DEALING WITH A SUICIDAL PERSON

More than 6,000 people commit suicide in the UK each year and that equates to roughly one every hour and a half. While suicide numbers are dropping, attempted suicides are on the increase. Use this checklist if you know someone who is suicidal or you want to be able to help if the situation arises.

SEE ALSO:
Coping with Depression
Dealing with a Drink Problem
Arranging a Funeral or Memorial Service
Coping With Drug Abuse
Getting a Divorce
What to do when Someone Dies

If you are dealing with a profoundly suicidal person, NEVER leave them alone and ALWAYS try to remove any means they have of injuring or killing themselves.

Even though you are not a professional suicide or depression counsellor you can usually do something to help a despairing person and possibly prevent them taking their life. However, THIS CHECKLIST SHOULD NEVER BE USED AS A REPLACEMENT FOR RECOGNISED PROFESSIONAL HELP OR THE INVOLVEMENT OF THE POLICE.

In the end, you can only do what you are able to do. If a friend or loved one is intent on ending their life, ultimately you are not responsible for their behaviour.

HOW CAN I HELP SOMEONE WHO IS SUICIDAL?

- Always urge the person to get professional help.
- Ask openly if they are thinking of suicide because it shows you care.
- Assess the immediate risk. May include:
  - Do they have a suicide plan?
  - Will the plan work?
  - Do they have the means to carry it out?
  - Do they have a mental or physical illness?
  - Is there evidence of chronic or specific depression?
- Avoid giving advice or disagreeing.
- Be sympathetic, loving and encouraging.
- Be willing to give help sooner rather than later.
- Call the police if you think it's necessary.
- Listen and give the person every chance to explain their feelings.
- Never leave an acutely suicidal person alone.
- Never agree to keep the matter secret.
- Remember that suicidal behaviour is often a cry for help.
- Remove the means of taking life.
WARNING SIGNS OF RISK OF SUICIDE

- Conditions associated with an increased risk of suicide, may include:
  - Alcohol or drug abuse
  - Death or terminal illness of relative or friend
  - Depression
  - Divorce, separation, broken relationship, stress in the family
  - Loss of health, whether real or imagined
  - Loss of job, home, money, status, self-esteem, personal security

- Emotional and behavioural changes associated with suicide may include:
  - Declining interest in sex, friends or activities previously enjoyed
  - Declining performance at school or work
  - Difficult times
  - Feeling of hopelessness that the situation will never get better
  - Feeling of powerlessness to deal with problems
  - Feeling of worthlessness, shame, guilt, self-hatred
  - Pain, physical or emotional, that exceeds the person's ability to cope with it
  - Personality becoming sad, tired, anxious, withdrawn, irritable, apathetic
  - Neglect of personal welfare
  - Self-starvation, dietary problems, disobeying medical instructions
  - Social isolation

- Suicidal behaviour, may include:
  - Ambiguous verbal statements like, "You won’t have to worry about me any more", "I just can’t go on", requests for euthanasia information and morbid jokes and stories.
  - Development of a suicide plan, acquiring the means for suicide and “rehearsals”
  - History of previous suicide attempts or “mini-attempts”
  - Reckless behaviour, unexplained accidents, drug overdoses, taking risks with AIDS
  - Self-inflicted injuries such as cuts, burns or head-banging
  - Writing a will or giving away treasured possessions

TIPS

The organisation that is set up to help suicidal people and those trying to care for them is the Samaritans. Contact them:

- By telephone.

Anyone who is feeling depressed or suicidal and needs to talk to a friendly counsellor should contact The Samaritans immediately on 08457 90 90 90. The service is available 24 hours a day, every day of the year, and the calls are charged at the local rate. The Samaritans also have a Textphone service, for the deaf, hard of hearing or speech impaired only, on 08457 90 91 92.
In person.
The Samaritans have branches throughout the UK where people can go and talk to someone in person. Look in the Phone Book under “Samaritans” for the nearest branch or search online at [www.samaritans.org](http://www.samaritans.org).

