

What to do?



Ask directly

- “Are you thinking about suicide?”

Do not be reactive

- Don’t act shocked, lecture on the value of life or say that suicide is wrong

Be nonjudgmental

- It may be difficult to understand but reassure them you are not there to judge

Do not minimize the feelings involved

- Don’t make them feel like they have to justify their suicidal feelings

Be empathetic

Do not argue

- Do not argue with someone who is suicidal
- Avoid saying things like: “You have so much to live for,” or “Suicide will hurt your family”

Talk about resources

- For support, counseling or treatment (e.g.: family, friends, community agencies, crisis centers)

Resources



Helplines provide 24/7 support

Kelowna Crisis Line
1-888-353-2273 (CARE)

Or

Crisis Centre
1-800-784-2433 (SUICIDE)

There is hope

Information websites

**Canadian Association for
Suicide Prevention**

www.suicideprevention.ca

**Okanagan Suicide
Awareness Society**
provides a large list of resources

www.suicideawareness.ca
Tel: (250) 300-7990



Breaking the Silence – Promoting Hope

Suicide Awareness

What You Need to Know

A Guide for the General Public

And Resources



Warning signs

“IS PATH WARM”

I – Ideation (suicidal thoughts)

S – Substance Abuse

P – Purposelessness

A – Anxiety

T – Trapped

H – Hopelessness/
Helplessness

W – Withdrawal

A – Anger

R – Recklessness

M – Mood changes

Statistics about suicide

- 3,890 deaths in Canada at a rate of 11.5 per 100,000 people (2009)
- Hospitalization for suicide attempt is 6-7x the rate of death by suicide
- 530 deaths by suicide in BC alone (2010)
- In 2011, 15 people died by suicide in Kelowna and 5 in West Kelowna

Majority of people who have died by suicide, attempted suicide or are contemplating suicide **do not** seek help.

Barrier to help seeking behaviour:

Stigma around suicide

- Attribution of judgmental stereotypes that lead to prejudice and discrimination toward the suicidal individual
- Social exclusion or ridicule

“There is so much silence and stigma surrounding suicide. Our silence allows this public health problem to continue and its associated needs to go unnoticed.”

Stigma can contribute to reasons for concealing suicidal ideation:

- Fear of being judged
- Feeling inadequate
- Fear of being perceived as weak
- Fear of being rejected for considering suicide

Why do people die by suicide?

- No single cause
- Complex (number of factors/circumstances)

Who is at risk?

Some contributing factors or circumstances:

- Addictions/substance abuse
- Major life changes
- Childhood trauma or other traumas
- Experience of a major loss (e.g., death of loved one, unemployment, social, relational etc.)
- Experience of serious physical illness or mental health disorder, etc.
- Lack of social support/isolation
- Family history of suicide
- Previous suicide attempt
- Barriers to accessing health care, especially mental health and substance abuse treatment

Why do people experience suicidal thoughts?

- Overwhelming emotional/psychological pain
- Unbearable feelings of despair, helplessness, hopelessness, desperation
- Belief that the pain will never end/ life is unbearable
- See no other options/ unable to cope

The nature of the contributing factors/circumstances isn't necessarily as important as the fact that the individual experiences them as **intolerable**.

There is hope

Myths about suicide

Myth: Talking about suicide may give someone the idea.

FACT: Talking can help relieve some of the pressure and it shows you care and that you are taking the person seriously. Asking someone if they are thinking of suicide is the only way to know whether suicide is a concern.

Myth: A suicidal person clearly wants to die.

FACT: Most people who attempt suicide want to live. They are experiencing overwhelming emotional pain and are crying out for help. If they receive the help they are asking for, they may never attempt suicide again.

Myth: A person who talks about or attempts suicide is only looking for attention.

FACT: A person who talks about or attempts suicide is not trying to get attention, but trying desperately to communicate. It is important to take all threats seriously.

Myth: Anyone who tries to kill him/herself must be 'crazy.'

FACT: The majority of suicidal individuals are not clinically diagnosed with psychosis. They are experiencing overwhelming psychological pain.