WHEN THERE'S TALK OF **Suicide**

Facts about Suicide

Every 40 seconds, someone attempts suicide. Every 17 minutes, someone succeeds. Over 400,000 failed attempts a year end up with serious injuries. In most cases, the person who commits suicide has tried before and made numerous attempts to reach out to others. Ninety percent of suicides are associated with mental illness, such as depression. And 50% of suicides are associated with alcohol or drug use.

Signs of Suicidal Thinking

A suicidal person may talk of selfdestructive behavior: "Maybe I should just jump from that roof." or "My family would be better off without me." There may be sudden interest in firearms or poisons. They may write poetry about death or listen to music about suicide. If your friend or loved one is on medication, you may notice conspicuous overuse that could be lethal.

Other Warning Signs

Abuse of alcohol or drugs combined with depression, dramatic mood swings, statements of hopelessness, acting withdrawn from others, uncontrollable rage, a desire for revenge, or blatant recklessness represents emotional states of persons who have committed suicide or made serious attempts. Feeling trapped and having a high level of cynicism toward others or the employer are other risk factors associated with persons who have committed suicide in business and industry.

What Are They Feeling?

Many people have thoughts about suicide, but most will never make an attempt. Those that do make attempts may frequently focus on unresolved life problems. This can offer clues to their desperation. They may focus on unstoppable pain and say how there is no way out. They may not be able to sleep, eat, or work. They may experience profound depression and the inability to make sadness go away. They may not see themselves as worthwhile, or be unable to get someone's attention whom they value.

Who's at Risk?

Those at greatest risk of suicide have often experienced a disruptive life event such as the following:

- Loss of a loved one
- Divorce, separation, loss of child custody
- Serious or terminal illness
- Serious accident
- Violence: rape, assault, kidnapping
- Verbal, emotional, or sexual abuse
- Chronic illness
- Feeling that things will never get better
- Alcohol or drug abuse
- Ongoing bullying

Do's and Don'ts

- Do take suicidal comments seriously
- Do respond to suicidal statements
- Don't act shocked or panicked
- Don't say, "Oh, you don't mean that"
- Do ask what means of killing oneself are being considered
- Don't intervene alone
- Do encourage the person to seek professional help and help find resources
- Do offer to take the person to get help
- Do get rid of any lethal means of committing suicide: guns, poison, etc



Don't Wait...Act

When a person makes a decision to commit suicide, they may suddenly become calm. Their decision provides relief because the suicidal person has found a "solution" to their problems. Do not ignore this state of calm or apparent wellness. The suicidal person may create a checklist of "to-dos" or give away belongings. If you think a friend or loved one is planning suicide, ask. Don't let your fear of the answer inhibit you from asking this question. Most people considering suicide will talk about it. If necessary, act to get emergency help from the police so they can intervene. You may have to contact the police over the suicidal person's objection. But if the suicidal act is imminent, delay will only make the risk of suicide more likely.

Act Fast Resources

If you need immediate help for yourself or a loved one, call 911, 1-800-SUICIDE or 1-800-273-TALK. Other resources include your employee assistance program, www.suicide.org, www.afsp.com (American Society for Suicide Prevention), or www.survivorsofsuicide.com.

Effect on Others

Each suicide affects many other people. Blame and guilt are common, and so are shock and denial. Some may get angry with the victim for making that choice. Loneliness and sorrow in those left behind can result in depression. Support groups are extremely helpful in healing traumatic wounds caused by suicide.

What the EAP Can Do

It has been said, "Suicide is not chosen, it happens when pain exceeds resources for coping with pain." This is also a strong rationale for getting help from your employee assistance program. The EAP can help you find resources in the community to help you if you are depressed and suicidal or know someone who is.

This information is not intended to replace the medical advice of your doctor or health care provider. Talk to your health care provider or EAP for advice about a personal concern or medical condition.