Suicide Protocol: RHATC Providers

Language (EVERYMIND/ROSES IN THE OCEAN)

Certain ways of talking about suicide/mental illness can alienate members of the community, sensationalize the issue, and contribute to stigma and discrimination. The way we communicate about people's struggles through media, social media, in our homes and in our workplace can make a difference.

Inappropriate use of language when describing suicide and/or discussion of method can have a significant impact on people who have a lived experience of suicide or struggle with contemplation. It is often attributed to fueling the stigma, prejudice, and fear that we still experience surrounding suicide. This in turn, can prevent people from seeking help and reaching out to help others.

No one intentionally uses language, phrases, and conversation to bring distress to others, we do need to be very aware of the conversations we have. At every opportunity it is important that we improve the suicide literacy of the community including the use of non-stigmatizing and safe language when discussing suicide.

Change: 'committed' or **To:** 'died by suicide' or 'ended her/his/their own life'

"commit suicide'

Change: 'unsuccessful suicide' **To:** 'non-fatal' or 'made an attempt on her/his/their own life

Change: 'successful suicide'

To: 'took their own life', 'died by suicide' or 'ended their own life'

Change: 'suicide epidemic' **To:** 'concerning rates of suicide'

Change: 'mental patient', **To:** A person is 'living with' or "has a diagnosis of' mental illness

'nutter', 'psycho',

'schizo', 'deranged',

'lunatic'

from' or 'affected

with' a mental illness

Change: 'crazed', 'deranged', **To:** The person's behavior was unusual or erratic

'mad', 'psychotic

Change: 'happy pills', 'shrinks', To: Antidepressants, psychiatrists/psychologists, mental health hospitals

'mental institution'

Indicators (NAMI)

The potential for suicide risk is greater if a behavior is new or has increased, especially if it's related to painful events, loss, or change. Pay attention to these behaviors and do not be afraid to ask questions. Studies show that talking about suicide openly does not increase the chances of someone committing suicide.

Symptoms of suicide risk can be similar and overlap, especially during times of crisis. The following are some examples of symptoms that you may notice in your patients or patients may have noticed themselves: Social Withdrawal, Mood Disturbance, Thought Disturbances, Irregular Expression of Feelings, Changes in Behavior, Tying up Loose Ends.

Social Withdrawal:

Sitting and doing nothing for long periods of time

Losing friends, unusual self-centeredness and self-absorption

Dropping out of previously enjoyed activities

Declining academic, work or athletic performance

Mood Disturbance

Deep sadness unrelated to recent events or circumstances

Depression lasting longer than two weeks

Loss of interest in activities once enjoyed

Expressions of hopelessness

Excessive fatigue, or an inability to fall asleep

Pessimism; perceiving the world as gray or lifeless

Thinking or talking about suicide

Thought Disturbances

Inability to concentrate

Inability to cope with minor problems

Irrational statements

Use of peculiar words or language structure

Excessive fears or suspicious, paranoia

Irregular Expression of Feelings

Hostility from one who is usually pleasant and friendly

Indifference to situations, even highly important ones

Inability to express joy

Laughter at inappropriate times or for no apparent reason

Changes in Behavior

Hyperactivity, inactivity, or alternating between the two

Lack of personal hygiene

Noticeable and rapid weight loss or gain

Involvement in automobile accidents

Drug and alcohol abuse

Forgetfulness and loss of personal possessions

Moving out of home to live on the street

Not sleeping for several nights in a row

Bizarre behavior, e.g. skipping, staring, strange posturing, grimacing

Unusual sensitivity to light, noises, clothing

Tying up Loose Ends

Giving away personal possessions

Talking as if they're saying goodbye or going away forever

Organizing personal papers or paying off debts

Making or changing a will

Preparing for the Conversation

A person experiencing mental stress or a mental health crisis can't always communicate their thoughts, feelings, needs or emotions. They may even find it difficult to understand what others are saying. It is important to empathize and connect with the person's feelings, stay calm and listen without judgement.

It's important to prepare emotionally and energetically for a delicate conversation in a similar way you would prepare professionally. Make sure to check in to see if you are feeling grounded and centered. If not, take the time to do so. All it takes is a couple of minutes, as the leader of the conversation and experience, the non-verbal communication from emotions and energy set the tone.

