

Collaborative Approaches in Communicating About Suicide

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Objectives:

- a. Identify collaborative approaches to effectively engage individuals experiencing suicidal thoughts.
- b. Demonstrate effective conversational strategies to increase the likelihood of positive outcomes with individuals experiencing suicidal ideation.
- c. Discuss self-care approaches to address practitioner stress when addressing suicide ideation.

Language Matters

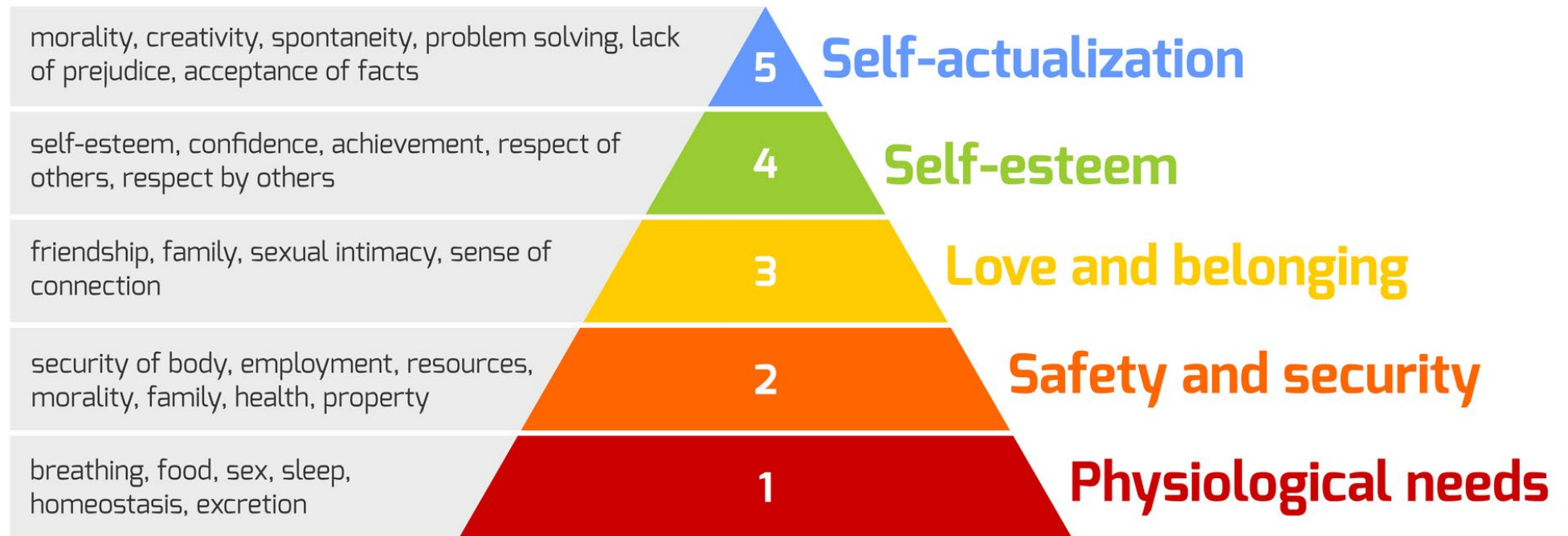
What we say... How we say it...

- **Died of/by Suicide** vs. Committed Suicide
- **Suicide Death/Attempt** vs. Successful/Unsuccessful
- **Describe Behavior** vs. Manipulative/Attention Seeking
- **Describe Behavior** vs. Suicide Gesture/Cry for Help
- **Diagnosed with** vs. They're a Borderline/Schizophrenic
- **Working with** vs. Dealing with Suicidal Patients

Source: Ursula Whiteside, Zero Suicide Faculty & Founder of Now Matters Now <http://nowmattersnow.org>



Maslow's Hierarchy of Need



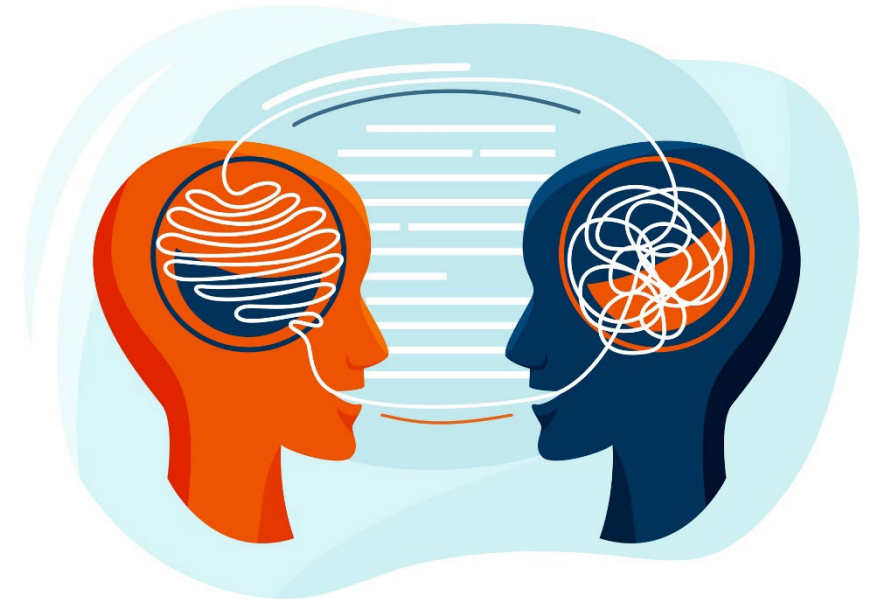
What is Stress?

