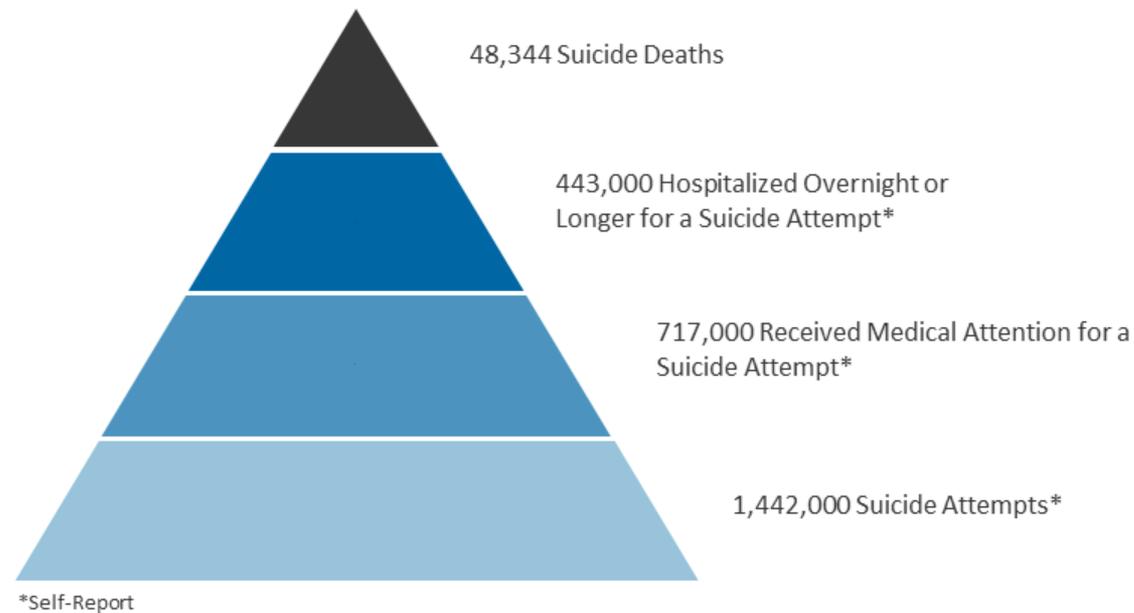


# Just A.S.K.

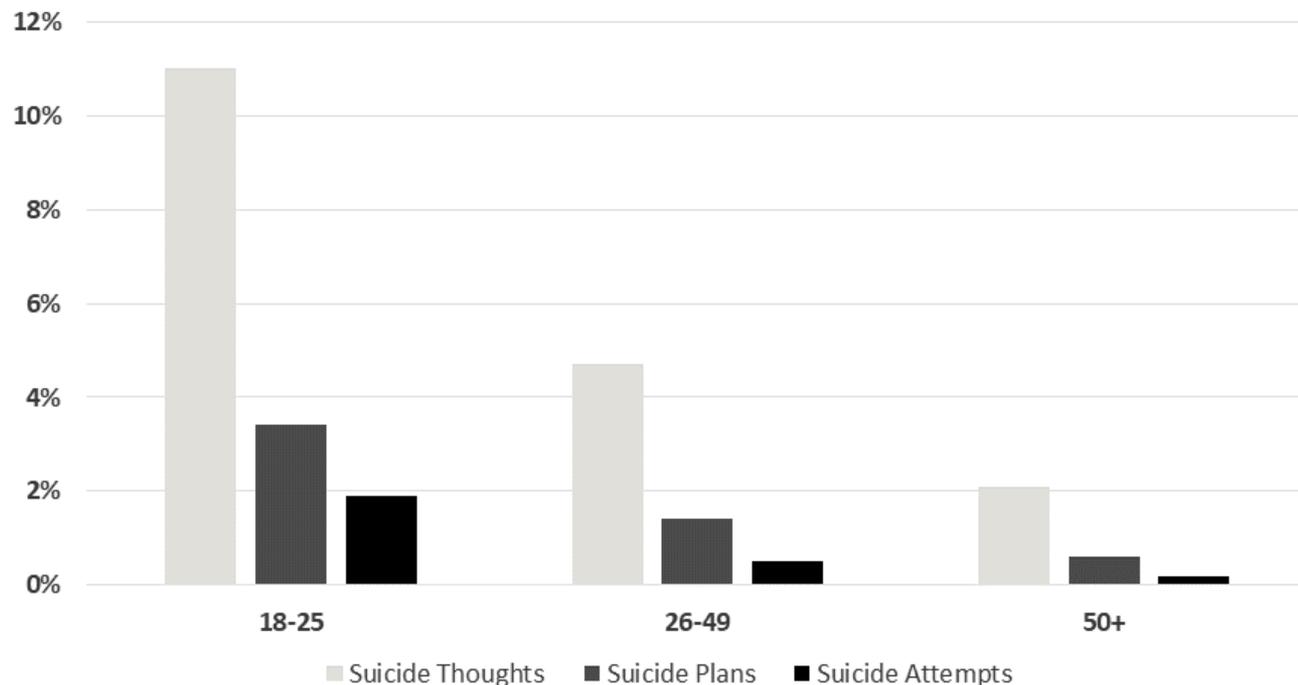
**A**PPROACH  
**S**TAY CONNECTED  
**K**EEP THEM SAFE