Techniques that Communicate Safety and Support:

- *Calm Voice
- *Focus on being understanding, caring and nonjudgmental.
- *Avoid overreacting
- *Listen
- *Be comfortable with silence
- *Express support and concern
- *Use short and clear sentences
- *Avoid continuous eye contact/Maintaining eye contact
- *Ask how you can help
- *Reduce stimulation from TV, bright lights, loud noises
- *Move slowly
- *Offer options instead of trying to take control
- *Avoid touching the person unless you ask permission
- *Be patient
- *Gently announce actions before initiating them
- *Give them space, do not make them feel trapped
- *Don't make judgmental comments
- * Communicate Respect for the Courage it takes for them to Cope with this difficult experience.

Conversation: Beginning * Middle * End (AFSP)

How to Start (and Continue!) a Conversation About Mental Health

You don't need special training to have an open, authentic conversation about mental health – and often, just talking about it can be the first important step in understanding where someone is with their mental health and helping them get support or treatment if needed.

Here are some suggestions:

BEGINNING:

Trust your gut if you think someone's having a hard time and speak to them privately. Start with an expression of care, followed by an observation.

"I care about you and it sounds like you haven't been yourself for a while. I am wondering how you have been doing."

Normalize mental health by talking about it directly.

"With everything going on with your tinnitus/adjusting to your new normal, I wonder if you're feeling overwhelmed."

Let them know you get it, and that it's okay and normal – to struggle in response to life's challenges/Tinnitus challenges/growing older challenges/adjusting to new changes.

"I've been through things in my life, too, and what I have often found is that talk helps.

Whatever it is, I'm here to be of service to you."

Let people know your willing to talk about Mental Health

The easiest way to let people know you're willing to talk about mental health is to be open about your own. Try to think of it in the same way you think about your mental health. Allow it to come up naturally in conversation in the same way.

If you've seen a mental health professional in the past, when the subject comes up,

You might say, in your own words: "I've had times in my life when I've struggled. I went
to talk to someone, and it really helped me."

A casual reference like the one above can have a powerful effect, letting others know You're a safe person to talk to.

MIDDLE:

What if they hesitate?

The other person might worry that sharing how they feel will be a burden o others. They might say something like, "You must be sick of hearing about all of this," or "I don't want to saddle you with my problems."

In your own words, tell them:

"Not only am I not sick of it, but I care about you, so I want to be able to help. Life is complex – so I am here to listen, support and provide resources for you to consider."

Would they be more comfortable talking to someone else?

If you suspect the other person might be more comfortable talking with someone else, you can offer to help connect them.

"Would you be open to learning about safe people and reliable resources that can provide support and skill sets to assist you while you are learning to adapt?"

Reassure them that it's okay to talk about it.

"You know what? Everyone goes through periods in their life when they're struggling. It is quite possible that this is temporary, and with the right support accompanied by the strength and courage to talk, you may not always feel this way."

Then ask for more detail, and let them know you are capable of listening to what they have to say.

"What's the worst thing about what you're going through right now?"

And make sure you include that getting help from a mental health professional can truly make a big difference in their situation.

What if they are having a really hard time?

Let's say you're having an open, honest conversation with someone about mental health and they feel comfortable enough with you to reveal that they are having thoughts of suicide. You probably feel an immense amount of pressure. How should you respond. What can you do to connect them to help?

* Follow their lead and know when to take a break. This is a tough conversation to have, so make sure the other person knows they can stop if it feels like talking about it is too hard for them at the moment. "I want to support you, and I will be here if you want to talk more later."

First of all, realize that someone opening up in this way is a positive thing, because it's an opportunity to help. Here are some ways you can respond:

LET THEM KNOW YOUR LISTENING

Reassure them you hear what they are saying, and that you are taking them seriously.

"I'm so glad you are telling me about how much has been going on and how deeply you have been affected by Tinnitus/Aging/Big Changes and how you have been feeling. Thank you, for sharing this with me."

SHOW YOUR SUPPORT

In your own way, make sure they know you're there with them, and you care.

"I'm right here with you."

"Nothing you're going through changes how I feel about you, the courage and strength that exists within you and how awesome I truly believe you are."

ENCOURAGE THEM TO KEEP TALKING – AND REALLY LISTEN

Let them know you want to hear more about how they are feeling, and what they are going through. Listen actively by expressing curiosity and interest in the details.

"Wow – that situation/experience sounds really difficult."

"How did that make you feel when that happened?"

ASK THEM ABOUT CHANGES IN THEIR LIFE AND HOW THEY ARE COPING

Find out how long it's been that the person has been feeling this way, and any changes it's caused in their life.

