




Suicide Postvention is Prevention

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Outline:

- What is an RBHAO?
 - Behavioral Health Overview
 - Suicide Risk Factors
 - What is Postvention and why is it needed?
 - Safe Messaging and Best Practices
 - Resources
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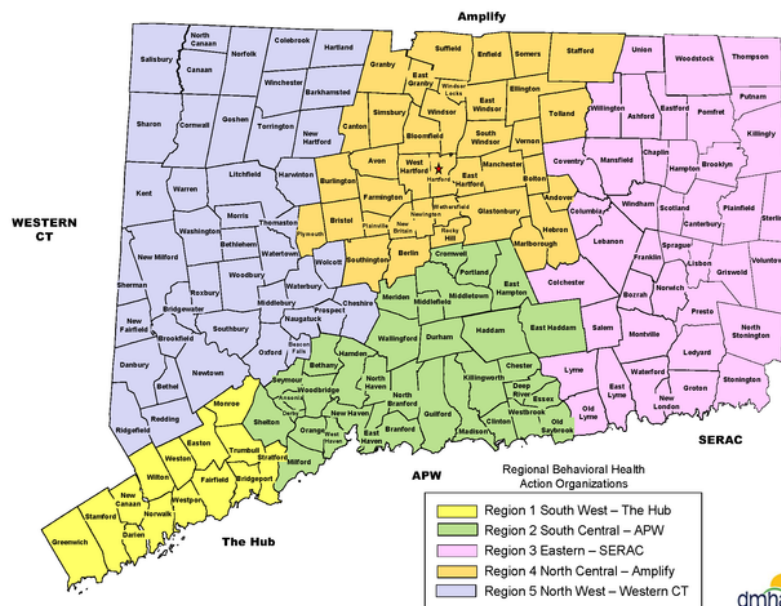


The Hub

Regional Behavioral Health Action Organization

RBHAOs serve as a strategic community partner and work across the behavioral healthcare continuum

RBHAOs are responsible for a range of planning, education, and advocacy of behavioral health needs and services for children and adults



SELF CARE

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Behavioral Health

- "The term 'behavioral health' in this context means the promotion of mental health, resilience and wellbeing; the treatment of **mental and substance use disorders**; and the support of those who experience and/or are in recovery from these conditions, along with their families and communities" (SAMHSA)



Mental Health

- Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act.” (CDC)

Some of these factors that contribute to mental health are internal and some are external



Mental Health

A mental disorder:

- Is a diagnosable illness
- Causes major changes in a person's thinking, emotional state and behavior
- Can disrupt a person's ability to work and carry on their usual relationships

Anxiety and Depression

- are the “common mental disorders”
- are called “high prevalence disorders” as they occur more frequently in the population than other mental illnesses

GENERALIZED ANXIETY DISORDER

- Is a normal healthy reaction
- Happens to everyone when confronted with certain life

events/situations

- Occurs when there is perception of threat/danger to physical and/or psychological well-being
- Moderate anxiety can be useful and energizing

.....

But for those suffering from an anxiety disorder, it feels far from normal - it can be completely debilitating



GENERALIZED ANXIETY DISORDER

Anxiety is divided into 3 main categories


1. Anxiety Disorders

- a. general feature of excessive fear (ex. emotional response to perceived or real threat)
- b. anxiety (ex. worrying about a future threat) and can have negative behavioral & emotional consequences

2. Obsessive-compulsive and related disorders

- a. obsessive, intrusive thoughts (ex. constantly worrying about staying clean or about one's body size)
- b. compulsive behaviors (ex. repeated hand-washing or excessive exercise)

3. Trauma- and stressor- related disorders

- a. Trauma (ex. unexpected death of a loved one, car accident, violent incident)
 - b. Stressor (ex. divorce, beginning college, moving)
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DEPRESSION

Depression (major depressive disorder) is a common and serious medical illness that negatively affects how you feel, the way you think and how you act.

Symptoms:

- feelings of sadness and/or a loss of interest in activities you once enjoyed
- leads to a variety of emotional and physical problems
- can decrease your ability to function at work and at home.



