reality is, uh, adults don't do that. And so I think it's really important when we use the definition of mental health to also remind young people the mental health isn't about being perfect. It's about knowing which skill you need to use and when to use it. And, and that's a much more receptive message than just saying like, Oh, you have to have all these things in place. So that's how we teach it at my school. That's how we teach it in the curriculum that I've developed. After you get everybody on a clear definition of what mental health is, it is really important to ask why people don't talk about it.

Ross Szabo ([00:19:45](#)):

And the biggest answers I get from this generation are, it's embarrassing. It's shameful. They don't want to burden anyone. They don't have anyone they can trust. Some people do feel like it's a sign of weakness, they should suck it up. Um, but a lot of people stay in any other categories of why they don't talk about it. Focusing on the reasons people don't talk about their mental health as a, as a next step is really important because you have to break those things down in order for anyone to even be willing to seek treatment. When I felt stupid and embarrassed and ashamed and meek, and that my promise should go away on their own, obviously I wasn't compliant with my treatment because I felt all of those things. The next part of education is what we call mental health literacy. So if you think about physical health literacy, people know the difference between having a sprained ankle and having a broken leg.

Ross Szabo ([00:20:33](#)):

They know the difference between having a cold versus having a flu. They know the difference between diabetes and cancer. We need to create a similar type of vocabulary and literacy for mental health. And so we have to do that the same way we do it with physical health. So if you think about physical health, we teach that there are different categories for physical health challenges. We need to do the same thing with mental health. The, the categories that we teach are there are everyday challenges, things that everyone can go through, stress, body image issues, lack of sleep, things like that. There are

environmental factors. So the home you grew up in, the school you go to, the way you raised how that affects your mental health. There are significant events. So experiences with like loss, change of rejection that impact your mental health. So like a breakup, uh, getting a bad grade, identifying sexual orientation and things like that there.

Ross Szabo ([00:21:26](#)):

Mental health disorders. And then there are developmental disabilities. And the reason we teach these different categories is because the unfortunate thing that's happening in our society today is somebody might experience stress and say they have an anxiety disorder, or someone might go through a breakup and say they have clinical depression. Without these clear, uh, different categories, people can't frame their mental health. So when we say physical health is like mental health, well physical health has categories, Mental health has to have them too. And then the bigger thing we need to do is change the mental health spectrum. I see one of the biggest problems with how most people are framing mental health these days is they're starting on one end of the spectrum and saying, this is where people are saying or they don't have, uh, issues. And then in the middle, there are people with like bigger issues, and then there's low lying mental health disorders, and then there's severe mental health disorders.

Ross Szabo ([00:22:18](#)):

And that spectrum is broken for a lot of big reasons. Number one, you can have a severe mental health disorder, Andy sane at the same time. So you can't be on polar opposite ends of the spectrum at the same time. But the bigger issue is it promotes the idea that you need to have a diagnosis to seek help. The bigger challenge with that spectrum and how people use it is they're kind of taking all of the mental health disorders and putting it into a spectrum of functionality, which isn't what we do with physical health. Like with physical health. We don't take like a torn ACL and diabetes and cancer and try and put it in the same spectrum of functionality. We choose one of those challenges and then we decide, okay, does somebody need help? Do you need constant assistance? Are they unable to balance?

Ross Szabo ([00:23:03](#)):

Like, where are they in terms of functionality? So what we teach at my school and in my curriculum is you choose one of those categories of mental health challenges and then you apply it to your mental health. The spots we use on our mental health spectrum are, you don't have stressors. Um, you're not thinking about your mental health. You actually don't have any issues. It's difficult to balance. So you're like aware that you have something going on, but you're not using anything to help balance. Using help to balance, which could be anything. Medication, therapy, music, video games, exercise, talking to a friend, whatever it is up from that would be needing constant assistance. So like an outpatient treatment program, NAA, whatever it is. And at the end, you're unable to balance. And this is a much better way for people to frame mental health because it is similar to physical health and it is a tangible thing that they can see.

Ross Szabo ([00:23:53](#)):

So if somebody's experiencing stress, great. Where are you on the spectrum? Do you need help? Are you unable to balance? How long are you in that spot? If somebody's experiencing, uh, clinical depression, where are you on that spectrum? And just separating those two things gives people an actual concrete way to frame and talk about their mental health. The other piece of it too is explain the difference between feeling nervous versus having an anxiety disorder. The difference between feeling depressed versus having clinical depression. The difference between thinking about thoughts of death

versus having a plan to take your own life or not liking your body versus having an eating disorder. And then one of the biggest things we focus on at my school and in my curriculum too, is explaining the difference between good stress and bad stress. A lot of young people do experience good stress, they just don't frame it that way.

Ross Szabo ([00:24:43](#)):

Good stress lasts for a short amount of time and helps you get things done. Good stress is when you're about to play a sport, you get nervous, you play a sport, you might feel better. You, you get butterflies in your stomach before you take a test. You take the test, you feel better. Bad stress lasts for a really long amount of time and debilitate you. And so just by helping young people understand those different kinds of stress and start finding ways to turn good, bad stress in a good stress can give them a better framework. What we do know from longitudinal studies is the longer that a human being of any age frames all stress as being bad, they experience more mental health and physical health disorders. They also die on average about five years before life expectancy. And this might sound like just a small switch or a small trick for people to use, but it's effective.

Ross Szabo ([00:25:35](#)):

And so we can't keep saying that mental health is like physical health without actually teaching these things. These things can be taught in a public health approach and not a therapeutic approach. The the work I do at my school has to be a public health approach because schools can't be therapeutic centers. And so, you know, just to, to tie off of what Mark was saying, I think it's really important that when we say, uh, we're gonna teach kids and do these things, that there are actual programs out there that we can continue mental health awareness because it's really important, but also move past mental health awareness to start giving people skills that they can use in real tangible ways in, uh, addressing their mental health. Uh, so thank you very much for, for my time. I'm gonna turn it over to Michael, who has, uh, a really powerful story and has been doing some, some immense, immense work to, to help others. So Michael, take it away.

Michael Zibilich ([00:26:29](#)):

Ross, thank you very much. And it's an absolute distinct pleasure to have an opportunity to be part of this panel. And I wanna thank everyone for participating. Uh, it's been some great, uh, comments made, uh, by both of you before me. And, uh, I hope I can live up to that expectation. Uh, frankly, the word suicide prior to our son's death, 10 and a half years ago was almost an unknown word, uh, to my wife and I. Obviously we knew what it was, we were aware of it from a, uh, a, a point of view of, of, uh, national figures having taken their life. But no one, absolutely no one in our family or circle of friends had ever died in this manner. So, uh, our understanding of it was so, so, so far away that it was extremely, uh, difficult, uh, to really put it into perspective.

Michael Zibilich ([00:27:26](#)):

On April the 21st, 2012, Gail and I were 30 miles away. We had traveled from Atlanta to LSU to deliver Keller's car and his kayak to him, his most prized possession. He was a whitewater kayak expert. The last thing on our possible mind at that particular moment was that anything that happened to Keller, particularly within this realm, uh, checking into our hotel and awaiting his arrival, we looked out of a window in our room and saw our friends walking to us toward us. And we could see the absolute fear, dread and death on their very souls. The words that would forever change our life were finally uttered. Keller has taken his life, our life instantly went into chaos and confusion and, uh, an intense grief that is

very difficult to understand. From that moment, we have endeavored to try to understand this word, suicide.

Michael Zibilich ([00:28:31](#)):

This death and suicide's been defined and I think very appropriately as a death like no other. It is very, very difficult to understand. It is very different from any other form of death. And, uh, it is a, is a profound human endeavor. Uh, Keller was an extraordinary young man, and I, I know most people feel that their children are, that are that way. He was our only child. We had him late in life. He was a higher achiever, a natural leader. Uh, he emanated joy, confidence, goodwill. Uh, he was always looking out for some for the underdog, uh, always trying to project, uh, uh, positive emotions on anyone he met. He came to LSU. His first year was a fantastic success. Uh, he had a 3.5 grade point average, was president of his pledge class, the only freshman on the inter fraternity council, and a member of the United States Marine Core Platoon leaders class.

