

AN ANTIDOTE FOR HOPELESSNESS

C. Karen Covey Moore

OVER A LIFETIME ...



- **20% of us will have a suicide in the family**
 - **60% of us will know someone who dies by suicide**
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THE NUMBERS

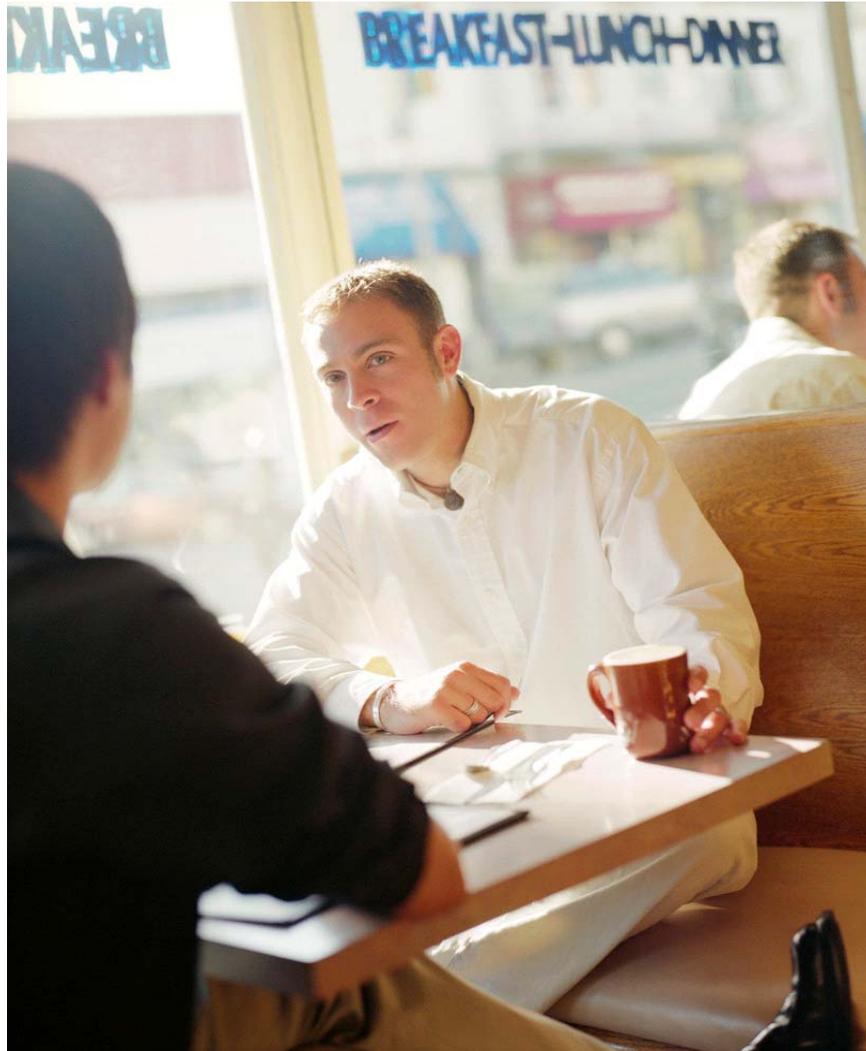
- **Globally: 1 million suicide deaths each year**
- **In the U.S.: every 16 minutes someone dies by suicide - over 32,000 a year**
- **For every suicide death there are 25 attempts**
- **Equivalent to a jet plane with 85 passengers crashing every day with no survivors**

- **Suicide affects people of all age groups and socio-economic backgrounds.**
- **4th leading cause of death among adults 18-65,**
- **3rd leading cause of death among teens and young adults**
- **Individuals ages 65 and older account for 16 percent of all suicide deaths.**
- **2 Suicide deaths for every homicide**
- **More people die of suicide than HIV/AIDS or war**

IN DELAWARE

- **Suicide rate above the National Rate**
- **Higher rate of suicide than**
 - New Jersey
 - Maryland
 - Pennsylvania
- **92 suicide deaths every year**
- **7 – 8 suicide deaths a month**
- **1 suicide death every four days**

WHAT'S IN THE CUP?



SOME WHY'S:

- **90% of persons who die of suicide had a mental illness or addiction**
 - More than 24 million people suffer from depression or another mood disorder each year.
- **Personality Traits**
 - Impulsivity
 - Aggressive Behaviors
- **Genetic Predisposition**
- **Physical illness**

SOCIETAL ISSUES

- **Barriers to accessing mental health treatment**
- **Loss (relational, social, work, or financial)**
- **Easy access to lethal methods**
- **Unwillingness to seek help because of the stigma**
- **Local epidemics of suicide**
- **Isolation, a feeling of being cut off**

PROTECTIVE FACTORS

- **Effective clinical care for mental, physical, and substance abuse disorders**
- **Easy access to a variety of clinical interventions and support for help seeking**
- **Family and community support**
- **Support from ongoing medical and mental health care relationships**
- **Skills in problem solving, conflict resolution, and nonviolent handling of disputes**
- **Cultural and religious beliefs that discourage suicide and support self-preservation instincts**