By letter
To write to The Samaritans, address letters to: Chris, PO Box 90 90, Stirling, FK8 2SA. Every letter goes to a volunteer who will respond directly and everything will remain in confidence.

By email.
There is an email address, [jo@samaritans.org](mailto:jo@samaritans.org), and while the sender’s email address is known to the Samaritans, complete confidence applies. If someone wants their email address kept secret they should consider the following options:

- Set up a web email account with [www.hotmail.com](http://www.hotmail.com) or [www.yahoo.co.uk](http://www.yahoo.co.uk) or similar, just for use when contacting The Samaritans, or
- Anonymous servers can be used but they may be slow and unreliable. Try [samaritans@anon.twells.com](mailto:samaritans@anon.twells.com) which will automatically allocate a numeric address to the sender that The Samaritans can reply to.

Online.
All information about The Samaritans is available online at [www.samaritans.org](http://www.samaritans.org). Alternatively visit [www.befrienders.org](http://www.befrienders.org) to find details of help contacts worldwide and for some advice for suicidal people and those trying to help them.

This advice list is like a first aid kit. You can certainly help a person feeling suicidal but there are trained people with extensive resources at the end of a telephone or online waiting to give professional help and guidance (see Tip above).

Never assume that talking openly about suicide will give someone the idea. A despairing person will already have thought about it and by asking the question you are demonstrating to them that you care and want to help.

Textbooks on depression all say that suicide prevention should be reached as soon as possible and not be thought of as a last-minute activity. Some people are afraid of the consequences of seeking help, like judgement, rejection, punishment or suspension from their school or job. You need to do everything you can to reduce their pain, not prolong it, so you should constructively involve yourself in preventing suicide as early as you can.

If a person is telling you that they ARE going to kill themselves, dial 999 and get the police to them RIGHT NOW. Even if in your heart you don’t believe them, go by what they are saying and get the police. If you’re talking on the telephone, don’t wait till you can get to them to call the police but do so immediately.

You don’t necessarily need to say a lot to someone feeling suicidal and there are no magic words. If you are concerned and supportive your tone of voice and manner will convey this. Acknowledge and accept their feelings, even if they appear distorted.

If you judge a person to be on the verge of trying to take their life, stay with them. If you are talking on the telephone, make every effort to go to them or if that is not possible get someone else to join them. At the same time ALWAYS get the police or professional help to them as well.

A conversation about suicide should be seen as automatically ending confidentiality. Do not promise to keep the matter a secret because you may later have to break that confidence to save a life. You should also seek your own advice from professionals, friends or family to help you deal with the situation.

The fact that a person is still alive probably shows that part of them wants to live. Never assume that if someone wants to commit suicide nothing you can do will stop them. If they have turned to you for help then no matter how negative their manner and talk, they have done something positive.
If a profoundly suicidal person has the means at hand to end their life do all you can to get rid of those things. Conceal, remove or destroy all weapons, dangerous implements, drugs and toxic substances.

Many people have taken their lives after those they were talking to assumed they were being “manipulative” or “melodramatic”. Studies have shown that three quarters of people who killed themselves did things in the run up to their deaths to indicate to others that they were in deep despair, so it is a myth that “people who talk about suicide won’t do it”. Many people have also killed themselves “accidentally”, for example with drug overdoses, when all they intended to do was call attention to their pain or needs.

A suicidal person needs to be given hope and reminded that what they are feeling is temporary without being made to feel guilty about it. Tell them there is light at the end of the tunnel, even if they cannot see it right now.

Depression in the young may show itself in hyperactivity or acting-out behaviour. In the elderly it may be mistaken for the natural effects of ageing. The sudden disappearance of depression for no apparent reason can be cause for concern and the early stages of recovery from depression can be a high risk period for suicidal tendencies.

Depression is often set off by dates or anniversaries that trigger sad memories or feelings of loneliness. These can include Christmas, birthdays, holidays or the anniversaries of the deaths of friends and family members.

Depression can be caused by a feeling of isolation or association with a group that has different moral standards than the person’s family, friends or colleagues.