Michael Zibilich ([00:29:36](#)):

I was a US Marine. I played college football. Uh, Keller wanted to follow in some of those particular footsteps. Uh, when you look at suicide, you tend to look at suicide from a, from a contorted point of view. It, uh, it, it should have an ugly face, it should have a recognizable face. Uh, what we have learned is the face of suicide is a regular face. It is the faces that are on these screens today. It is in our family rooms and the people we work with on the teams that we play on, on the people we come in contact with. It is a normal face that has changed, and it can be as quickly and as strikingly sudden as a lightning strike. Not until 24 to 48 hours before Keller took his life, he lived a completely normal existence. A very, very well adjusted young man.

Michael Zibilich ([00:30:37](#)):

Extremely so. And I thought that, that people who died by suicide had been in a very long, long, progressive situation in which they had severe emotional anxiety, depression, et cetera, that affected them. And that is indeed the case with many people. But we were completely unaware of is how quickly a negative mental situation can overcome someone and push them to what we would define as the ultimate limit. Uh, 24 to 48 hours before his death Keller suffered a, uh, dramatic heartbreak as a result of a broken romantic relationship. And, uh, really panicked Keller made exactly five calls, uh, to hospitals before he's died. He did not know an 800 number to call. He did not know who to reach out with. Uh, and unfortunately, those five calls were unsuccessful and he lost his fight for his life. Since that time, we have endeavored to try to make a difference and to understand suicide.

Michael Zibilich ([00:31:53](#)):

We immediately founded the Keller Zibilich Fund and partnered with the Sigma Chi Foundation to firstly provide an 800 number that someone would be aware of and could call and could potentially and hopefully save their life. And we established the Keller Zibilich Lifeline, uh, to all 17,000 Sigma guys in the United States. As a further indication of trying to get deeper into this problem, we felt that that wasn't enough. We try, we wanted to get directly at the problem to educate incoming young men into the fraternity about the challenges of mental health. So we partnered with the Jed Foundation in Sigma Chi and developed a curriculum that went through the challenges and the stresses that young men, uh, enter upon entering college, gave them the educational tools to deal with it, and, uh, gave them an access point to try to get help if they, if they've needed it.

Michael Zibilich ([00:32:59](#)):

Since that time, Gail and I have gone throughout the United States, East Coast, West Coast, all around talking about suicide, talking about the stress of college life, talking about the necessity of mental health. I know this has been mentioned in our prior two speakers, a, a great deal. What is mental health? How do we define it, et cetera. Where is there help when you, when you need it? We have tried to dedicate our lives. We participated in the development of a, um, Hollywood shot movie Wake Up, in which Keller's story is one of four stories that, uh, illustrate what happens to people under extreme stress, what we can do about it, and what is the hope for the future. Um, this is a, uh, this is a topic that's very, very near to our heart. It is something that we have, uh, tried to put as much emphasis as possible to speak to as many young people as humanly possible, both in high schools, in college, um, and to try to try to give them an understanding that, uh, anxiety, depression, these things are things that you can get help with.

Michael Zibilich ([00:34:10](#)):

You have an opportunity to, to help yourself. What I guess the challenge is right now is, is getting the necessary resources at colleges, universities, and high schools in which these topics are introduced at a very early level. And it can't be just a check the box situation. We had the suicide speaker last year, We're gonna have someone else the following year. This has gotta be a part of their everyday life. It's a part that we frankly, neglected because we felt Keller was extremely well adjusted. No need to be able to get into the psychological and mental aspect of life because he looked perfectly content happy and well adjusted. I know this is not the case anymore. There are a lot of people that sit in, in auditoriums, uh, when we stand up and speak, or fraternity houses or at colleges and universities, that if you look beyond that eye, if you look into their eyes, you can absolutely know for sure that there are people that are hurting out there in almost every instance.

Michael Zibilich ([00:35:16](#)):

And when we speak, young men and young women come up to us and thank us for at least articulating this in public, that there is help for them. That it is natural to feel this way, that anxiety and depression are not choices that people make. They are things that happen to them. Just like in the physical realm. Our goal is to make each and every one of us a first responder, not only in our lives, but the people that we work with, that we know and love, the people that we can rely upon to help us get help. We're starting to make progress. I believe, obviously with stigma. There's been a big change in the last 10 years. And when we speak on college campuses, they're much more attended, much more susceptible to listening to this type of conversation. But we still don't have the resources to, to help everyone.

Michael Zibilich ([00:36:09](#)):

And that has gotta change the numbers of suicide, unfortunately, and tragically are not moving in the right direction. Um, we've gotta continue to try to do more and more and put us in a position where this is an everyday conversation. We've had a major breakthrough in the, in the, uh, telephone number situation in that for the first time in history this summer, we have a dedicated three digit line, 9, 8, 8, just like 9 1 1 in which someone in time of need or chaos can call and get help by qualified people. We've had 9 1 1 now for about 45 years. It's taken that long to become part of the culture. I certainly hope that this number can be a part of the culture a lot quicker, and that we can all start emphasizing with our children, with the people we work with, that it is absolutely positively. Alright to talk about how you're feeling.

Michael Zibilich ([00:37:08](#)):

It's very easy to talk about our physical situations, but we have to, particularly with young males at a very young age, let them know that it is absolutely all right not to feel okay. That it is right to express your feelings and your emotions, and that it's right to ask for help like you would in any other type of endeavor. So I'm extremely proud to be a part of this conversation and, uh, very, very, very honored, uh, to, uh, to be able to, to participate. And, uh, with that, I'm gonna turn it over to Ivan Maisel and, uh, give him an opportunity to, uh, to tell his story.

Ivan Maisel ([00:37:56](#)):

Thank you, Michael. Uh, I am bat bating clean up here and, and there's not much to clean up. I think, uh, Mark and Ross and Michael have covered a broad expanse of what we're dealing with as a society with suicide and young males. And a lot of the points that I wanna make are really just amplifying what these guys have said. Uh, it, it's, you know, Mark made the point that, uh, he and Kim and and their two boys have spent time trying to figure out, uh, what happened with Tyler, but they realized it wouldn't bring him back. I skipped that step with our son. Max. Max died, uh, by suicide in February of 2015, 7 1/2 almost 8 years ago. I didn't spend a lot of time trying to figure it out. Uh, for one thing, I knew it wouldn't bring him back.

Ivan Maisel ([00:38:57](#)):

I just sort of understood that instinctively. And, and for the other, frankly, I'm an emotional coward. And, and that I was in enough pain. I felt like that was just gonna add more pain, uh, to, to what I, I, you know, to the amount that I was already in. I, I, uh, but I, I understood at some level that no matter how much I delved into, uh, what Max was dealing with and why he had decided to end his life, uh, I couldn't have fixed. And, and that, that idea that, that, you know, Ross sort of touched on, It's an illness, it's an illness. Mark said you can't fix cancer. Uh, and, and I think he's absolutely right. You know, this, we as a society for generations have, when we hear the words mental health and we hear the words mental illness, we focus on the first word.

Ivan Maisel ([00:40:05](#)):

You know, we hear mental. And that's where the stigma has come from. You know, somebody goes mental, right? Uh, the important word is health and illness. The brain is an organ in your body. J you know, just as there are other organs in your body that can get sick and there's nothing you can do about it, you can go to the doctor and have them try to fix you. And that's really what we need to, That attitude is the one we need to adopt with mental health and mental illness. It's, uh, we, and as, as Michael referred to, I think we're better as a society in dealing with the stigma. Uh, we're yards ahead of where we were, certainly when I was growing up. And, and you know, I I I brought up the point, you can't fix cancer. I think for my parents' generation, they, they thought of cancer.

Ivan Maisel ([00:41:06](#)):

Much like we think of mental illness now. There was a stigma attached to cancer. You didn't talk about it. You whispered it. Sometimes you didn't even tell the person who had cancer that they had it. And, you know, we've changed there. We don't do that anymore. And look at the strides that have been made, uh, in dealing with cancer. Certainly the course of my lifetime. I'm 62 years old. There are cancers now that people, they were, you know, when I was a child, were death sentences. And now they know how to deal with them. And if they can't cure them, they can at least treat them as a chronic disease. That's the goal. To me. That's where we need to get with mental illness. Uh, it's, it, it just needs sunlight.