ACUTE STRESS DISORDER

Is an anxiety disorder that occurs within one month of a traumatic event due to emotional trauma. Acute means the extreme level of stress that disturbed your whole work function, thinking process, cognitive abilities.

Symptoms:

- feeling numb, detached, or being emotionally unresponsive
- a reduced awareness of your surroundings
- de-realization, which occurs when your environment seems strange or unreal to you
- depersonalization, which occurs when your thoughts or emotions don't seem real or don't seem like they belong to you
- dissociative amnesia, which occurs when you cannot remember one or more important aspects of the traumatic event



SUICIDAL THOUGHTS OR SUICIDAL IDEATION (SI)

Refers to thinking about or planning suicide. Thoughts can range from creating a detailed plan to having a fleeting consideration. It does not include the final act of suicide.


Some warning signs that you or a loved one are thinking about or contemplating suicide include:

- Isolating yourself from your loved ones
- Feeling hopeless or trapped
- Talking about death or suicide
- Giving away possessions
- An increase in substance use or misuse

INCREASED RISK FACTORS FOR SUICIDE

<i>Compared to the general population, individuals with a history of...</i>	<i>Have a suicide risk that is...</i>
Prior Suicide Attempt	Almost 40 times greater than the expected rate
Major Depression	20 times greater than the expected rate
Mixed Drug Abuse	19 times greater than the expected rate
Bipolar Disorder	15 times greater than the expected rate
Schizophrenia	Almost 9 times greater than the expected rate
Alcohol Abuse	Almost 6 times greater than the expected rate

SUICIDE, MENTAL HEALTH, AND STIGMA

- About **90%** of people who die by suicide have some type of mental health and/or substance use problem.
 - Suicide and mental health problems often have stigma. This can result in:
 - Secrecy about the death and issues prior to the death
 - Isolation and guilt for survivors of suicide loss
 - Blame for the death
 - Lack of support from others
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Substance Use Disorder

"A substance use disorder (SUD) is a mental disorder that affects a person's brain and behavior, leading to a person's inability to control their use of substances such as legal or illegal drugs, alcohol, or medications. Symptoms can range from moderate to severe, with addiction being the most severe form of SUDs." - National Institute of Mental Health (NIH)



Substance Use Disorder on the Brain

**The brain is not fully developed
until AGE 25!**

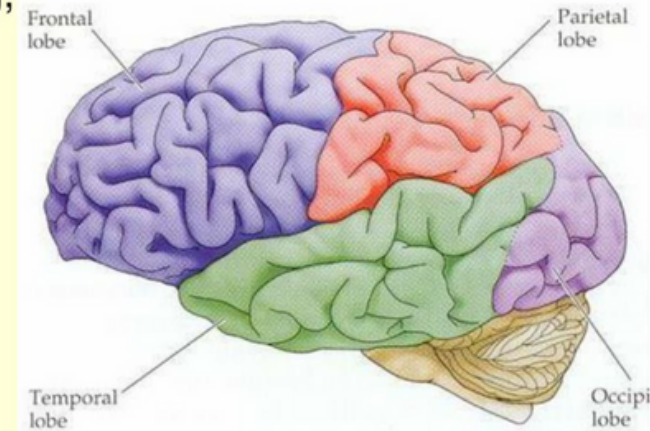
Substances can change the brains
functioning!

Biggest impacts:


- Interference with neurotransmitters
- Damage Connections within the Brain
- Impact Prefrontal Cortex which is responsible for decision making.

Adolescent brain development takes place
in the frontal lobes

- Reasoning,
- Planning,
- Emotions,
- Problem-solving



WHAT IS POSTVENTION

- A **planned response** after a suicide to help with healing and reduce risk of further suicide incidents.
 - Knowing someone who has died by suicide increases our risk for suicide.
 - How a suicide is handled affects the risk factors for others, especially teens.
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Best Practices



CONTAGION

TYPES: CLUSTER, COPY CAT, SUICIDE PACT


- **Exposure to a suicide may influence others** (who may already be at risk) to take their life or attempt suicide.
- **Having known someone who dies by suicide** is one of the most significant risk factors for suicide.
- **Teens and young adults** are more at risk for contagion.
- **Sensational media reports** and **inappropriate funeral services** may contribute to contagion.

