

Suicide Prevention
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I feel compelled to share some of what I know about suicide and suicide prevention. I dedicate this to Anthony Bourdain, my father Charles Tudor, and the scores of others who have taken their own lives and to those they have left behind.

Please note, I use the term “complete suicide” rather than “commit suicide.” I do this to take away the sound of criminality from the term. People who complete suicide are not criminals for doing so. They are people filled with profound pain, despair and hopelessness that is hard to describe or understand if one has never felt it. Our way of characterizing and speaking of people who are in this dark place matters. Let’s start the conversation, reduce the shame and stigma around mental health issues, and educate ourselves about what we can do to help.

Here are some statistics about suicide:

- Over **44,000** people a year complete suicide in the U.S.
- **It is the 10th leading cause of death in the U.S. among all ages**
- **It’s the 2nd leading cause of death among people 15 to 34 years of age**
- **It’s the 3th leading cause of death among children 10 to 14**
- **It’s the 4th leading cause of death among people 35 to 54**
- Men are four times more likely than woman to complete suicide
- Women are three times more likely than men to attempt suicide
- **Highest risk group –Men ages 45 – 64 YOA**
- **Second highest risk group – Men ages 64 and over**
- **20 - 22 Veterans a day die at their own hand**

What are some of the risk factors of suicide? These are things that don’t mean much standing alone, but when several factors are put together in one person, the risk of suicide increases:

- Gender (men more likely to complete than woman)
- Age (see statistics above)
- Chronic physical illness
- Having a mental illness
- Use of alcohol or other substances
- Having less social support
- **Having a previous attempt**
- **Having an organized plan**
- Someone significant in one’s life has taken their own life

The bolded points are significant risk factors.

What are the common warning signs of someone considering suicide?:

- Threatening to hurt or kill oneself
- Seeking access to means
- Searching and researching for ways to do it
- Making a plan
- Talking, writing or drawing about death
- Expressing hopelessness
- Feeling trapped, like there is no way out
- Increasing alcohol or drug use
- Withdrawing from family, friends, or society
- Demonstrating a dramatic mood change
- Giving away possessions
- Saying “Goodbye”
- Having a lack of purpose
- Acting recklessly or engaging in risky activities
- Seeking revenge
- Agitation or aggression
- Rage or anger
- Low belongingness
- Social alienation
- Perceived burdensomeness
- Experiencing unbearable pain
- Expressing that they have no reason to live

Just one of the above warning signs may not have any significance (or, it could), but seeing several warning signs in one person may indicate a person is considering suicide.

What can you do? How do you respond?

- Try to establish some rapport with the person (unless you already have a rapport)
- Let the person know you are concerned and are willing to help
- Talk with the person in a quiet, private environment
- Express empathy (avoid being judgmental)
- Talk slowly and repeat your words if needed (if they are in crisis)
- Take your time—do not rush the process
- Discuss your observations with the person: Let them know what you have been “*noticing*.” Use “I” statements and avoid an accusational tone: “I have noticed you seem hopeless, haven’t been going for walks with us and are drinking a lot lately. I’m concerned about you. What’s going on for you?”
- Do not express negative judgment
- Get them talking: “I will listen to you.” “What is going on today?” Getting them talking helps them get through the crisis
- Listen to what brought them to this place in their lives

- Paraphrase what they've said – use active listening skills
- Ask if they have been using alcohol or other drugs?
- Have they made a suicide attempt in the past?
- Clearly state that thoughts of suicide are often associated with a treatable mental disorder
- Tell the person that thoughts of suicide are common and do not have to be acted on
- Help the person identify things that have helped in the past
- Try to involve the person in the solution

The most important things to ask:

1. **“Are you thinking of killing yourself?” or “Are you suicidal?”** Don't mince words or try to soften it. By being direct, but kind, you will give the person reassurance that they can talk to you about this difficult topic. ***DON'T*** think you are putting the idea of suicide into their head by bringing it up! You're not! Even young children think of killing themselves. I recently heard of a 5th grader who completed suicide. By bringing it up directly, they will feel more confident that you are willing and able to listen.
 2. **“Do you have a plan?”**
 3. **“When will you do it?”**
 4. **“Have you acquired what you need to carry out the plan?”** Have they acquired a gun; collected up enough medication for an overdose, etc.
- Ask questions without dread
 - Appear confident, as this can be reassuring

Important things to do:

- Give the person contact numbers (see below)
- Check in on the person (don't hesitate or think you are bothering them)
- Find something positive in the future they can focus on
- Call 911 immediately if:
 - The person has a weapon
 - Is behaving aggressively
 - Is actively suicidal and leaves or refuses to allow you to stay with them. “Actively suicidal” means they answer the 4 questions above with affirmative answers and they are planning on doing it within the next 24 hours or so (you must use your best judgment on this time frame).

Do Not

- Do Not** leave an actively suicidal person alone
- Do Not** use threats or accusations to try to prevent suicide
 - *“You will go to hell”*
 - *“You will ruin other people's lives if you die by suicide”*
- Do Not** agree to keep their plan a secret

*You **can** gently remind them that they are loved and cared about (if you know this to be true...don't say it if you aren't sure). You **can** say that their family, kids, pets need them (again, make sure you if there is an estrangement you don't use this tactic). It is amazing how a pet can give a person a reason to live.*

When a person is in such a state, they often not only have a sense of hopelessness, but also of helplessness. They can feel immobilized and unable to help themselves. It is part of the illness. It is not “enabling” to spend time, bring them a meal, make suggestions, provide emotional support, or take the person to the doctor, therapist, treatment center or emergency room.

Please understand that you may do all the right things, ask all the right questions and get all the right help for a suicidal person, and they may still take their own life. You also may say some things that aren't ideal, but remember, if a person takes their own life, it is not your fault.

There are many mental health treatments available to help people suffering from suicidal thoughts and other mental health issues. These treatments include but are not limited to medication and therapy.

We can provide a lot of hope for the hopeless by informing ourselves and not being afraid to address the issue. It takes a lot of courage to ask a person if they are suicidal, but you might be saving a life. Please learn about mental health issues and how to help. Many of us have learned CPR and basic first aid to be able to help someone in a health crisis until a professional arrives. How about doing a Mental Health First Aid class (www.mentalhealthfirstaid.org)? This is an 8 hour class that is given nationwide to help lay people learn about mental illness and how to help in a mental health crisis. The trainings are usually given at a very low cost. Check online to find one close to you.

Here are some important phone numbers and websites:

National Suicide hotline: 800-273-8255 - <https://suicidepreventionlifeline.org/>
(Veterans, press 1 after dialing the number)

King County Crisis Clinic Suicide Hotline – 866-4-CRISIS (866-427-4747) -
<https://crisisclinic.org/>

Code 4 Northwest (for first responders and their families): 425-243-5092 -
<http://www.code4nw.org/>

The Trevor Project (for LGBTQ): 866-488- 7386 - <https://www.thetrevorproject.org/>

Thank you for taking the time to read this. If you have any questions about this material please don't hesitate to ask or contact me.

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