Mental illness needs sunlight. That's part of the reason that, uh, my wife and I and our daughters have been as public as we have been in discussing Max. And part of the reason that I wrote the book, I wrote, uh, I keep trying to catch his eye. Uh, you know, this is, uh, uh, because for one thing, I didn't want anybody to interpret, if we didn't speak publicly about Max, I didn't want anybody to interpret our silence as somehow endorsing the stigma of mental illness.

Ivan Maisel ([00:42:45](#)):

Uh, the the second reason that we spoke about it, quite frankly, is I'm a journalist and, uh, you know, I was not gonna know, comment anybody. And because I was, at the time I was working at espn, it became a national news story. You know, we laughed about that in this family, even in those dark moments, cuz Max was painfully shy. Painfully reticent. He refused to, he didn't like having his photo taken, which was kind of funny because he was a photographer. He loved taking photos. He majored in photography in college. The cover photo of the book is a self-portrait of Max. That's how he chose to take his photo, though is, is not facing the camera. Uh, but he became a national news story for, uh, a few days. And I just was not going to, uh, to no comment. Somebody, I, I didn't want any interpretation of our silence to be viewed as endorsing the stigma of mental illness.

Ivan Maisel ([00:43:53](#)):

Uh, so, you know, we were, I I've written about it. Uh, I've spoken about Max, uh, often, uh, in those seven and a half years. And, and at one point, uh, you know, people would come up to me and say, Oh, you, you, you, your family is so courageous. Uh, I, I was invited to speak at a journalism seminar about courage and journalism. There's nothing courageous about this. Uh, courage involves choice. Uh, you know, that there is something dangerous. You feel the need to do it, uh, because whatever need there is there overcomes that danger. Uh, there's nothing courageous to me about speaking about mental illness. We weren't given a choice. You know, Max was sick and, and, uh, we had to deal with it. Uh, and, uh, you know, unlike what Michael said in talking about his son, Max would dealt with depression his whole life.

Ivan Maisel ([00:44:58](#)):

And, uh, virtually his whole life, uh, he was on antidepressants. He was going to see a therapist. Uh, and, and it just, you know, it overwhelmed him. Uh, so, uh, he understood the, the value of it. He didn't, you know, he didn't, you know, we, we as a family were believers in therapy. We endorsed him talking about his troubles. It still didn't fix the illness. Uh, so, you know, what do we do now? You know, we try to talk about it, you know, uh, and, and try to explain. I mean, Michael said suicide is that there is a normal face to suicide. It is an illness. You mental illness is an illness. And that's what we try to, to discuss and to talk about. That's the reason we have gone public. Uh, you know, I have, uh, I wrote in the book, and it's not original to me, it was actually the, the title of a Jimmy Buffet song, you know, about tattoos calling a tattoo of permanent solution to a temporary problem, which is a great line.

Ivan Maisel ([00:46:16](#)):

And I kind of apply that to suicide as well. It, it's a little glib and it's a little slick. Uh, but there is a kernel of truth there. Uh, that, uh, and, and I think one thing to try to convey, especially at a young people, you know, as Michael described with his son, it, he was going through an awful thing. And it's hard to make them understand that it's temporary. You know, that you will recover, uh, from a, from a broken heart, uh, or whatever it is that that sets you down that slide, uh, you know, the, the, the brain of a male, 18 to 24 is a place we're just beginning to understand, uh, as a society, uh, and how malleable it is and, and

how it's changing and what impresses it in the, the hormones that are raging. You know, there's a lot going on there.

Ivan Maisel ([00:47:14](#)):

And that's one reason that we're in the predicament we're in is, there are things that certainly the young man doesn't understand. And, and there are things that the medical community is only beginning to understand. But, you know, if we can get to that point where we can figure those things out, get the resources that, that Michael described to talk about it, and, you know, what Ross is doing at UCLA is terrific stuff. But that's the, that's the path that we need to be on. You know, that's where we need to go, uh, in terms of encouraging, uh, work and, and getting these, uh, people to ask for help. And I think they are better. You know, the, i i, the world is a mess in so many ways right now, but I think one thing we have done a good job on is getting young people to understand that it's okay to ask for help.

Ivan Maisel ([00:48:16](#)):

It's okay to tell someone you're vulnerable. That showing your vulnerability is not a sign of weakness. It's actually a sign of strength. Asking for help is a sign of strength. That's a tough message for a lot of young people. It's a especially difficult message in the realm that, that Mark is do, Mark and Kim are dealing with, with, uh, young collegiate student athletes. But I think it's getting through to them. And I think the response of athletic departments across the country and responding to this crisis is making a dent with young people, the young people in their charge, that it is okay to ask for help. Uh, you know, they are athletic departments are hiring more, uh, professionals to deal with the mental health issues among their student athletes. Uh, you know, I've heard, I think Nebraska has five sports psychologists on its athletic department staff.

Ivan Maisel ([00:49:21](#)):

I think I heard Nick Saban at Alabama say they have eight. Uh, you know, that's where we're going and that's where we need to go. Uh, as for the entire student community at large, colleges are in crisis. They are, as Michael said, desperately looking, uh, for the resources, both, uh, human in terms of hiring people and financial in terms of having the funds to expand their reach. But you, the need is, is only increasing. And maybe the need is increasing because we are removing the stigma, you know, and kids are reaching out for help. And, you know, that's, that's an outcome we want, but we've gotta ramp up to deal with it. You know, the, uh, uh, certainly my daughters who are now outta school would complain that, you know, if both on their own behalf or their friend's behalf or just in general and say, you know, at, at their school, it was just very tough to get an appointment to get help for mental health.

Ivan Maisel ([00:50:26](#)):

And, and that a lot of people would just go out into the community. Well, that's great if you've got the financial resources to do it, but, you know, it's also quite expensive. So, uh, colleges I think are, they're trying to respond. It feels like everybody's trying to respond, but we are in need of resources and, and, uh, you know, I don't know whether that should come from government or just better fundraising. Uh, I, you know, one thing I have said throughout these last seven years is I am not an expert on mental health. I'm an expert on one case of mental health. It didn't end very well, but I know enough here to know that the more we can talk about it in, uh, symposia like this, uh, and the more we can point to where the needs are, the better off we're gonna be. Uh, so with that, uh, I'm gonna send it back to Dennis. And I think all of us are gonna join in now.

Dennis Barbour ([00:51:46](#)):

Thank you. Um, thank you all for your, um, your insight and, and for sharing your stories. Um, they, they're very compelling and they, they help us to understand better that the dimensions of the problem, certainly on a personal level. Um, we have a number of questions here, and I'd like to first, um, to, um, punt the one to, to Ross. Um, how have you seen mental health and suicide prevention change over the past five years, particularly in terms of, um, what areas do you, do you have hope?

Ross Szabo ([00:52:24](#)):

Yeah, I mean, five years is an interesting window. Uh, I've been doing this for 21 years cuz the national mental health awareness campaign was the first, the country's first, uh, national, uh, campaign to, to remove the stigma around mental health. The, the changes I've seen in the, the past two decades have been really interesting. So when I started sharing my story in 2002, nationally, there were only two other young mental health advocates in the country. Um, by 2012, there were millions of young mental health advocates. So if you think about that growth from 2002 to 2012, that was like a huge, huge jump in terms of how many people were mobilized around this. And, and the, the biggest change in that really was the awareness piece. You had so many massive national organizations, uh, coming out in that decade and really empowering young people to start peer to peer programming.

Ross Szabo ([00:53:23](#)):

And that, that made a, that made a huge difference. And in terms of, uh, suicide prevention and awareness, it, it kind of tied hand in hand, right? So we, we went from a time period where we were just starting to talk about this, where now if you're in Gen Z, this is a pretty common conversation to have. You know, my students, uh, that I, that I see every day are talking about their mental health pretty much every day. And they have a larger vocabulary for it. They have more understanding for it, they have more examples for it than than my generation. I'm Gen X, um, had and certainly any generation, uh, above me, right? And so the conversations are happening. That's, that's a, a big shift. The stigma is, is much lower if, if, if existing at all. You know, if you ask Gen Z, are you okay with someone you know, seeking help for their mental health?