SPEAKING ABOUT THE DEATH IN PUBLIC

Balance **between** two important principles:

- Respect for family's right to privacy
- When a family is able to be open about a death being a suicide, this may help schools and/or communities **offer resources** to reduce risk.
- Responding to suicide as a public health issue
- Being open about the suicide can also **guide funeral activities**, which can have a healing effect and help reduce risk.

GLORIFYING THE INDIVIDUAL OR THE SUICIDE MAY INCREASE RISK BY:

- Flying the flag at half-staff
 - Special plaques or permanent memorials
 - Dedications
 - Exclusive focus on the deceased's positive qualities without also looking at what could have helped with their mental health/complex problems
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SURVIVORS OF SUICIDE LOSS

The term survivor is used for family, friends and students who have lost a loved one to suicide



Resources:

#BeThe1To

SUICIDE RESOURCES 2021



You can #BeThe1To help someone:

- ✓ Ask if they're suicidal
- ✓ Keep them safe
- ✓ Help connect to resources

Information and resources for those who are struggling, have survived an attempt or have lost someone:

- Visit the American Foundation for Suicide Prevention (AFSP) at <https://afsp.org/get-help>
- AFSP **Healing Conversations** in CT: Call Ann Dagle at 860-625-5280
- Charter Oak Family Center - **Survivors of Suicide Attempts (SOSA) Group** (online): Contact Steve Machattie at (860) 268-4953 or email at smachattie47@gmail.com

STRUGGLING?

Call the National Suicide Prevention Lifeline:
800-273-8255 (English)
(option 1 for vets)
888-628-9454 (Spanish)

Text the Crisis Text Line:
741741

CT Mobile Crisis:
Dial 2-1-1, select option 1

ACTION Line (Adults 18+):
1-800-HOPE-135 or 211

Law Enforcement Support:
1-800-COPLINE



Suicide Loss support groups in Southwestern CT. Call for details!

- **Darien:** Mondays at 6pm, Center for Hope. Call Ashleigh 203-599-3782.
- **Greenwich:** 1st Mondays, 7:30pm, 2nd Congregational Church. Call 203-434-0369.
- **Trumbull:** 2nd Wednesdays, 7-8:30pm, Congregational Church. Call Mary J. Sherlach Counseling Center 203-452-5193
- **Westport:** 3rd Mondays, 7:30-9:30pm, Christ and Holy Trinity Church, Mackenzie House. Call Diane 720-838-3880.

For guidance on communications,
memorialization & programs after a suicide:

Visit CT's Suicide Advisory Board website,
<https://www.preventsuicide.org/resources>

VISIT [THEHUBCT.ORG](https://www.thehubct.org) FOR MORE INFORMATION!

SAFE MESSAGING

Promote

- Information on where/how to get help **NSPL: 1-800-273-TALK (8255) or in CT 2-1-1**
- **9-8-8 - Starting July 16th**
- #741741
- Warning signs
- Early help for mental health and substance use problems
- Local efforts to prevent suicide

Avoid

- Detailed descriptions of a suicide incident
- Making the person a saint or a celebrity
- Oversimplifying causes
- Overstating the frequency of suicide
- Using terms like failed/successful/committed



