



Suicide Warning Signs

Sometimes even health care professionals have difficulty determining how close a person may be to attempting suicide. As a friend or family member, you can't know for certain either. If you sense there is a problem, ask the person direct questions and point out behavior patterns that concern you. Remind the person that you care about her and are concerned. Talking about suicide with someone will not plant the idea in her head. If necessary, suggest that she make an appointment to see her doctor and offer to go with her if you sense she would have difficulty doing it on her own. If you believe that immediate self-harm is possible, take the person to a doctor or hospital emergency room immediately.

- **Feelings of despair and hopelessness**—Oftentimes, people with depression talk with those closest to them about extreme feelings of hopelessness, despair and self-doubt. The more extreme these feelings grow, and the more often they are described as "unbearable," the more likely it is that the idea of suicide may enter the person's mind.
- **Taking care of business**—When a person is "winding up his affairs" and making preparations for the family's welfare after he is gone, it is a good chance he is considering self-harm or suicide.
- **Rehearsing suicide**—Rehearsing suicide, or seriously discussing specific suicide methods, are also

indications of a commitment to follow through. Even if the person's suicidal intention seems to come and go, such preparation makes it that much easier for the individual to give way to a momentary impulse.

- **Drug or alcohol abuse**—A person with worsening depression may abuse drugs or alcohol. These substances can worsen symptoms of depression or mania, decrease the effectiveness of medication, enhance impulsive behavior and severely cloud judgment.
- **Beginning to feel better**—It may sound strange, but a person with depression may be most likely to attempt suicide just when he seems to have passed an episode's low point and be on the way to recovery. Experts believe there is an association between early recovery and increased likelihood of suicide. As depression begins to lift, a person's energy and planning capabilities may return before the suicidal thoughts disappear, enhancing the chances of an attempt. Studies show that the period 6 to 12 months after hospitalization is when patients are most likely to consider or reconsider suicide.

How to help someone

Among the many things you can do to help a depressed person who may be considering suicide, most involve simply talking and listening. Do not take on the role of therapist. Oftentimes people just want someone to listen.

Though this may be difficult, here are some approaches that have worked for others:

- **Express empathy and concern.** Severe depression is usually accompanied by a self-absorbed, uncommunicative, withdrawn state of mind. When you try to help, you may be met by an individual's reluctance to discuss what she is feeling. At such times, it is important to acknowledge the reality of the pain and hopelessness she is experiencing. Resist the urge to function as a therapist, which can ultimately create more feelings of rejection for the person, who doesn't want to be "told what to do." Remain a supportive friend and encourage continued treatment.
- **Describe specific behaviors and events that trouble you.** If you can explain particular ways a person's behavior has changed, this may help to get communication started. Try to help him overcome feelings of guilt. Compounding the lack of interest in communication may be guilt or shame over having suicidal thoughts. If there has already been a suicide attempt, guilt over both the attempt and its failure can make the problem worse. It is important to reassure the individual that there is nothing shameful about what he is thinking and feeling. Keep stressing that thoughts of hopelessness, guilt and suicide are all symptoms of a treatable medical condition and reinforce the person's good work in keeping with his treatment plan.
- **Work with professionals.** Never promise confidentiality if you believe someone is very close to suicide. Keep the person's doctor or therapist informed of any thoughts of suicide. If

possible it is best to encourage the person to discuss it with doctors themselves, but you should be ready to confirm that those discussions have taken place. This may involve making an appointment to visit the doctor together or calling the doctor on your own. Be aware that a doctor will not be able to discuss the person's condition with you. You should only call to inform the doctor of your concern.

Whenever possible you should get permission from the depressed person to call her doctor if you feel there is a problem. Otherwise it could be seen as "butting in" and may worsen her symptoms or cause added stress. If you believe there is a serious risk of immediate self-harm, call her doctor. You can work out any feelings of anger the person has toward you later.

- **Stress that the person's life is important to you and to others.** Many people find it awkward to put into words how another person's life is important for their own wellbeing. Emphasize in specific terms the ways in which the person's suicide would be devastating to you and others. Share personal stories or pictures of past events.
- **Be prepared for anger.** The person may express anger and feel betrayal by your attempt to prevent his suicide or get him into treatment. Be strong. Realize that these reactions are caused by the illness and should pass once the person has received the proper treatment.
- **Always be supportive.** A person who has thought about or attempted suicide will most likely have feelings of guilt and shame. Be supportive and assure the person that her actions were caused by an illness that can be treated. Offer

your continued support to help her recover.

- **Take care of yourself.** It is not uncommon for friends and family members to experience stress or symptoms of depression when dealing with a suicidal person. You can only help the person through her own treatment with encouragement and support. You cannot get better for her. Do not focus all of your energy on the one person; ask friends and family to join you in providing support and keep to your normal routine as much as possible. Pay attention to your own feelings and seek help if you need it.

Responding to an emergency situation

If someone is threatening to commit suicide, if someone has let you know he is close to acting on a suicidal impulse, or if you strongly believe he is close to a suicidal act, these steps can help you manage the crisis.

- **Take the person seriously.** Stay calm, but don't under-react.
- **Involve other people.** Don't try to handle the crisis alone or jeopardize your own health or safety. Call 911, if necessary. Contact the person's doctor, the police, a crisis intervention team or others who are trained to help.
- **Express concern.** Give concrete examples of what leads you to believe the person is close to suicide.

- **Listen attentively.** Maintain eye contact. Use body language such as moving close to the person or holding his hand, if appropriate.
- **Ask direct questions.** Find out if the person has a specific plan for suicide. Determine, if you can, what method of suicide is being considered.
- **Acknowledge the person's feelings.** Be understanding, not judgmental or argumentative. Do not relieve the person of responsibility for her actions.
- **Offer reassurance.** Stress that suicide is a permanent solution to a temporary problem, reminding the person that there is help and things will get better.
- **Don't promise confidentiality.** You may need to speak to the person's doctor in order to protect the person from herself.
- **Make sure guns and medications are not available.**

If possible, don't leave the person alone until you are sure she is in the hands of competent professionals. If you have to leave, make sure another friend or family member can stay with the person until she can receive help. © 2003 Depression and Bipolar Support Alliance. Used with permission.

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