Ross Szabo ([00:54:18](#)):

Almost a hundred percent of them say they are. Uh, when you ask, Are you okay? Would you seek help for your mental health? Their most frequent answer is, I don't wanna burden anyone. Which is kind of funny, right? Like, all of their friends are like, seek help. And then individually they're like, I don't wanna burden anyone. Which is a, a kind of a dichotomy. But, you know, the, the conversations are happening. The problem is there just aren't enough resources. You know, there was a really amazing podcast, uh, from, from New Yorker, from New Yorker Magazine a couple weeks ago, and it laid out why the mental health crisis in young people is happening in such a dis disproportionate way. And, and there just isn't help. You can't go and, and find help for these issues. And so that's why I think education is, is such a big part of it.

Ross Szabo ([00:55:08](#)):

Um, obviously doctors are a lot more accessible than mental health professionals, but we still teach people skills to take care of their physical health so that they can either prevent or lessen their chance of needing a doctor or take care of, of things themselves. And because our mental healthcare system is in such massive crisis, we need to do a better job of, of teaching these skills. And I know that this is targeted, especially at young males. Um, and obviously there's still a long way to go with young males

feeling comfortable and and confident in, in their conversations about mental health. So the national movement around awareness and education has really taken off. But we, we need to do more on the, the preventative end of the scale.

Dennis Barbour ([00:55:50](#)):

Ivan, do you have any comments about, in terms of hope that you have for things that have changed for the better?

Ivan Maisel ([00:55:58](#)):

Well, yeah, I, and I think it, it's, it's heartening to hear Ross say that, that the young people are past the stigma part. But then, you know, if, if they sound like, you know, old Jewish parents, uh, I'm fine. I don't wanna bother anybody then that we're not really there yet. You know? Uh, you know, but step by step, you know, we're not gonna fix this overnight. It's, it's taken, uh, decades if not centuries to get to where we are. And, uh, if we just could, you know, I don't know how, what I struggle with is where do those resources come from? You know, is it something that the federal government needs to do? Uh, certainly throw money at the problem, that would be terrific, but who's gonna direct that money and, and how quickly could we get out? And you can't just snap your fingers and create mental health professionals. So it, it, it's a long term solution, but it, it, it's heartening to hear that, that we're on the way.

Dennis Barbour ([00:57:02](#)):

Mark, I think your muted Mark.

Mark Hillnski ([00:57:09](#)):

I think, um, it's difficult to hear. I, I, I love hearing about Keller and, and Max again, and it's heartbreaking, obviously to, for all of us to, to kind of retell the story and, and we come, you know, we come from a slightly, um, we come from a perspective of student athletes, you know, we've spent a lot of time in this space. Um, but, but so much of it crosses over, right? We, we've talked to, to students as well. And, and I think one of the, one of the, I'm, I'm, I'm, you know, Ivan has a way with words obviously, but mental health needs sunlight was really, really touched me because I think Ross is right that we've done a much better job with, with awareness. Um, I'm less so, uh, after speaking, you know, we're, we're at what, a hundred and 140 or so of these talks we're out here at the University of Hawaii, for example.

Mark Hillnski ([00:58:05](#)):

Uh, we, we got a chance to talk to their 400 and 500 student athletes, and you can hear a pin drop, you know, it's, it's amazing. It's difficult, you know, I've got a young, I've got a young son, 21. It's difficult to keep the phone outta their hand. That's how they're, they're all communicating and, and sharing their, uh, their experiences and stuff. But I think we've done a great job or a better job of awareness. I think stigma is a little more complex, um, in that, in that scenario. And I'm touched by the conversation around resources, because as we go, you know, from from school to school, in our case, and Ivan's exactly right? You see, Alabama can do both, right? They can be the best collegiate football team on the field, but they can also provide eight mental health resources for just their football team.

Mark Hillnski ([00:58:59](#)):

Um, nobody's even close to that. And yet there's story after story, uh, that we read, you know, some of the, and and they, we don't have to name 'em here, but some of the universities that seem to struggle

with resources for mental health, for their student athletes, find resources to hire three full-time FDE for, um, for NIL programs and how to raise money and how to recruit these athletes. And, and so as much as the stigma and awareness we've made such progress, there are always issues like this. I think that, um, that throw us back a little bit because Ross mentioned it. I've heard the podcast he's talking about, um, and resources are, are incredibly important. As an example, I mean, there, there are several schools that we visited where a psych intervention, an emergency psych eval can be nine months away. So, so we have this scenario where a kid finally listened.

Mark Hillnski ([01:00:00](#)):

He has some vocabulary to tell us what's wrong. He submits to the process right against his biggest fears and, and concerns, explains what he's suffering from, or what he thinks is going on. In a lot of cases they don't know, but they need somebody to talk to. And then they hear, you really need to see Dr. X and Dr. X will be able to see you in six to nine months. In the meantime, here's 30 days worth of medication. They end up in emergency rooms and they're, they're kicked out to their own devices. And these, these are, this is in the midst of, you know, a billion dollars in television rights to broadcast college football and some of the conferences. So, so I'm with Ivan. I, I don't know where this, where the, where the big money comes from. I'm, I'm encouraged and, and Kim and I spend a lot of time encouraging the universities that we, we speak with, of course, that this is the, this is the goal.

Mark Hillnski ([01:00:59](#)):

This is, this is the worthy adversary to fight. Um, and that fight takes money. And so I, I would encourage all of us to, to think about that in a, in a productive way, because the louder we yell and scream at these kids that we're here for them and suicide is not an option, certainly at, at, at our kids' ages. And to look out and reach out for help and then not have help be available. I, I can't imagine how much more disappointing that might be for, for our students and particularly young males. When we, when we think about, you know, the, the images that they get, whether it's sports or not on TV, that we're still in the John Wayne macho area. We, we've programming has, has evolved tremendously and we're so accepting of so many conversations and different points of view that part's encouraging because mental health is part of that process.

Mark Hillnski ([01:01:55](#)):

And so we're, we're, we're grateful for that for sure. But I think we have a long way to go and, and kind of end that, that comment with this, that I remember sitting for a podcast, you know, and as the bumper music plays, I hear the host talking about, well, you know, Lansky's Hope is doing more than just talking about this stuff, or developing programs and programming for our student athletes. But, you know, I think they go hand in hand. I think you have to continue to beat that, that drum. I don't think we're we're out of the woods at all in terms of stigma for mental health, certainly for student athletes. So I'm encouraged, You know, you asked about hope, you know, earlier, um, Dennis, and, and what's hopeful about this is the power of these young folks. You know, they, they're super smart, super passionate, and hardworking.

Mark Hillnski ([01:02:44](#)):

We just gotta give 'em the tools and provide the resources, um, and leadership. And, and I would, I would just, again, commend these panelists, Ross sharing his own story, Michael, about Keller and Max on, or Ivan about Max. These are not easy discussions to have, but I think doing them and doing them imperfectly, you know, Ivan said, we're not mental. He's not a mental health practitioner, nor nor are

we. Um, and, and that's okay. And that's, that's great to be transparent, but we certainly can, can ring that bell a little louder and, and fight for the resources our kids need.

Dennis Barbour ([01:03:22](#)):

Michael,

Michael Zibilich ([01:03:26](#)):

Uh, bat batting cleanup again. Uh, but, uh, I'd like to echo, uh, uh, the earlier comments. Uh, number one, you know, the changes that I've seen in the last 10 years is we have definitely crossed a significant bridge on awareness. It's, it's, it's much easier to get the word out. People, there are more people in the room than there were, you know, times before. Uh, the stigma has alleviated somewhat, there's no question about it, but suicide is still that word that a lot of people don't like to utter. It is absolutely positively, as Mark just discussed, a resource issue in Ivan as well. Uh, I can't tell you how many times that, uh, that we've spoken or I've spoken and had young people come up to me and tell me <laugh> stories about I want to get help. But that help is three weeks away, four weeks away.