POSTVENTION
becomes
PREVENTION



COMMUNITY RESOURCES TO PROMOTE HEALING

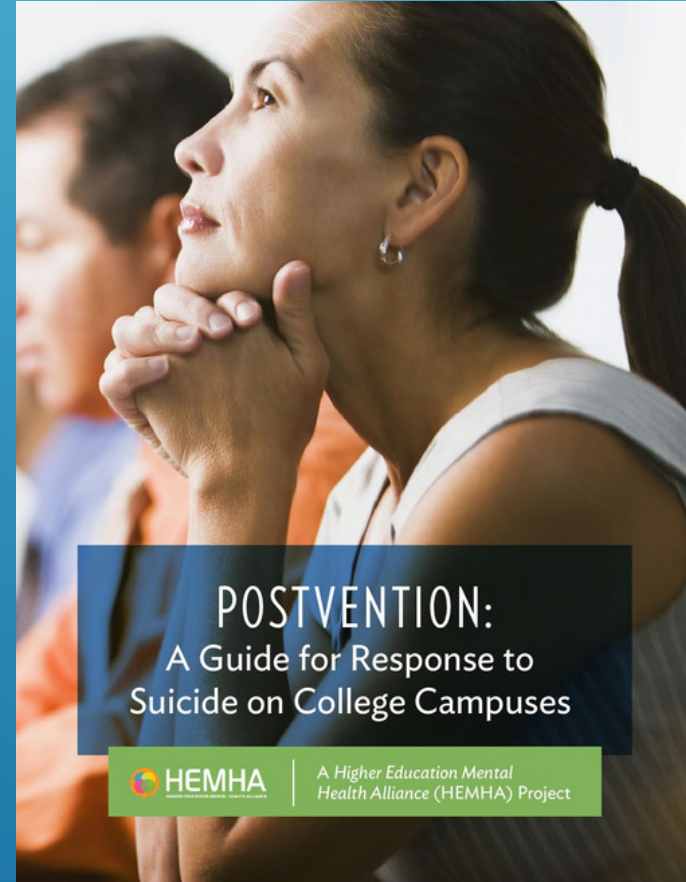
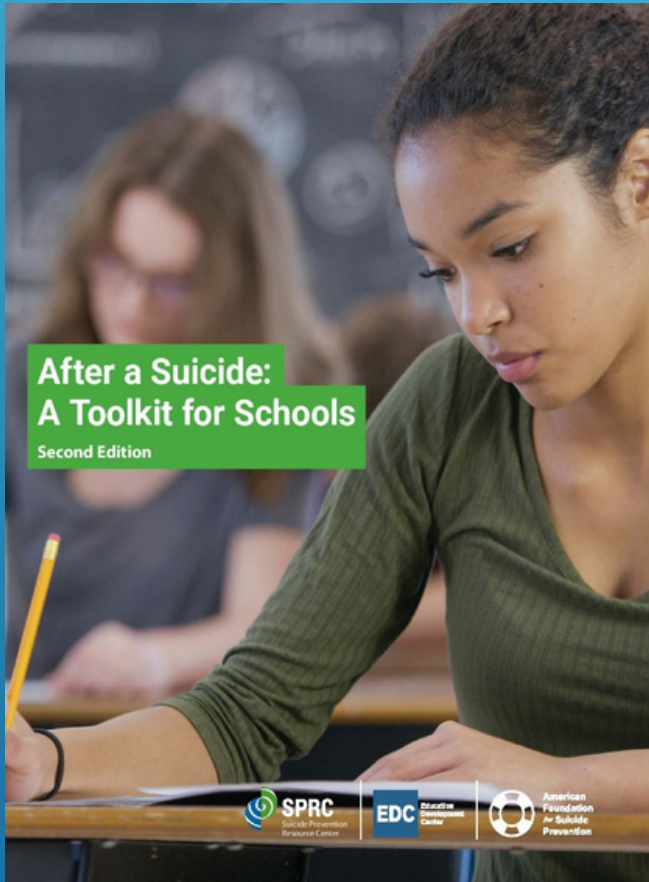
- Mental health counselors
- Youth drop in-centers
- Day care centers
- Spiritual advisors/healers
- Health and wellness programs
- Community leaders
- Hospice programs
- Faith-based programs
- Businesses
- Emergency Response Teams
- Gizmo Read Along



Even though best practices states you should not offer suicide prevention trainings for 6 months, you can offer resiliency and grief support trainings

What YOU Can Do...

