

Reference document

Suicide Prevention



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Introduction

Suicidal intent does not appear suddenly. Statistics show that about 8 out of 10 people show signs that can alert their loved ones to their problems and intentions. However, it's not always easy to understand the message clearly. Could you recognize a suicidal employee? Are you aware of factors that could drive a person to commit suicide?

True or false?

Before engaging in theory, let's start by clarifying certain myths surrounding suicide and that could interfere with interventions with an employee.

- **The suicidal person is intent on dying.** False. The person doesn't want to die but wants to end the suffering. The person is pondering his desire to live against his inability to continue suffering.
- **Talking about suicide encourages the person to go through with it.** False. Suicide is a disturbing subject that is hard to discuss. However, talking about it debunks the myths and could help the suicidal person. Asking a person if he's thinking about suicide is not an encouragement to do so, but rather an opportunity to discuss his pain. Talk about suicide but do so carefully! Avoid trivializing the subject, challenging the person to go through with suicide or praising it as an act of heroism.
- **Improvement after a crisis is a sign that danger has passed.** False. Sometimes, people in a suicidal crisis may show momentary relief and a good disposition, but that doesn't mean they have steered clear of danger. On the contrary, a sudden improvement in the suicidal cycle may indicate an acute emergency. On one hand, the person may show signs of improvement to reassure people, while on the other hand the person feels profound relief at the idea that suffering will soon come to an end. Be wary and try to identify the favourable outcomes explaining these changes in behavior.
- **People sometimes threaten to commit suicide to get attention or to manipulate someone.** False. Always take suicide matters seriously. They are always a cry for help. You must also be wary of repetitive threats or threats that extend over

a long period of time. People may perceive this as crying wolf and make them unresponsive to the gravity of the situation.

- **It takes cowardice or courage to commit suicide.** False. Thinking in terms of cowardice or courage is a projection of our own perception of choice and suicide. Suicide is not so much a question of choice but of lack of choice. A suicidal person doesn't think in terms of courage or cowardice. He can no longer deal with his life and suffering and sees no other alternative to stop the suffering.

How can we recognize a suicidal person?

Examples of clues and warning signs

1. Direct and indirect warning signs

"I'm going to kill myself"
"I want to die"
"I'll never pull through"
"You'd be better off without me"
"Soon, you'll be at peace"
"I wrote my will"

2. Behavioral clues

These include a radical or gradual change in attitudes and behaviors, giving away objects of sentimental value, withdrawal and isolation, changes in eating and sleeping habits, changes in personal hygiene, etc. Be wary of misleading clues described previously!

3. Emotional clues

These result in disinterest in anything, crying, discouragement, mood swings, aggression, increased anxiety, etc.

4. Cognitive clues

These are expressed by difficulty concentrating, lack of motivation, memory loss, etc.

Factors associated with suicidal intent

Suicidal ideation can happen to everybody but there are factors that can influence or help the person.

- **Predisposing factors:** These are related to a person's life history. The individual becomes more vulnerable (mental health problems, suicide attempts, drug and alcohol addiction, chronic physical health problems, prejudice against differences, etc.).
- **Contributing factors:** Behaviors or events which increase the existing suicide risk (difficult interpersonal relationships, refusal to ask for help, availability of suicide means, lack of a support network, recent bereavement, unavailability of services, etc.).
- **Triggering factors:** One-time events likely to increase an at-risk person's feeling of vulnerability. They can also drive somebody to go through with committing suicide. It can be a major or minor event. They are in some way the "straw that broke the camel's back" (professional failures, financial difficulties, loss of employment, conflicts, humiliation, etc.).
- **Protective factors:** They help reduce the impact of the previous factors by widening the field of possible solutions (life enhancing activities, adopting a healthy lifestyle, ability to ask for help, resilience, a respectful and fulfilling work environment, good relations with people and colleagues, etc.).

Suicidal intent

"Before attempting suicide, a person attempts everything they can to reduce suffering and solve problems. The less these methods work, the more dominant the idea of suicide becomes. It's like entering a tunnel: the farther you walk, the less light you will see. The person can't see how to stop the intolerable suffering.