Michael Zibilich ([01:04:23](#)):

Uh, you know, if you have a gash on your head and you're bleeding profusely, someone's gonna see you right away. But if, uh, if you have a problem, a a serious emotional or psychological problem, an appointment 22 days from now is not gonna help you. Keller needed to be helped. And like most people, immediately, one of the most pressing things that you know, are depressing as well, things that I've found out, uh, you know, about suicide is in almost half the cases, and I think we know this by people that have either had their suicide interrupted or survived an attempt, the decision to take their life was within one hour. That is a very scary, scary situation. That is not to say that there hasn't been a road that may have been long, or like in K's Road, a road that have been short, but that is not a lot of time to, to, to get help.

Michael Zibilich ([01:05:22](#)):

Uh, I really do think that, that, that we're, we're trying to squeeze so many needs through an extremely small funnel. And at the end of the day, it is always the money that, uh, that, that makes the difference. And we are, we are clearly lagging, uh, in that, and I think that's manifest, which, uh, you know, there's a lot of good news about what we're doing, but our numbers are still <laugh> the, the metrics, which is the most important thing. Each one of these young men's lives, you know, I think could have been saved. I mean, I really believe that it could have been, and we're just not, We're, we're just not getting to that point where, uh, we start, we're starting to see a decrease. And the only way that's gonna do that is none of us here are professionals. We're not. In fact, when I stand up and speak, I make it abundantly clear.

Michael Zibilich ([01:06:13](#)):

I'm not a psychologist, psychologist, philosopher. I'm a dad that lost his son, and his son had an opportunity to potentially save his life, and it wasn't there. How can we make that awareness practical? How can we make that awareness, get to someone that can make a difference? I mean, I firmly believe that an intervention in Keller's situation, uh, he had a temporary problem in which his vision moved to tunnel vision. He didn't wanna die. He just wanted the pain to stop the rejection, to stop the embarrassment, to stop. We've gotta get to a point where that help can, can be, you know, can be accessible.

Dennis Barbour ([01:06:59](#)):

Michael, can you talk a little bit about Keller, um, as a dad?

Michael Zibilich ([01:07:04](#)):

Yeah. He was, uh, you know, like I said earlier, at the risk of being redundant, it does make me smile. And I know it's strange to talk about your deceased child, but <laugh>, I'm, when I look to the right, there's a, a pocket full of pictures that are, that are standing and steering back at me. And I really believe that at, at the end of the day, like before I ever step out on a stage or in an auditorium, he's saying, Go ahead, old man, make the move. Stand up there and talk about me. Just a great kid. Uh, I think I've defined that as the greatest combination of strength and kindness in a human being on the field as an athlete. He was tenacious, um, uh, you know, in any type of wilderness situation, climbing white water, fearless beyond belief. Yet at the same time, he was the guy that was gonna introduce himself to the new kid at school, at a school dance.

Michael Zibilich ([01:07:58](#)):

He was gonna go up to not the beauty queen. And believe me, he had plenty of them and say, How are you doing? You know, I'm, I'm not trying to paint him as a God. But he was always, he led from a position of, of, of action, not cajoling, people not putting their arm around him, uh, patting him on the back, just by his very nature. And which, which made the, you know, the entire situation with his death seem extraordinary. We had a, uh, uh, a situation in which six weeks after his death, uh, I was contacted by the last human being that saw Keller Alive, which was a young man that was three doors down in his dormitory at LSU. And I drove specifically down to have lunch with him. In the most emotional meeting I have ever been with a human being in my life, Kelly's death was still incredibly fresh <laugh>.

Michael Zibilich ([01:08:57](#)):

It was, and it's, frankly, it's still fresh after 10 and a half years. I think we all know <laugh>. The road doesn't get any less bumpy the ship. You know, maybe the shock absorbers are a little, a little easier to take the bumps, but not really. And in that, uh, in that discussion, this young man, uh, who'll be nameless in this discussion, told me, he said, Mr. Zibilich, I'll never forget, uh, y'all moving Keller into the dorm. I didn't get a chance to meet you. Uh, but I saw you moving in and out. And then when every, when everyone left, Keller was the first guy down the hall, stuck out his hand, looked right in my eye and introduced himself and asked who I was. And he said, instantly, I knew this guy was completely different from anybody I'd ever met. Number two, Mr. Zibilich, for eight months.

Michael Zibilich ([01:09:48](#)):

There wasn't a single day in my life in which my original perception was not reinforced on an unbelievable level. I watched what he did at LSU in a brief period of time. And number three, and most importantly, he had come down to our room 45 minutes before his death to straighten out a problem with me and my roommate, as only Keller could do. Then he walked back to his room. He said, If I was not the first person, when that door was locked down to see and grab your son, there is no one on this earth, including our Lord, that could make me believe that the guy that left my room is dead. And he said, That is, you know, besides Kelly's death, which is beyond tragic, Mr. Zili, it's stunning to me how someone could be doing an act of friendship in mercy in one moment, and then moments later. And he said, I understand when he went back to his room, he wrote a girl in Atlanta, Oh, I forgot your birthday this morning. Happy birthday. I'll see you in three weeks, then make five telephone calls and be gone. It

absolutely extraordinary. I'm sorry for going on a little bit too long about this, but, uh, that sort of sums up Keller.

Dennis Barbour ([01:11:13](#)):

Can you talk a bit about Max?

Ivan Maisel ([01:11:18](#)):

Uh, I'd be happy to. You know, the one, the secret that all of us in the club no one wants to join has, has, is that, uh, we like talking about our kids. We lost it keeps them present. It keeps them around. I, I, uh, when the book, my book was published last year, we had a party for our friends, and Max's fourth grade teacher came to the party and told a story about Max in the colonial play. You know, it's fourth grade in New England, you have a colonial play. Yeah. And, uh, love it. And, and Max was put, Max played Patrick Henry. And, you know, Max was, as I said earlier, he was shy, he was withdrawn. He didn't say a whole lot, but he stood up and he pounded that cafeteria table and said, Give me liberty, or give me death. And whole class went, Whoa.

Ivan Maisel ([01:12:14](#)):

And she said, And even I was kinda like, Whoa, Max <laugh>. Uh, and, and it was just great to hear that story because, you know, if you can bring me an anecdote, I don't know, that's an incredible gift. Uh, and, uh, because as Mark said, we don't get any new ones unless somebody brings one. Uh, he was, uh, my short description of Max was, he was proof. God had a sense of humor. Uh, he had no interest in athletics. Uh, which as you can see, the wall, uh, behind me, books full of sports, uh, books about sports. I'm a been a college football writer for my entire adult life. Uh, but, you know, he and I bonded, uh, over humor. Uh, I, he had a really, really sharp dry sense of humor. Very, he was very funny. You know, he just kind of outta nowhere.

Ivan Maisel ([01:13:10](#)):

He, you wouldn't even notice the knife going into your ribs. Uh, and, uh, we did bond. He, you know, as, as so many kids, he was into Pokemon. He was into anime, and, and before that, he was into Legos. And, and when the NBA had a Lego set, then he became an NBA fan. So I was forever indebted to the late David Stern bat. And we would drive an hour and a half to, uh, the net to New Jersey to see the Nets play because, uh, Jason Kidd, who was in the Lego game, played for the net. So, uh, yeah, he, he had found, uh, his interest in photography. And in RIT is in Rochester, where Kodak was founded and thrived for decades. And, and the, the curriculum at RIT is in photography, is terrific. And he was doing well there. I mean, we had a, a professor on the, uh, on the faculty there who took an interest in Max, cuz he kind of reminded him of one of his children.

Ivan Maisel ([01:14:19](#)):

And he said Max was doing well. And, uh, and he, Max was sort of a TA for him. And in the morning, uh, going on Tuesday morning, Max was missing on Monday. And on Tuesday when he didn't come to the class, the professor said, I knew something bad had happened. Cuz he never missed. He did what he was told to do. Uh, he did what he was told to do throughout his life. Uh, he, he was the only one of our three kids who listened. <laugh>. I apologize to my daughters, they would agree with me. Uh, and, uh, but you know, he just, there are a lot of reasons we think he began to spiral. Some of them were a bad, we think were a bad mix of, of medication. Uh, uh, some of them were, uh, an emotional trauma. Uh, and, uh, it just, we, you know, he just spiraled away. We lost him.

