

Responding to Suicidal Behavior

Suicide can be an impulsive act, but it does not usually occur spontaneously. People do not just decide, all of a sudden, to end their lives. They first find themselves in increasingly difficult circumstances. Their coping skills are inadequate to deal with their problems. If someone does not intervene, eventually they are unable to cope and they see suicide as the only solution to solving their problems.

Once the idea has been considered, time is needed to plan where, when and how to complete the act. The process might take only a few hours, but typically it takes days, weeks, or months. While some young people behave very impulsively and move quickly towards suicide, the average crisis period lasts about two weeks. There is usually time to intervene. The earlier the intervention the better.

The goals of suicide intervention are to help the person:

- ◆ Get through the crisis without harm
- ◆ Know that hope exists
- ◆ See alternatives to suicide
- ◆ Identify and access available helping resources

Three Steps to Helping a Suicidal Person:

- ◆ Show you care, listen.
- ◆ Ask about suicidal intent.
- ◆ Persuade the suicidal individual to get help and help them get help.

Ask a Question About Suicide

Asking a question about suicide does not increase the risk of suicide. It is very important to use words that are comfortable for you. A young person may resist your questions, but usually (s)he will feel relief that someone has finally recognized his or her pain. It is very important to keep the conversation going in a calm and reassuring manner.

It is important to talk to a suicidal person alone and in private to allow him or her to talk freely and be able to express emotions.

Your role and relationship to the suicidal person determines how you set the stage for asking a suicide related question. The fact that you ASK the question is much more important than how you ask.

Examples of suicide related questions:

- ◆ Are you planning your suicide?
- ◆ Are you thinking about killing yourself?
- ◆ When people are in as much pain as you seem to be, they sometimes want to end their life. Are you feeling that way?
- ◆ You seem very unhappy, are you thinking about ending your life?

Responding to the answer:

When someone responds that they are thinking about suicide, it must be taken seriously.

Helpful basic guidelines:

- ◆ Listen with your full attention. Take your time, be patient.
- ◆ Speak slowly, softly, calmly.
- ◆ Acknowledge the pain.
- ◆ Reassure, be positive.
- ◆ Identify individuals (s)he can trust for support and help.
- ◆ Formulate a plan for getting help, building hope.
- ◆ Remove lethal means and substances safely and immediately.
- ◆ Offer help/hope in any way you can. Know your own limits. Do not allow yourself to be the only person who can help.

Avoid:

- ◆ Acting shocked.
- ◆ Reacting with anger.
- ◆ Interrupting and offering advice.
- ◆ Minimizing or discounting the problem.
- ◆ Arguing about suicide being “right” or “wrong”.
- ◆ Judging, condemning.
- ◆ Causing guilty feelings.
- ◆ Getting over involved or owning the problem.
- ◆ Offering unrealistic solutions.

Never:

- ◆ Ignore the behavior.
- ◆ Promise total confidentiality or agree to keep a secret.
- ◆ Try to forcefully remove a weapon.
- ◆ Leave a youth alone if you think there is an imminent danger of suicide.

Persuading Someone to Get Help:

Feelings of hopelessness and helplessness are common to suicidal people. Your support in building hope and finding help can make the difference between life and death.

Trust your instincts and take action when you think someone might be suicidal. Talk to him or her, making it clear that it is OK to talk about suicidal thoughts and feelings and that helping resources are available. Seek professional help as soon as possible.

Ask Directly:

- ◆ Will you let me help you get help?
- ◆ Whom would you like to contact for help?
- ◆ Will you go with me to get help?

How to Refer Someone for Help

Efforts to persuade someone to live are usually met with relief, so do not hesitate to intervene.

The best way is to take the person directly to someone who will help.

If that is not possible, get the person to agree to get help, and assist with making arrangements for that help as soon as possible.

A third alternative is to get a promise from the suicidal person that they will not kill themselves and that they will seek help.

If you believe a person to be in danger of suicide, it is up to you to use your judgment to see that they get the help they need. Call for Emergency Assistance - the statewide crisis hotline, police, emergency services or other helping resources familiar to you.

What if Help is Refused?

When a youth is suspected to be suicidal, the first course of action for a professional service provider is to follow the protocol of the local institution, agency, or facility.

Parents/guardians should be involved as soon as possible.

They must be informed as to why the child is suspected to be suicidal. In the event that a mandated reporter determines that a youth under age 18 appears to be at risk of attempting suicide and the parent/guardian refuses to obtain services for him/her, a report should be made to Child Protective Services (CPS) at 1-800-452-1999 for neglect - failure to seek necessary mental health treatment which may place the child at risk of serious harm. CPS will conduct an assessment to determine if abuse or neglect does exist and to engage the family voluntarily in meeting the treatment needs of the child. If the parents still will not seek treatment and the CPS believes that this places the child at risk of serious harm or at immediate risk of serious harm, a Court Order will be sought ordering the required treatment services. If there appears to be a danger of abuse if the parents are involved, a report should be made to CPS and an assessment will be conducted as described above.

By calling the statewide crisis hotline, **1-888-568-1112**, you will access the appropriate crisis intervention agency in your area.

Crisis service agencies offer professionals who have the skills, authority, and responsibility to formally assess the risk factors and level of care necessary. Treatable mental or emotional illness often underlies suicidal behavior. Treatment can work even if it has to be forced.

Sometimes involuntary treatment may be necessary. It is important that each suicidal person, at the very least, has the opportunity to get help.