However the desire to commit suicide is reversible, meaning when a person finds a solution to his problems, his suffering is reduced. As a result, suicidal ideas are less and less present." (Source: Association québécoise de prévention du suicide <http://www.aqps.info/>)

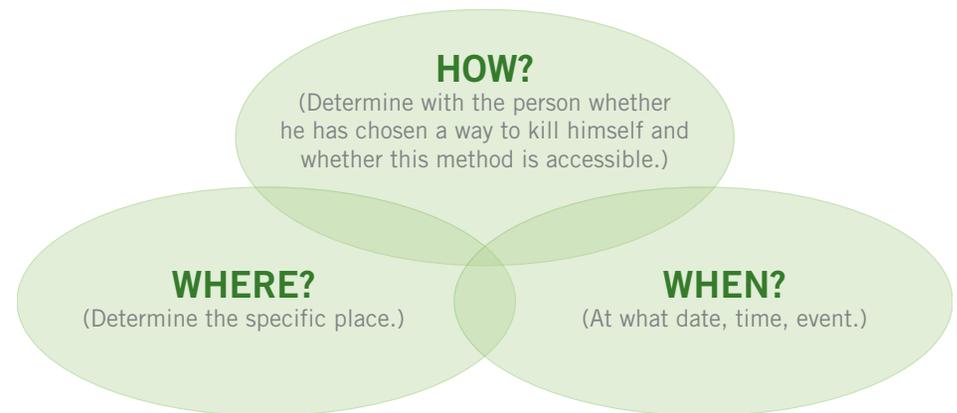
Intervention

Making contact with the employee

Tell the employee about your concerns for him and mention some of his behavioral changes that you noticed or that have been reported. Show interest in helping, supporting him and referring him to the right resources.

Questions to ask

Are you considering suicide? Ask probing questions:



Explore the situation

What's going on? Remain in the here and now. What is the most difficult to live with? Normalize and validate the emotions.

Action plan

Encourage this person to contact the employee assistance program for professional help. It won't cost a dime to reach out and dial the number. What if it helped? Do you have anything to lose? Strike a non-suicide agreement (with a deadline, specific plan, propose an alternative, trust the person and let him know) or call the suicide prevention center.

It's not necessarily easy for an employee to open up to a superior (a person in a position of authority who does his annual performance review) while he's experiencing difficulty and is in a vulnerable position. Simply meeting with the employee in difficulty to express your concerns and refer him to the right resource is already a step in the right direction.

Conclusion

- Nobody wants to die. The suicidal person just wants the suffering to stop.
- To help a suicidal person, discuss your concerns, show interest in helping and supporting him.
- Ask direct questions: Are you considering suicide? Ask probing questions.
- Before attempting suicide, a person will attempt everything they can to reduce the suffering and solve problems.
- Recognize myths surrounding suicide and don't let them influence you.
- Suicidal intent is detected through a series of warning signs. However, they are not always easy to identify.
- Various factors (predisposing, contributing, triggering, protective) can influence or help the person in the most difficult moments.
- Suicidal ideation is reversible.
- Encourage the person to contact the appropriate resources (employee assistance program, Suicide Prevention Centre, others).

References

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Association québécoise de prévention du suicide (2003). Programme accrédité de formation *Intervenir en situation de crise suicidaire*.

Centre d'intervention Le Faubourg (1999). *Intervention de crise suicidaire*, Guidelines, in-house document.

Association québécoise de prévention du suicide <http://www.aqps.info/>

Ordre des infirmières et infirmiers du Québec (2007). *Prévenir le suicide pour préserver la vie. Guide de pratique clinique*. http://www.oiig.org/uploads/publications/autres_publications/Suicide/SuicideGuide.pdf

Other useful resources

- Suicide Prevention Centre 1-866-APPELLE (1-866-277-3553).
- Psychologist, social worker, psychosocial support worker, other.
- Policemen or paramedics.
- CLSC
- Doctors

The following resources can also be helpful to manage suicide prevention:

- Browse the FAQ
- Take advantage of Health *InSight* Support Services
- Turn to your company's EAP
- Confide in a qualified professional in case of emergency