Dennis Barbour ([01:15:22](#)):

Mark, you know, talk a bit about Tyler.

Ivan Maisel ([01:15:26](#)):

Yeah.

Mark Hillnski ([01:15:27](#)):

It's, uh, it's, it's great to hear these stories and, and to hear the guys laugh a little bit. Um, Tyler, you know, there, there's a couple, a couple ways to describe Tyler. I, I think one of the, one of the stories or anecdotes after Tyler passed, we, we spoke to so many, you know, as, as I've even pointed out, we, we did chase the, the what happened, um, to Tyler question, you know, still are, um, it doesn't, it doesn't bring him back certainly. But in our, in our role at Husky's Hope, you know, learning more about what happened to Tyler and being able to share that I think is important. But, but I'll never get over this. You know, Tyler's, um, Tyler's head coach, uh, at Washington State was Mike Leach. And I still keep in touch with Coach Leach today. But one of the things he, he insisted on, you know, a couple days after Tyler passed, and even at the memorial, and he's quirky guy I, Ivan, you know, is, knows probably better than all of us, but, um, quirky guy.

Mark Hillnski ([01:16:31](#)):

But he was insistent that we look into the possibility that Tyler's life was taken by another person. And, and, and it, and not in the fashion of quirky and, and odd. This was, this was a, this was a heartfelt worry and thought. And, and as you explore that conversation a little bit, you can imagine it's, it's raw and rough and difficult, and we're asking him why. And, and really, um, it just goes to show that if it can happen to any of our kids, it can happen to anybody else. And, and not really to scare anybody, but, but to drive awareness. And so through that conversation, you know, know, coach explained, I, I have 130 kids on my roster, and I would've put Tyler at, at number one on kids I wouldn't have to worry about or for mental health issues. He was happy, he was funny.

Mark Hillnski ([01:17:21](#)):

Um, the quarterback at the time, Tyler was a backup. When he, when actually I take that back. He, he was a starter at the time. He started our bowl game, um, his last football game. But, uh, there, there's quite a bit of stories. We had a chance to be on a podcast with Luke Falk. Luke was the starter at the time at Washington State. And, uh, thi this was Tyler's, I don't know if it was his, um, sarcastic is it, it gets replayed. But he had, he loved to, to push Luke a little bit. And Luke was very fastidious. You know, he, he followed, uh, the timing and like with most of the athletes that we know, and their days are planned out from five 30 in the morning till 10 o'clock at night. Um, Coach Leach didn't always run his quarterback meetings on time like that.

Mark Hillnski ([01:18:10](#)):

And he spent a lot of time talking about personal stories and his famous pirate stories and pieces of eight. Um, and so the, the story we got from, from Luke and the guys was that as coach would be winding down this quarterback meeting, that Tyler would just wait till the very end when, when coach was outta coffee and ready to go. And he'd ask, you know, some random question. It could be about football. It could be, you know, how to run a different play against a different defense and all that. But it was designed to, to bring some levity in. What it did is it, it caused coach to go off in a storytelling tyrannid that drove Luke, you know, bananas. And that's about, you know, we, we play a video when we

talk to the kids in, in this presentation. And, you know, I, I never get to talk about the pieces and why they're put together, and there's not always a reason behind everything.

Mark Hillnski ([01:19:03](#)):

We were, we were fortunate to get some real good footage. Um, you know, college football gets, gets on air a lot. So we had a lot of that to work with. And, and he, you, there's a, there's a game sort of midway through his, through his last season there where he came back in, we were getting beat up by Arizona, at Arizona, Um, they brought Tyler in just, just before the half, ran down and scored, brought us a little bit back, and he got the chance to play the second half. Um, Tyler threw for 504 yards, four touchdowns in one half of football. And so this was, this was Tyler's world, you know, he e extra time, you know, over time, he just wanted to continue to play. That was, that was his deal. He loved to participate, he loved to compete. Um, and we didn't, we didn't win that game. And, but when you look at this video and you see some of the clips from it, there's one instance where he runs in a touchdown. And as he's wa, as he's running sort of the back of the end zone, his team surrounding him to lift him up and cheer him on, you know, and he hands the ball to an Arizona, um, you know, security guy or, or something there in the background. And he, and he nods his head, you know, just ever so slightly.

Mark Hillnski ([01:20:22](#)):

That was his <laugh>. That was the most, uh, you know, from his family watching that, that was the most confrontational. Tyler was on the field, you know, he, he would support his teammates and stuff, but I always get a kick outta outta watching this little gesture and say, See, he, he, uh, he wanted to put it to him, you know, but, but his way of doing that was very gentle, you know, so, so as, as I described sort of earlier, he was our B type personality off the field, on the field, incredibly, um, competitive, but always a team player, right? And so I have these beautiful interviews after these games, the game triple over time that we won. You know, Tyler, how'd you do today? Oh, shoot, I was just playing football out there. Um, that was him.

Mark Hillnski ([01:21:12](#)):

And I think, you know, all of us, you know, I, I've heard a different version of this. None of us are mental health practitioners. Um, and I believe I, I, I believe in the, the power of the guys and women that, that do this work, right? Um, but when I think about Tyler, I, I, he would hate this, you know, he, he was shy otherwise and didn't like to draw attention to himself. But in these interviews, you know, after the win, how shoot, how you, I just playing football out there. And then he goes on to tell why Jamal was the best guy, and the defense was awesome. And the special teams, and we love that about our athletes. You know, we, we want them to, to pass the, um, the success and, and point out the stars and the players on the team besides yourself.

Mark Hillnski ([01:21:58](#)):

We love that humble attitude. There's a second interview after that Arizona game, after we lost, and the questions were nearly the same, Hey, too bad, what happened? And he immediately goes into dissecting what he did wrong. And if, almost if, but for him, they would've won the game, you know? And we love that too. They take responsibility for it. And then, and you guys can appreciate this. You, we've watched this enough times, and we're probably reading way too much into it, but his, his body language after the bowl game, which was two weeks before he passed, um, was very different. And they asked, one, one of the questions was, Can you please evaluate your own performance? And Tyler said,

We lost so not good. And it, and it was so unusual for Tyler to talk like that because he, he wanted to share, you know, the wins with the team.

Mark Hillnski ([01:22:49](#)):

And he wanted to shield his, uh, his teammates from not the pressure, but you know, the questions that come after loss. And then seeing that, you know, here it is almost five years later, you could really tell the difference. You know, the, the look in his eyes, the body posture. Um, and sometimes those are the subtle changes, uh, we've learned to recognize, you know, sadly for Tyler, Too late. And we've with Tyler, and kind of last comment, you know, he, he was that guy when you walked into a room, he, this light didn't shine on him. It sort of reflected off. He, he was a master at, and it sound, I was listening to Michael, He was a master at turning the conversation away from him and asking about you, you know, and how's your day? And how's your family? And how are you enjoying your life?

Mark Hillnski ([01:23:36](#)):

And, and I think a lot of that, you know, in, in hindsight, made others feel good. But I think it was a way for Tyler to deflect what he was thinking, um, and, and to not talk about things that were terribly serious. And, and looking back on it, I, it, you know, I have a million regrets, but one of 'em, it was to try to dive into that a little bit, right? And we, we tell our, our kids and our coaches, Listen until you can rule out mental health issues, uh, you need to follow your gut until you've resolved that issue. And I think in Tyler's case, he was, sadly, he was a master at hiding those feelings. But he is a terrific kid. We said it before. We liked him a lot. We love all our boys. Um, fun to be around, gonna be missed for a lifetime. Um, but excited to be here today, even just to say his name a few more times. Think you're on mute, Dennis.

Dennis Barbour ([01:24:41](#)):

What can, uh, parents do and other caregivers do, if anything, to prevent this tragic outcome? Michael?

Michael Zibilich ([01:24:56](#)):

Uh, boy, that is, uh, <laugh>, that is a difficult, uh, question that has, uh, clearly, uh, come across my mind about, uh, the number of, uh, miles there are in the length and breadth of, uh, of the, uh, of the universe. And I guess, um, the only way I can look at it is the, the, the retrospectively, if I knew what I knew now, and if I did know what I knew now, would, would that actually, excuse me, make a difference? Uh, I, I, I think the, the, the main thing is, is actually putting, uh, a lot more emphasis on, uh, talking about your emotions. Um, you know, I grew up in a, as an athlete all the way to college was in the Marines, mountain climber, the whole deal. I didn't try to be overly tough or hard on Keller, you know, I'd never forced him into football.

