



SUICIDE PREVENTION

A Mental Health Guide

**Silence
the Shame**

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OVERVIEW

Suicide is a major public health concern. In 2019, suicide was the 10th leading cause of death overall in the United States, claiming the lives of over 47,500 people. Suicide is complicated and tragic, but it is often preventable. Knowing the warning signs for suicide and how to get help can help save lives.

Suicide is when people harm themselves with the goal of ending their life, and they die as a result.

A suicide attempt is when people harm themselves with the goal of ending their life, but they do not die.

Avoid using terms such as “committing suicide,” “successful suicide,” or “failed suicide” when referring to suicide and suicide attempts, as these terms often carry negative meanings.

WARNING SIGNS

Warning signs that someone may be at immediate risk for attempting suicide include:

- Talking about wanting to die or wanting to kill themselves
- Talking about feeling empty or hopeless or having no reason to live
- Talking about feeling trapped or feeling that there are no solutions
- Feeling unbearable emotional or physical pain
- Talking about being a burden to others
- Withdrawing from family and friends
- Giving away important possessions
- Saying goodbye to friends and family
- Putting affairs in order, such as making a will
- Taking great risks that could lead to death, such as driving extremely fast
- Talking or thinking about death often

Other serious warning signs that someone may be at risk for attempting suicide include:

- Displaying extreme mood swings, suddenly changing from very sad to very calm or happy
- Making a plan or looking for ways to kill themselves, such as searching for lethal methods online, stockpiling pills, or buying a gun
- Talking about feeling great guilt or shame
- Using alcohol or drugs more often
- Acting anxious or agitated
- Changing eating or sleeping habits
- Showing rage or talking about seeking revenge

It is important to note that suicide is not a normal response to stress. **Suicidal thoughts or actions are a sign of extreme distress and should not be ignored.** If these warning signs apply to you or someone you know, get help as soon as possible, particularly if the behavior is new or has increased recently.



RISK FACTORS

Suicide does not discriminate. People of all genders, ages, and ethnicities can be at risk. Suicidal behavior is complex, and there is no single cause. The main risk factors for suicide are:

- Depression, other mental disorders, or substance use disorder
- Chronic pain
- A history of suicide attempts
- Family history of a mental disorder or substance use
- Family history of suicide
- Exposure to family violence, including physical or sexual abuse
- Presence of guns or other firearms in the home
- Having recently been released from prison or jail
- Exposure, either directly or indirectly, to others' suicidal behavior, such as that of family members, peers, or celebrities

Most people who have risk factors will not attempt suicide, and it is difficult to tell who will act on suicidal thoughts. Although risk factors for suicide are important to keep in mind, someone who is showing warning signs of suicide may be at higher risk for danger and need immediate attention. Stressful life events (such as the loss of a loved one, legal troubles, or financial difficulties) and interpersonal stressors (such as shame, harassment, bullying, discrimination, or relationship troubles) may contribute to suicide risk, especially when they occur along with suicide risk factors. Family and friends are often the first to recognize the warning signs of suicide, and they can take the first step toward helping a loved one find mental health treatment.



TREATMENT

Effective, evidence-based interventions are available to help people who are at risk for suicide.

Brief Interventions

- **Safety Planning:** Personalized safety planning has been shown to help reduce suicidal thoughts and actions. Patients work with a caregiver to develop a plan that describes ways to limit access to lethal means such as firearms, pills, or poisons. The plan also lists coping strategies and people and resources that can help in a crisis.
- **Follow-up phone calls:** Research has shown that when at-risk patients receive further screening, a Safety Plan intervention, and a series of supportive phone calls, their risk of suicide goes down.

Psychotherapies

Multiple types of psychosocial interventions have been found to help individuals who have attempted suicide (see below). These types of interventions may prevent someone from making another attempt.

- **Cognitive Behavioral Therapy (CBT)** can help people learn new ways of dealing with stressful experiences. CBT helps individuals recognize their thought patterns and consider alternative actions when thoughts of suicide arise.
- **Dialectical Behavior Therapy (DBT)** has been shown to reduce suicidal behavior in adolescents. DBT has also been shown to reduce the rate of suicide in adults with borderline personality disorder, a mental illness characterized by an ongoing pattern of varying moods, self-image, and behavior that often results in impulsive actions and problems in relationships. A therapist trained in DBT can help a person recognize when their feelings or actions are disruptive or unhealthy and teach the person skills that can help them cope more effectively with upsetting situations.

Medication

Some individuals at risk for suicide might benefit from medication. Health care providers and patients can work together to find the best medication or medication combination, as well as the right dose. Because many individuals at risk for suicide often have a mental illness or substance use problems, individuals might benefit from medication along with psychosocial intervention.

Collaborative Care

Collaborative Care is a team-based approach to mental health care. A behavioral health care manager will work with the person, their primary health care provider, and mental health specialists to develop a treatment plan. Collaborative care has been shown to be an effective way to treat depression and reduce suicidal thoughts.

BE THE ONE TO HELP SOMEONE WITH EMOTIONAL PAIN

1. **ASK:** “Are you thinking about killing yourself?” It’s not an easy question, but studies show that asking at-risk individuals if they are suicidal does not increase suicides or suicidal thoughts.
2. **KEEP THEM SAFE:** Reducing a suicidal person’s access to highly lethal items or places is an important part of suicide prevention. While this is not always easy, asking if the at-risk person has a plan and removing or disabling the lethal means can make a difference.
3. **BE THERE:** Listen carefully and learn what the individual is thinking and feeling. Research suggests acknowledging and talking about suicide may reduce rather than increase suicidal thoughts.
4. **HELP THEM CONNECT:** Save the National Suicide Prevention Lifeline’s (1-800-273-TALK (8255)) and the Crisis Text Line’s number (741741) in your phone, so it’s there when you need it. You can also help make a connection with a trusted individual like a family member, friend, spiritual advisor, or mental health professional.
5. **STAY CONNECTED:** Staying in touch after a crisis or after being discharged from care can make a difference. Studies have shown the number of suicide deaths goes down when someone follows up with the at-risk person.



RESOURCES

01 Crisis Text Line

Text SILENCE to 707070 and you'll be connected to a trained Crisis Counselor. Crisis Text Line provides free, text-based support 24/7.

02 National Suicide Prevention Lifeline

Call 1-800-273-8255. The National Suicide Prevention Lifeline is a national network of local crisis centers that provide free and confidential emotional support to people in suicidal crisis or emotional distress 24 hours a day, 7 days a week.

03 SAMHSA's Treatment Locator

Call 1-800-662-4357 to access information about local mental health services.

04 Postpartum Support International

PSI works to increase awareness among public and professional communities about the emotional changes that women experience during pregnancy and postpartum. Call 1-800-944-4PPD (4773).

05 The Trevor Project

Leading national organization providing crisis intervention and suicide prevention services to lesbian, gay, bisexual, transgender, queer & questioning youth.

Trevor Lifeline 1-866-488-7386: TrevorText START to 678-678: TrevorChat

06 Anxiety & Depression Association of America

Find more resources at <https://adaa.org/find-help/support/community-resources>

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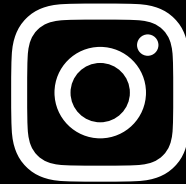
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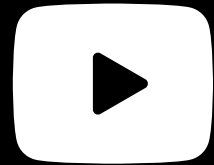
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PODCAST



If you need to speak to someone,
text "SILENCE" to 741741