- Subscribe to relevant websites and newsletters
 - EX: The Hub, CT Suicide Advisory Board, 1 Word/1Voice/1 Life, American Foundation for Suicide Prevention (AFSP)
- 6 months following a loss:
 - Offer suicide prevention trainings to the community
 - Question, Persuade, Refer (QPR)
 - Applied Suicide Intervention Skills Training (ASIST)
 - Mental Health First Aid (MHFA)
- Knowing relevant call and text lines
 - National Suicide Lifeline: **800-273-8255**
 - National Crisis Text Line: **741741**
 - Kids in Crisis (0-18 years old): **203-661-1911**
 - Action Line: **1-888-774-2900**
 - CT Mobile Crisis - 211 (option 1)



Bibliography:

After a Suicide A Toolkit:

<http://www.sprc.org/sites/default/files/resource-program/AfteraSuicideToolkitforSchools.pdf>

Model School District Policy on Suicide Prevention: Model Language, Commentary and Resources (2nd edition)

[https://afsp.org/wp-](https://afsp.org/wp-content/uploads/2019/10/13820_AFSP_Model_School_Policy_Booklet_m1_v3.pdf)

[content/uploads/2019/10/13820_AFSP_Model_School_Policy_Booklet_m1_v3.pdf](https://afsp.org/wp-content/uploads/2019/10/13820_AFSP_Model_School_Policy_Booklet_m1_v3.pdf)

Prevent Suicide CT

<https://www.preventsuicidect.org/>

Framework for Successful Messaging

<http://suicidepreventionmessaging.org/>

Recommendations for Reporting on Suicide <http://reportingonsuicide.org/wp-content/themes/ros2015/assets/images/Recommendations-eng.pdf>

American Foundation for Suicide Prevention: More Than Sad

<https://afsp.org/our-work/education/more-than-sad/>

Suicide Prevention Resource Center

<http://www.sprc.org/>

American Foundation for Suicide Prevention

<https://afsp.org/>

Reporting on Suicide: Best Practices and Recommendations for Reporting on Suicide

<http://reportingonsuicide.org/wp-content/themes/ros2015/assets/images/Recommendations-eng.pdf>

SPRC resources

<https://www.sprc.org/resources-programs?>

[type=All&populations=All&settings=114&problem=All&planning=All&strategies=All&state=All](https://www.sprc.org/resources-programs?type=All&populations=All&settings=114&problem=All&planning=All&strategies=All&state=All)

Resources:

FREE ONLINE CONNECTICUT MENTAL HEALTH RESOURCES FOR THE CORONAVIRUS EPIDEMIC

FEELING STRESSED OR DEPRESSED?
YOU ARE NOT ALONE!

State and local support groups, recovery meetings, and wellness activities are ONLINE during the pandemic! (Audio & video options) Check out the FREE options below & visit TheHubCT.org/calendar for more!

NEED TO CONNECT?

- Talk to a peer at Soundview Warmline, 800-921-0359, new hours: 9am-9pm, 7 days
- Join local NAMI, CCAR, CARES, SMART & other support groups online or by phone, or join a daily check-in meeting to connect, or enjoy a free wellness activity such as phone meditation. Details at TheHubCT.org/calendar

SUPPORTS FOR YOUNG PEOPLE?

- CT's Young Adult Warmline:
- Call 1-855-6-HOPENOW daily from 12pm-9pm. (Other hours: call Patricia at 860-549-2435)
 - EN ESPAÑOL: Text Luz at 860-549-2435

- NAMI Young Adult Connection
- Community check-in, daily from 3:30-4:30pm. Info: vlepoutre@namict.org

SPECIALIZED SUPPORT GROUPS:

- SMART Recovery videoconferences: Ages 18+, Tuesdays at 6; Teens, Wednesdays at 4; Family & Friends, Thursdays at 6:30; Join at: meetings.ringcentral.com/j/6651939516
- CT Hearing Voices Network: Info: Skye at scollins@advocacyunlimited.org
- Teen and Young Adult Support Groups
CT Mental Health Social Group (13-29 y/o)
CT Teen Social (13-18 y/o)
CT Young Adult Social (18-29 y/o)
Email Ella (emoore@positivedirections.org)

IN A CRISIS? 24/7 HELP:

- Kids in Crisis: 203-327-KIDS
- Text the Crisis Text Line at 741741
- Disaster Distress Helpline: 800-985-5990
- National Suicide LifeLine: 800-273-TALK
 - EN ESPAÑOL: 888-628-9454
- The Trevor Project (LGBTQ support): 866-488-7386
- Dial 2-1-1, select option 1 for CT's mobile crisis

Considering treatment options? Free online screenings and resource guides at www.thehubct.org/treatment



Save these numbers in your
and your family's phones!