Michael Zibilich ([01:25:55](#)):

He wanted to play soccer. That was great. But we never, it, it never seemed like a necessity to talk about, Well, how are you feeling? Did that, if you got a B did that upset you? If you had a, you know, something happened at school with a teacher. Things went so miraculously Well, that it, uh, that I, I never thought that that would be something to talk about. But, you know, now if, if a, if a new Keller appeared in the, in the room, that would be part of the discussion. The same discussion when I taught him to kayak as a, as an eight year old. You gotta have your life jacket on. You gotta have your throw rope. You, you never paddle alone. You've gotta think of an exit strategy. You know, safety's always one.

You know, all those things that we did, that we do in all aspects of so many things from crossing the street to playing with fireworks, it really doesn't make any difference.

Michael Zibilich ([01:26:51](#)):

But I didn't do that. I really didn't. Gail didn't do it. And it's not a pejorative against us. It's just you, We didn't think it was necessary. And, uh, just like Mark said, if someone would have asked anyone that new Keller, is this guy the most or least likely to take his life? And it would've been Keller the least likely. So I would've, I would make it a part even from, you know, a very early age, uh, to talk about how you're feeling and, uh, to, to, to be able to reach out and, uh, try to get some help.

Dennis Barbour ([01:27:34](#)):

Ivan,

Ivan Maisel ([01:27:38](#)):

What can parents,

Dennis Barbour ([01:27:41](#)):

What can parents and other caregivers do to, to prevent the tragic, uh, tragic outcome of suicide?

Ivan Maisel ([01:27:53](#)):

I had a million regrets that, Yeah, I'm, I'm, uh, right there. And, you know, I didn't talk to Max about his, when I thought he might be struggling, cuz I didn't

Ivan Maisel ([01:28:07](#)):

Him to think, I didn't have confidence in him that, uh, he wouldn't, you know, that he was unsteady, which is, you know, so dumb. I mean, just, I mean, my heart was in the right place, but I, I was, I think I was honoring the stigma. And, uh, I didn't wanna, I didn't want him to feel like I didn't have confidence in him. So I just, uh, I tried to constantly show to him that I was proud of him, that I had confidence in him, that I had belief in him, uh, which, you know, was not, I mean, I meant well, but it was not the right thing to do. I, I think, as Michael said, you gotta treat it like you do anything el any other health issue is what, you know, that's been a theme throughout our seminar. You know, it's a health issue and you have to treat it as much. And, uh, you know, if, if they, if they respond, you know, uh, angrily to whatever it is, you say, Well, they're teenagers anyway, of course they're gonna do that. You know, I mean, so it's just one more thing on the list you're annoying them about, uh, uh, but it's, it's something that we all, I think as, as parents, you just have to treat it as one more thing on the list to, to be on the lookout for. It's very simple in that regard.

Dennis Barbour ([01:29:32](#)):

Mark. Oh, you're on mute, Mark.

Mark Hillnski ([01:29:38](#)):

I'm thinking about that a lot. And, uh, we get asked that question, you know, what, what can we, what can we do as parents? In our case, I think, um, you know, you, you say it's, it's almost a throwaway now, you know, how you doing? How's it going? How was your day? I, I think as parents, we probably did that a lot, you know? Um, but, but the answers, when you ask a question that way, um, often come back very

flip and, and quick. And, you know, we talk in soundbites and we communicate in 144 characters sometimes. Um, and so I would, I would we do now and we continue to encourage, uh, the parents that ask that question, and the ones that are in some of these talks that we give, um, to dive a little bit deeper, right? And that's, that's kind of what we're all saying.

Mark Hillnski ([01:30:28](#)):

How do you, how do you get there? And that part of me, it, it breaks my heart because one of the, my, my, uh, my grandfather on my father's side, um, papap, this, uh, polish immigrant steelworker, toughest guy I knew, um, union guy. I mean, it was, uh, just a, just a neat guy. When he would come out and visit when I was young, he, he would sit me down and I was 13, 14, 15, you know, just, just about ready to go to high school. And, and I was full of piss and vinegar, and I knew what I was doing, and I was a happy kid. And, and he'd sit me down and, and he'd say, Mark, are you, are you happy? I, oh yeah, Pat, I got this, you know, I raced in this motorcycle race. I got this little girlfriend over here, and my friends love me, and I'm enjoying playing my sport. Yeah. Yeah. That's great. That's great. Are you happy? Talk to me. Are you happy? And I, it, it sticks, you know, as, as an experience, it sticks with you. And I tried to emulate that in different ways with, with our kids. And I think if, if I would've been more proficient in it, you, you might be able to get that story to come out a little bit more. Um, so, so the answer as simple and as difficult as it, as it is in, in our story with Tyler, there were these very subtle signs of communication would be slightly different, whether that was shorter,

Mark Hillnski ([01:31:58](#)):

Whether answers were, I, I left my phone, it unplugged, you know, and it ran out of battery. Hey, I haven't heard from you for a few days. Everything good? Yeah. Yeah. Just super busy. Um,

Mark Hillnski ([01:32:11](#)):

I would encourage the parents listening to this to simply never give up on your gut feeling. And it, and if there's something wrong, if you feel there's something wrong, you know your kid's best. Don't be embarrassed or afraid to dive straight to the heart of the matter. And, and if you have to ask if you're thinking about suicide, or if you have a plan and you can listen to this, you might be able, you know, to prevent a tragic outcome by being vulnerable yourself, by showing your kids that whatever their answer is, you care about it. You're not, you're not judging the answer. You're looking for information. And so we encourage, uh, the families that we get to spend a little bit of time with to do just that. And I, and I recognize, listen, it's, it's difficult. We've all done it to agree, I think on this panel, we're all very diff tough on our ourselves and our performance because we lost our, our sons. Um, but I, I don't think it's as simple as that. But that's the, that's the answer we've been giving, um, and trying to share with as many folks as we can.

Dennis Barbour ([01:33:15](#)):

How do you, what suggestions do you have for comforting those that are grieving because of your loss, Ivan?

Ivan Maisel ([01:33:26](#)):

Well, that really is why I wrote the book, Dennis. Uh, because I was terrible at grief. I was terrible at grieving. And then I, and then I was immersed in it, and I saw how not only I responded, but I saw how people responded to me and what helped me immensely. And one of the central messages that I try to convey in, in the book is that grief is a form of love. Why did I hurt so much? Well, it's because I loved

him so much. So grief to me, grief is the form that love takes after the subject of that love is gone. And thinking of it in those terms allowed me to, uh, better handle it, You know? Uh, you know, Michael made the point that it, it, it hurts as much today as it did 10 and a half years ago. Well, yeah, but we all get used to the burden.

Ivan Maisel ([01:34:29](#)):

We all get used to carrying the grief. I just feel like it, it's right here on this shoulder. And, uh, you just pick it up and go, You don't have a choice. You can't stay where that person is. Uh, you've got to keep on living your life. There are good things that are still available to you. Just because a really bad thing happened doesn't mean that good things will stop happening. Uh, that's a, uh, you know, that's a tough message to, uh, embrace, uh, when you, when you hurt so much. But it happens to, to me anyway, I think it, it's spot on. And, uh, all you can, and as far as comforting those who are grieving, as we said earlier, tell 'em a story. Uh, don't, uh, don't ask them for comfort. You comfort them, and you know, I'm bringing you dinner. Go over and ra their pine straw.

Ivan Maisel ([01:35:31](#)):

Go over and rake their leaves. Go walk their dog. Just do the li you know, it's so hard to keep your life going, especially in the af immediate aftermath. Just be there for them. You may just have to listen, and you may hear the same thing day after day after day after day. Well, that's how much they hurt. They gotta get it out. You have to grieve. You've gotta get it out of your system, because if you don't get it out on your terms, it will come out on its terms at a time that's not convenient for your life. So those are in a nutshell, I think is how best to deal with it. It's a big nutshell,

Dennis Barbour ([01:36:14](#)):

Mark.