- A state of physical and/or psychological arousal
- Often brought about by a perceived threat or challenge
- May be expressed differently by different cultures
- Most people react to a perceived threat or challenge in the environment with stress - a state of physical and/or psychological arousal

STRESS

Communicating With Someone Under Stress

- The more anxious or stressed a person is.....
The less they “Hear” the words you are saying
- Focus on Non-Verbal and Para-Verbal communication
- Aim for “Congruence” in your communication



Effective Listening Strategies for De-escalation

- Your objective is to understand reflect what you hear and see
- Give your full attention
- Avoid being judgmental
- Focus on feelings
- Use silence

FOUR COMPONENTS OF ACTIVE LISTENING

RESTATE/ PARAPHRASE restate what the other person is saying in your own words

REFLECT State the feelings that you hear behind the words being said.

CLARIFY ask questions to help better understand what is being said

SUMMMARIZE put all the information together (both facts and feelings) and help the speaker see what they have shared with you.

Other Considerations

Persons with cognitive impairments (some forms of developmental disabilities and traumatic brain injury), mental health issues, or learning disabilities

May not recognize your non-verbal behavior

May be taking substances or medications that interfere with their ability to understand clearly what is expected of them

May not be able to tolerate stress or control their reactions to it

Often experience severe loss of control over much of their lives

May think they don't fit in and unsure how to do so

Trauma Issues

Supportive communication conveys:

- Empathy
- Concern
- Respect
- Confidence

Non-verbal communication

Non-verbal messages:

- Posture
- Facial expressions
- Body language

Every culture has meanings for different body movements

Shared Perspective

REMEMBER	TASK
<p>Understand that suicidal thinking “makes sense” based the person’s history, vulnerability and mental pain.</p>	<p>Listen thoroughly to Understand the person’s thinking and the individual’s goals.</p> <p>Validate how strong the feelings are and wish to be free of pain.</p> <p>Share what you know about suicidal state of mind – that it becomes focused on dying</p>

Shared Perspective

REMEMBER	TASK
<p>Most individuals thinking about suicide are agonizing due to mental pain or anguish and frequently a loss of self-respect, which makes them unable to visualize anything beyond their death or being able to feel better.</p>	<p>Help the person to see that their thinking is in a state of being “stuck” so they understand that their mind is looking for a way to escape the stress and pain.</p>

Shared Perspective

REMEMBER	TASK
<p>Most individuals thinking about suicide are agonizing due to mental pain or anguish and frequently a loss of self-respect, which makes them unable to visualize anything beyond their death or being able to feel better.</p>	<p>Help the person to see that their thinking is in a state of being “stuck” so they understand that their mind is looking for a way to escape the stress and pain.</p>

Shared Perspective

REMEMBER	TASK
View each person with a unique situation based on their own culture (family, community, etc.	Create a safe space where the person feels safe to share about their suicidal thoughts, behaviors, and plans.

Safety Planning

Sample Safety Plan

Step 1: Warning signs (thoughts, images, mood, situation, behavior) that a crisis may be developing:

1. _____
2. _____
3. _____

Step 2: Internal coping strategies – Things I can do to take my mind off my problems without contacting another person (relaxation technique, physical activity):

1. _____
2. _____
3. _____

Step 3: People and social settings that provide distraction:

1. Name _____ Phone _____
2. Name _____ Phone _____
3. Place _____ 4. Place _____

Step 4: People whom I can ask for help:

1. Name _____ Phone _____
2. Name _____ Phone _____
3. Name _____ Phone _____

Step 5: Professionals or agencies I can contact during a crisis:

1. Clinician Name _____ Phone _____
Clinician Pager or Emergency Contact # _____
2. Clinician Name _____ Phone _____
Clinician Pager or Emergency Contact # _____
3. Local Urgent Care Services _____
Urgent Care Services Address _____
Urgent Care Services Phone _____
4. Suicide Prevention Lifeline Phone: 1-800-273-TALK (8255)

Step 6: Making the environment safe:

1. _____
2. _____

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The one thing that is most important to me and worth living for is:

Self-Care Wheel



YOUR SELF CARE ROUTINE

Self
care
comes
first

Be
yourself

Take
care

Take care
of
yourself

Love
yourself

Make
yourself
a priority

Self Care is
Important



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