# Suicidal Behavior Among Adults (18+), United States 2018



## Past Year Suicidal Thoughts, Plans, and Attempts Among Adults (18+) by Age, United States 2018



# Closer to Home...

- **A problem in Healthcare**

*One doctor commits suicide in the U.S. every day—the highest suicide rate of any profession*

- **Suicide rates among nurses are on the rise**

*The **suicide** incidence of 11.97 per 100,000 people **among** women who are **nurses**, versus 7.58 per 100,000 for American women in general*



# Warning Signs and Symptoms

## Some warning signs are obvious, like,

- Talking about wanting to die or wanting to kill themselves
- Talking about feeling empty, hopeless, or having no reason to live
- Making a plan or looking for a way to kill themselves, such as searching for lethal methods online, stockpiling pills, or buying a gun
- Talking about great guilt or shame
- Talking about feeling trapped or feeling that there are no solutions
- Feeling unbearable pain (whether it be emotional or physical pain)
- Talking about being a burden to others
- Taking uncharacteristic or unusual risks, such as driving extremely fast
- Or saying goodbye to family and friends

## Some of the signs are more subtle, like

- Using drugs or even alcohol in destructive or abnormal ways
- Acting more anxious or agitated
- Withdrawing from family and friends
- Changing eating or sleeping habits
- Showing rage or talking about seeking revenge
- Displaying extreme mood swings, like suddenly changing from very sad to very calm or happy
- Giving away important possessions
- Or suddenly putting affairs in order, like making a will



# Risk Factors

Major risk factors that increase the likelihood of suicide:

- Any prior suicide attempts
- Misuse or abuse alcohol
- Misuse or abuse of drugs, including prescription drugs like opioids
- Mental disorders, particularly mood disorders like depression
- Access to lethal means, especially firearms
- Knowing someone who died by suicide, particularly a family member
- Social isolation, like working primarily alone
- Chronic disease or disability
- Experiencing a negative patient outcome, board complaint, litigation, or loss of license or job
- Relationship problems, including separation or divorce
- Financial difficulties
- A terminal medical diagnosis
- Even some types of life transitions.



# WHAT DO I SAY or DO?

## “Just A.S.K.”

### Approach:

“Are you thinking of harming yourself today?”

### Stay Connected:

Share the facts that have caused your concern

### Keep them Safe:

Connect to appropriate resources for crisis or distress



# Fight the Stigma

## **STIGMA** is a belief that:

- Seeking help will be seen as weakness
- Seeking help will be detrimental to career
- Seeking help will reduce social status with peers

## We must help build a **CULTURE** that:

- Encourages employees to speak-up if a mental health issue is suspected
- Educates others to recognize & respond to a colleague in mental health crisis or distress
- Keeps it simple and provides resources



# Distress or Crisis?

## **Mental Health DISTRESS:**

Deteriorating functioning, possible thoughts of suicide *without* intention or plan to carry out the suicide

## **Mental Health CRISIS:**

Deteriorating functioning *with* suicidal thoughts and a plan with a means to carry it out



# Resources for Mental Health **CRISIS**

**“I am so glad you told me, I won’t leave your side until you are safe.”**



**Take them to the nearest emergency department or mental health facility. Explain the situation, and do not leave the person alone until they are being cared for by the medical staff.**



**If appropriate, offer to call family members to notify them of the colleagues situation and location.**



# Resources for Mental Health **DISTRESS**

“I am so glad you told me, let’s get some help.”



Go with your colleague to the nearest private phone and dial BSWH Peer Support Crisis Line @ **1-888-674-PEER** or EAP @ **1-800-538-3543**. Tell the intake person you have a colleague in mental health distress and need to speak with an intake social worker



They will assess the level of distress and provide recommended resources for therapeutic support.



# National Resources

## National Suicide Prevention Hotline:

**CALL 1-800-273-8255 (TALK)**

**TEXT 'HELLO' to 741741** (hard of hearing TTY at 1-800-799-4889)

**ONLINE @ <https://suicidepreventionlifeline.org>**

## Veterans Crisis Line:

**CALL 1-800-273-8255 (TALK)** (press 1)

**TEXT** message to **838255**

**CHAT** (confidential online) @ [veteranscrisisline.net/get-help/chat](https://veteranscrisisline.net/get-help/chat)

## American Foundation for Suicide Prevention:

**ONLINE @ <https://afsp.org>**



# The Bottom Line:

When you're concerned about a colleague with risk factors or warning signs of suicide,  
have the courage to  
"JUST A.S.K."

## Approach:

"Are you thinking of harming yourself today?"

## Stay Connected:

Share the facts that have caused your concern

## Keep them Safe:

Connect to appropriate resources for crisis or distress

