

Suicide Prevention Basics: What you should know



National Suicide Prevention Week
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World Suicide Prevention Day
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National & CT Suicide Statistics

- In 2009, there were 33,300 suicide deaths in the US, and it was the 11th leading cause of death (homicide=15th).
- 2000-2006, in CT, suicide was the 13th leading cause of death (homicide>20th). *However*, suicide was the 2nd leading cause of death for 25-34 year-olds, 3rd for 10-24 year-olds (2nd for college students), 5th for 35-54 year-olds, and 10th for 55-64 year-olds. Average of 279 suicides a year.
- In 2006 there were over 4x as many hospitalizations for intentional self-injuries compared to suicide deaths.

Sources: CT Department of Public Health (DPH) & Federal Centers for Disease Control and Prevention (CDC)

Myths versus facts...

- **MYTH:**
Thinking about suicide is a normal reaction to extreme stress.
- **FACT:**
Suicide is directly related to mental illness, typically depression, and is not a normal reaction to stress or emotional disturbance.

Myths versus facts...

- **MYTH:**
Asking a depressed person about suicide will push him/her to complete suicide.
- **FACT:**
Studies have shown that patients with depression at times have these ideas and talking about them does not increase their risk of suicide.

Myths versus facts...

- **MYTH:**
People who talk about suicide don't complete suicide.
- **FACT:**
Many people who die by suicide have given definite warnings to family and friends of their intentions. Always take any comment about suicide seriously.

Warning Signs

American Foundation for Suicide Prevention

- **Observable signs of serious depression:**
 - Unrelenting low mood
 - Pessimism
 - Hopelessness
 - Desperation
 - Anxiety, psychic pain and inner tension
 - Withdrawal
 - Sleep problems
- **Increased alcohol and/or other drug use**
- **Recent impulsiveness and taking unnecessary risks**
- **Threatening suicide or expressing a strong wish to die**
- **Making a plan:**
 - Giving away prized possessions
 - Sudden or impulsive purchase of a firearm
 - Obtaining other means of killing oneself such as poisons or medications
- **Unexpected rage or anger**

Risk Factors

National Strategy for Suicide Prevention

- ***BIOPSYCHOSOCIAL RISK FACTORS***
 - Mental disorders, particularly mood disorders, schizophrenia, anxiety disorders and certain personality disorders
 - Alcohol and other substance use disorders
 - Hopelessness
 - Impulsive and/or aggressive tendencies
 - History of trauma or abuse
 - Some major physical illnesses
 - Previous suicide attempt
 - Family history of suicide

- ***ENVIRONMENTAL RISK FACTORS***
 - Job or financial loss
 - Relational or social loss
 - Easy access to lethal means
 - Local clusters of suicide that have a contagious influence

Risk Factors

Continued

- ***SOCIOCULTURAL RISK FACTORS***
 - Lack of social support and sense of isolation
 - Stigma associated with help-seeking behavior
 - Barriers to accessing health care, especially mental health and substance abuse treatment
 - Certain cultural and religious beliefs (for instance, the belief that suicide is a noble resolution of a personal dilemma)
 - Exposure to, including through the media, and influence of others who have died by suicide

Protective Factors

National Strategy for Suicide Prevention

- Effective clinical care for mental, physical, and substance use disorders
- Easy access to a variety of clinical interventions and support for help-seeking
- Restricted access to highly lethal means of suicide
- Strong connections to family and community support
- Support through ongoing medical and mental health care relationships
- Skills in problem solving, conflict resolution, and nonviolent handling of disputes
- Cultural and religious beliefs that discourage suicide and support self-preservation

Suicide Prevention Goals

- Enable individuals who may be at risk to get help.
 - **Do not hesitate to call 9-1-1 if you question the immediate safety of a person.** Otherwise suggest an Employee Assistance Provider, private clinician through insurance, or United Way of CT **2-1-1** Crisis Hotline.
- Minimize risk factors and reinforce and enhance protective factors related to suicide.

Prevention Strategies

- [Reduce stigma](#) associated with mental illness, substance abuse, suicidal behavior, and [increase help-seeking](#) for such problems.
- Promote [development of interpersonal and social competency through training](#) in warning sign identification, stress management and coping skills to help individuals deal with problems and refer to mental health professionals as needed.
- [Enhance the safety net](#) by educating citizens to become Gatekeepers who can identify warning signs of at-risk persons, respond to them and lead them to help. Learn how to be a Suicide Prevention Gatekeeper.
- Contact the CT Clearinghouse for more information on Gatekeeper Training: 1(800)232-4424.

Prevention Strategies

“Safe and Effective Messaging for Suicide Prevention”

- [DO:](#)
 - Emphasize help-seeking and provide information on finding help.
 - Emphasize prevention.
 - List the warning signs, as well as risk and protective factors of suicide.
 - Highlight effective treatments for underlying mental health problems.
- [DO NOT:](#)
 - Glorify or romanticize suicide or people who have died by suicide.
 - Normalize suicide by presenting it as a common event.
 - Present suicide as an inexplicable act or explain it as a result of stress only.
 - Focus on personal details of people who have died by suicide.
 - Present overly detailed descriptions of suicide victims or methods of suicide.

Source: National Suicide Prevention Resource Center

Connecticut Resources

- American Foundation for Suicide Prevention- Southern CT Chapter: www.afsp.org/chapters
- CT Clearinghouse: 1(800)232-4424; www.ctclearinghouse.org
- Department of Children & Families
 - Emergency Mobile Psychiatric Services: 2-1-1; www.ct.gov/dcf/cwp/view.asp?a=2558&q=314354
 - Youth Suicide Advisory Board: www.ct.gov/dcf/cwp/view.asp?a=2570&q=314514
- Department of Education
 - Guidelines for Suicide Prevention: Policy & Procedures www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Student/PsychSocial/SP_Guidelines.pdf
- Department of Mental Health & Addiction Services
 - DMHAS Crisis Services: www.ct.gov/dmhas
 - CT Youth Suicide Prevention Initiative: www.ct.gov/dmhas/cyspi
- Department of Public Health
 - Intentional Injury & Violence Prevention Program
 - Interagency Suicide Prevention Network
 - CT Comprehensive Suicide Prevention Plan (2005): www.ct.gov/dph/cwp/view.asp?a=3137&q=397624
- ****United Way of CT Infoline/Crisis Hotline: 2-1-1; www.infoline.org/crisis****

National Resources

- American Association of Suicidology www.suicidology.org
- American Foundation for Suicide Prevention www.afsp.org
 - Suicide Prevention Action Network www.spanusa.org
- Centers for Disease Control and Prevention www.cdc.gov/violenceprevention/suicide/index.html
- National Hopeline: 1-800-SUICIDE (784-2433); www.hopeline.com
- National Suicide Prevention Lifeline: 1-800-273-TALK (8255); www.suicidepreventionlifeline.org
- National Suicide Prevention Resource Center www.sprc.org
- Substance Abuse Mental Health Services Administration
 - National Suicide Prevention Initiative <http://mentalhealth.samhsa.gov/cmhs/nspi/>
 - National Strategy for Suicide Prevention <http://mentalhealth.samhsa.gov/SuicidePrevention/>