MENTAL HEALTH OR SUICIDE CRISIS?

FREE HOTLINES ARE AVAILABLE 24/7!

National:

- Crisis Text Line: Text 741741
- National Suicide Lifeline: Call 800-273-8255 (Starting July 2022, just dial 988)

LGBTQ:

- The Trevor Project: Text 678678
- Trans Lifeline: Call 877-565-8860

CT Resources:

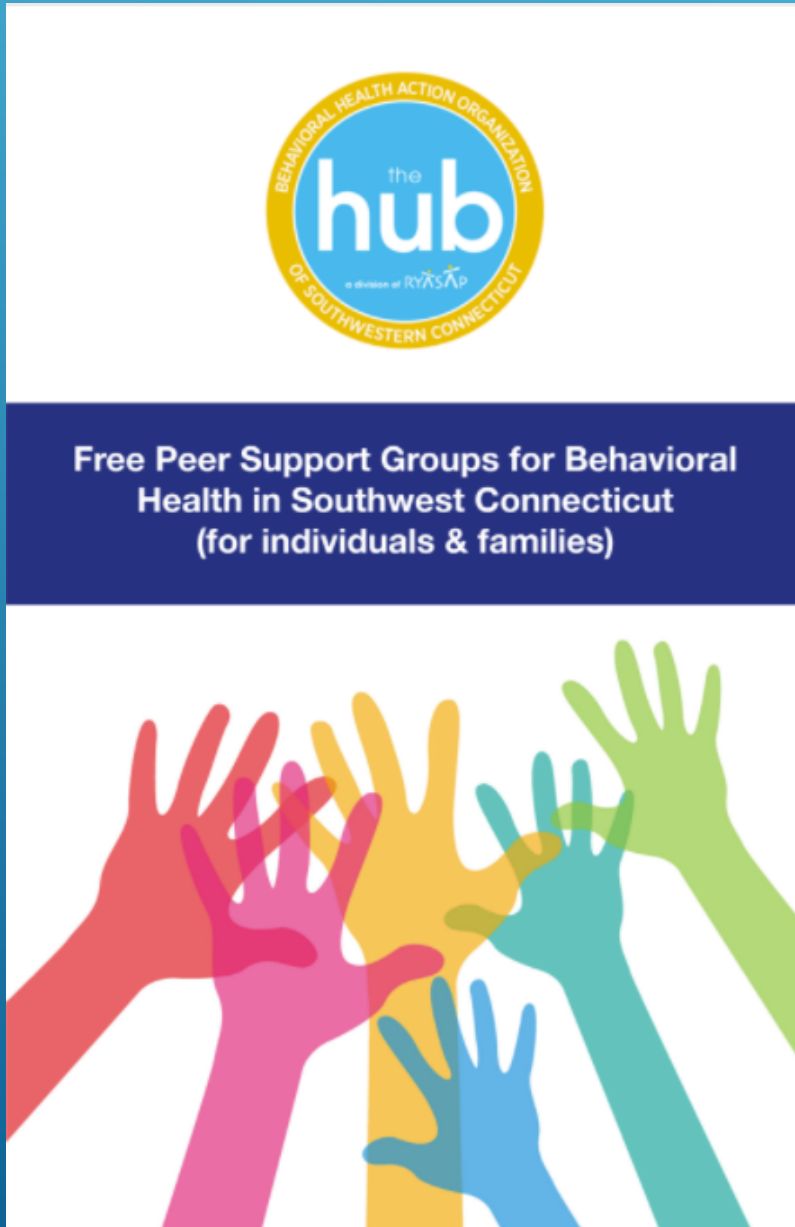
- Kids in Crisis (ages 0-18): 203-661-1911
- CT's Action Line (mobile crisis): 2-1-1, option 1
- Domestic Violence SafeConnect: 888-774-2900
- JoinRiseBe Young Adult Warmline: Talk to a young adult peer specialist 12pm-9pm daily: 800-6-HOPENOW

Local:

- First Responders: 911 (ask for a CIT officer)



Resources:



Thank You!