Mark Hillnski ([01:36:16](#)):

Yeah. The, the sentence we heard a lot at the very beginning is still due, is everybody grieves differently. And, and, you know, we're here on this, you know, panel here today with the symposium, and we've learned how to talk about our kids, and that brings us a little bit of peace in some cases, um, brings up some old memories that might be difficult, but, but overall, it's, it's an important thing for each of us here today to do. But that doesn't mean it's right for everybody. And, and I think I've come to learn that there, uh, you know, I consider Ivan a friend, and we, we met because Tyler happened to be playing football when he passed. And, um, it also became a national story. And I remember sitting, um, in this kitchen. We were out in California at the time, and Ivan came out and his crew, and, and we were sitting there in a quiet moment, you know, as they're setting up shots and doing that stuff.

Mark Hillnski ([01:37:13](#)):

And I said, Tell me, tell me the, forget how I phrased, but you know, tell me the thing I don't know. You know, you, you're already two and a half years ahead of me. And it, and Ivan in his, uh, you know, is most, I would say, humble and graceful, he said, But direct it, it doesn't get better. You know, it's, it's, you're gonna be dealing with this for a long time. Time heals a lot of things. It doesn't heal this. And then at, at the same time, time provides perspective. Um, and so I think with grief, you know, more, more eloquent than me, um, as Ivan said, you know, it, it come, it will come out one way or the other. And so for each of us as individuals, it's, it's, it's really important to appreciate. I know when we were in that spot very early after Tyler passed, it's exactly those things.

Mark Hillnski ([01:38:11](#)):

You know, we had, we had Tyler, or my youngest was in high school still, so we had families bringing over food and, um, making sure, you know, the little things were, were ta in California, we had a, we had a tiny little yard, so we didn't need that help. But, um, in pine straw, I love pine straw now in South Carolina. Um, what a mess that stuff is. But those are the things, right? It's the day to day just, just articulating without words, getting stuff done. The sun's gonna come up tomorrow. We gotta get through some of this. And, and in our case, um, you know, we, we had two other kids to deal with, right? I mean, it's not fair to those young people. Um, in our case, Tyler's brothers, they're young too, right? They're grieving just as hard as we are, and they deserve a happy life.

Mark Hillnski ([01:39:03](#)):

We we're, it's not, we can't pretend it didn't happen. Um, we live with it every day, but, but you have to get to a point, at least for us, for our survival, was, was to be able to talk about this and to make sure that, you know, our other two boys weren't burdened with it quite the same way. And I, I think that's unique to each family, and I don't think there's a right or wrong answer. And I, I think there's a lot of power in saying that. And so the demonstration of that is exactly as I've been described. It's to sit and listen. I know I've told this story, you know, not just publicly, but personally, thousands of times. And, and it's the same one, it's the same questions. And so you're grateful for people to listen. You know, it's, it's important for, at least for my therapy to be able to, to talk a little bit about Tyler and ask questions that aren't answerable. And so if you can approach anybody that's, that's been through this, um, time and space, um, the little things are important and certainly listening is there and to, you know, just pass, don't pass judgment. Everybody grieves a little differently. Don't be so hard on yourself. Michael.

Michael Zibilich ([01:40:13](#)):

Extraordinary. Uh, question and great answers. Uh, one of the most, uh, gratifying things that, uh, that I have been involved in, and I don't know how <laugh>, uh, my name got on the list, is talking, uh, to dads that have lost their sons. In fact, ironically, uh, this morning I was talking to a doctor here in Georgia who just lost his son one year ago, 19 years old, back from college, Took his life in the basement. Mother found him this morning. Uh, you know, you can't <laugh>, Does it get any worse? <laugh>, <laugh>? I, I, I don't guess it does, but, uh, I have been fortunate to be able to talk to a large number of people over these, particularly the last five or six years. And everything that y'all have said, uh, up until this point has been so true. Grieving is so personal, so different.

Michael Zibilich ([01:41:12](#)):

And the, the, the best advice that I give is just to be able to listen. Whether they want to cry, yell, scream, or if they're in front of you, take a swing at you. Whatever it is, it is absolutely positively, okay? And not to be judgemental or to tell 'em that they gotta do 1, 2, 3, 4, 5, There is no 1, 2, 3, 4, 5, um, uh, the only thing is time facing it on a day to day to day basis, and not holding yourself to some idea that you need to make progress every day. You gotta get closer to the goal. You gotta, you gotta get stronger. Yeah. That's not, that's not the case. To give and to tell them the truth. And I think <laugh>, we talked about this just a little while ago. No, this will be with you. And your, your grief is absolutely, positively, directly proportional to your love.

Michael Zibilich ([01:42:06](#)):

And I, there's a tear in my eye every day, and it's 10 and a half years when I think of Keller, there's no if sins and butts about it, we deal with it differently and better. And what I'm doing right now is extremely

therapeutic for me, for y'all that I'm on the panel with, to the folks that are gonna listen to this and to the people that I help to pass it on. I, I've been on conversations where I've listened to listen to a dad for a half an hour and not said a word, and he's been sensical and nonsensical. You just being there, I know sounds like such a cliché, but being in the moment, in the room on the phone, being able to, and if you're, if you have the benefit of actually physically being in front of someone, looking in their eyes and having them understand that you understand like almost no one else, because you have worn the shoes. We have worn the shoes, we've walked down it. So I know it sounds ironic to be, to be gratified, to be able to do this, but to give space to someone to act like they need to act and to give them the freedom to, and not to be a teacher and tell them, or a doctor that you need to go through this protocol. They're not interested in protocol. I wasn't interested in protocol. I felt like I had a in my chest the entire time. So...

Ivan Maisel ([01:43:35](#)):

I would add one. Uh, I would add one thing to that. And, and, you know, Mark talked about perspective. One image that helped me, and it, it was said to me by a neighbor, is that it's like standing at the, at the ocean, and sometimes the wave washes over your ankles, and sometimes it washes over your head. In both cases it goes back out. And, and time teaches you that you may have a really bad day, you may have a really bad hour, you may have a really bad two days, but it will end, you know, the, the, the, the bad feeling will wax and wane. And, and learning that helps. Uh, at least it helped me, uh, handle it, endure it. So, uh, it's something you can only learn with time, but, but I think it's a valuable lesson.

Dennis Barbour ([01:44:34](#)):

Well, thank you very much. I think your, your, your passion for the, the, there was the last question as to what motivated you to go so public with your stories. And I think that, Michael, you just kind of summed it up in terms of it's the passion for making a difference, that helping others, um, either, either, uh, through preventing this or going through it, dealing with the grief itself. Um, you guys have been terrific. I thank you for your, your insight and for sharing your stories and my condolences to each of you for your loss.

Michael Zibilich ([01:45:09](#)):

Thank you very much, Dennis. I appreciate it. And I'm so gratified to be part of a, a great group and get to get to know you guys a little bit. And, and hopefully you know that honestly to God, your, your children are always, since I've first been introduced you in my prayers and are mentioned by name in my mind, uh, every day and will always, as long as I've got the mental acuity to go forward. And I, I certainly hope our, our paths cross again and Dennis. What you're doing is just, uh, extraordinary. I mean, all these symposiums and the time and effort that you've taken, and it's been an absolute joy and privilege to get to know you over time as well, my friend.

Dennis Barbour ([01:45:52](#)):

Thank you. And for those of you who are watching, again, just to reiterate, we have a survey that'll pop up in your screen when, um, this is over, and we encourage you to send that in so that we, you can help us with, uh, future symposia. Um, speaking of which, there will be three more in our series, and you can, uh, stay tuned, uh, watching on our website for when those will happen. We also, on our website, have a, um, have a listing of those that have had already happened and how you can access them. Again, thank you for everybody. Thank you for your time. We really appreciate it.

Michael Zibilich ([01:46:31](#)):  
Goodbye, gentlemen. Thank you.

Dennis Barbour ([01:46:32](#)):  
Goodbye. Thank you.

Ivan Maisel ([01:46:33](#)):  
See you Michael, Ivan.

Michael Zibilich ([01:46:35](#)):  
Thank you, gentlemen. Bye.