"Have these thoughts led to any specific changes in your life, like trouble sleeping, or Keeping up with work?"

"Have you been getting out as much as before? Are you isolating yourself?"

BE DIRECT IF YOU SUSPECT THEY'RE THINKING ABOUT SUICIDE

Make sure not to sound like you're passing judgement - Avoid statements like "You're not thinking of doing something stupid, are you?" Avoid Guilt laden statements like "Think of what it would do to your parents."

Instead, reassure them that you understand and care.

"I really care about you, and I want you to know you can tell me anything - Are you thinking about killing yourself?"

WHAT CAN YOU SAY IF THEY TELL YOU THEY'RE THINKING ABOUT KILLING THEMSELVES

Stay calm – just because someone is having thoughts of suicide, it doesn't mean they're in immediate danger. Take the time to calmly listen to what they have to say, and to ask some follow-up questions.

"How often are you having these thoughts?"

"When it gets really bad, what do you do?"

"What scares you about these thoughts?"

"What do you need to feel safe?"

Reassure them that help is available and that these feelings are a signal that it's time to talk to talk to a mental health professional.

"The fact that you're having these thoughts tells me something significant is going on

For you right now. The good news is, help is out there. I want to help you get connected to resources that can help.

TRANSITION TO THE END:

HOW TO SUGGEST THEY COULD BENEFIT FROM PROFESSIONAL HELP

You are being a great provider/person in having this supportive conversation — but you're not a mental health professional. If the patient/person you care about has told you they're thinking about suicide, it's a warning sign that they should speak to a mental health professional. Here's how you can broach the subject:

"I hear you that you are struggling, and I think it would really be helpful for you to talk to someone who can help you get through this."

"Therapy isn't just for serious, "clinical" problems. It can help any of us process any challenges we are facing – and we all face serious stuff for different reasons and seasons."

"I really think talking to someone can help you gain some perspective, feel supported on your way to good, better, best."

"Reaching out, having the courage to become vulnerable, while feeling uncomfortable can be a profound building block for long term strength. Reaching for professional guidance and therapy is a strong thing to do, and it can make a difference."

WHAT IF THEY ARE CONCEREND ABOUT PRIVACY?

If the person is worried about others finding out that they're getting treatment, let them know their worries are mostly unfounded.

"Mental health treatment actually has even greater confidentiality safeguards than physical health treatment."

"Most people realize that mental health is an extremely important, valid part of health in general – and we all have various kinds of health issues. People who get support for their mental health are seen as strong, smart, and proactive."

If they ask you not to tell anyone, tell them you want to help them get the support they need – and that may involve enlisting the help of others. Encourage them to be a part of the conversation that happens in reaching out for help and reassure them that you'll be as discreet as possible in your effort to keep them safe.

WHAT IF THEY REFUSE?

Not everyone is ready right away. If someone you know is struggling refuses your suggestion of professional help (and if they aren't in immediate danger, i.e., that they are not presently self-harming or about to), be patient and don't push too hard.

"It's okay that it doesn't sound like you're ready yet. I really hope you'll think about it. Just let me know if you change your mind, and I can help you connect with someone."

"I know you're going through a lot, and I really believe it can make a big difference for your life, and your health. Just consider it for later and know I'm here to help."

FOLLOW UP:

Follow up and let them know it was okay to open up, that you care, and that you are still a safe person to talk to about mental health.

"You know, you have been on my mind since we had that conversation the other day."

"I've really been thinking about what we talked about, and I want to circle back. How are you feeling since we spoke?"

Being able to have a real conversation about mental health is an important way we can all be there for the people in our lives, whether it's a friend, family member, or patient. We all need to pay attention to and take good care of our mental health.

HELP THEM CONNECT

Sometimes making that first moment of contact to professional help can be the hardest. Offer to help them connect in whatever way you're comfortable with.

"I could call your insurance with you or go online to find a mental health professional. Or, I could sit with you while you do it. We can figure it out together.

End the conversation by reiterating that you are so glad for the chance to connect on this deeper level about such meaningful things in life. Remind them that we all have challenges at times, reaching out for support may benefit them in ways they have not imagined yet and you will continue to be a trusted source that will listen unconditionally.

SAFETY PLAN

RESOURCES

IN BETWEEN NOW AND CONNECTION

In the meantime, I would like to send you home with something as a reminder that you are seen, heard and supported along with safe, reputable mental health resources — local, national and international.

*CARE PACKAGE

*RHATC CARE CARD