RISK FACTORS

SAD PERSONS

- S** Sex (gender)
- A** Age
- D** Depression / Manic

- P** Previous Attempts
- E** Ethanol (Alcohol and / or Drug abuse)
- R** Rational thinking loss
- S** Social Support Lacking
- O** Organized Plan
- N** No life partner
- S** Sickness

“LESSNESS”

- **Hopelessness**
- **Dis-connectness**
- **Purposelessness**
- **Ineffectiveness**
- **Helplessness**
- **Burdensomeness**
- **Lifelessness**

WARNING SIGNS

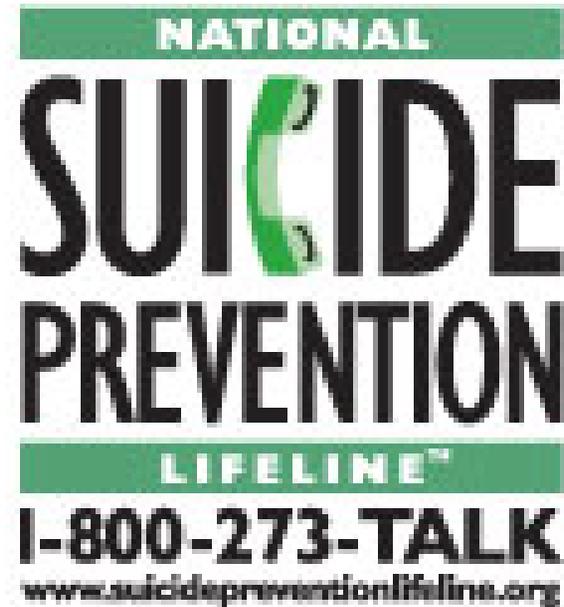
- **Ideation**

- Threatening to hurt or kill self
- Talking of wanting to hurt or kill self
- Looking for ways to hurt or kill self by seeking access to firearms, pills, etc
- Talking or writing about death or suicide



ADDITIONAL WARNING SIGNS

- **Substance Abuse**
- **Purposelessness**
- **Anxiety**
- **Trapped**
- **Hopelessness**
- **Withdrawal**
- **Anger**
- **Recklessness**
- **Mood Change**

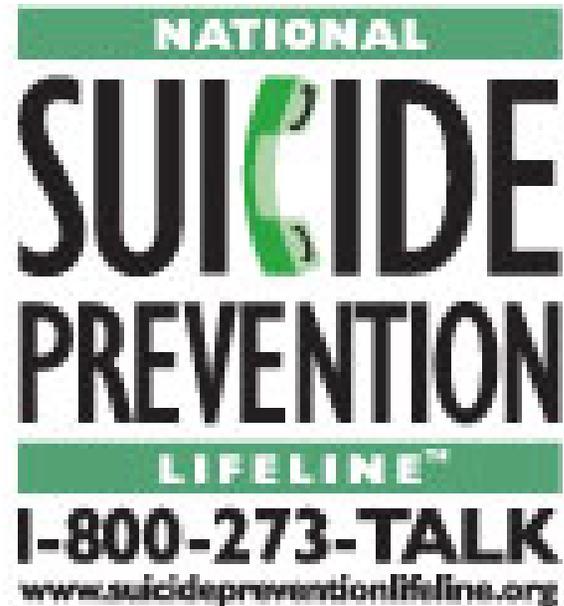


IS PATH WARM

I Ideation
S Substance Abuse

P Purposelessness
A Anxiety
T Trapped
H Hopelessness

W Withdrawal
A Anger
R Recklessness
M Mood Change



WHAT YOU CAN DO . . .

- **Be direct. Talk openly about suicide**
- **Be willing to listen**
 - Allow expressions of feelings
 - Accept the feelings
- **Be non-judgmental**
 - Don't debate whether suicide is right or wrong
 - Don't lecture on the value of life

WHAT YOU CAN DO ...

- **Show interest and support**
- **Don't act shocked**
- **Don't be sworn to secrecy. Seek support**
- **Offer hope that alternatives are available, but do not offer glib reassurance**
- **Take action: remove means**
- **Get help**

THE NATURE OF SUICIDE...

- **Usually occurs with ambivalence.**
- **Happens in families not vacuums.**
- **Always a premature death.**
- **Sudden, unexpected, and often violent.**
- **The most abnormal form of death.**
- **Highly stigmatized.**

STIGMA

- **Historical Religious Thinking**
- **Judgmental and Shaming Language and Comments**
- **Ignorance and Misunderstanding**



"Death by suicide is not a gentle deathbed gathering; it rips apart lives and beliefs, and it sets its survivors on a prolonged and devastating journey."

Kay Redfield Jamison, 1999

C. Karen Covey Moore

THE BEREAVED...

- **It is estimated that every year, over 200,000 people are affected by suicide death – at least 6 to 10 for each death.**
- **Survivors of suicide loss are at a 9 times greater risk of taking their own lives**

SUICIDE BEREAVEMENT: Disrupting the Life Story

- **Cognitive**
 - Disoriented
 - Shock- unable to make decisions
- **Physiological**
 - Sleep disorders
 - Vomiting
- **Psychological / Emotional Devastation**
 - Haunted by images
 - Anger / Betrayal
 - Guilt / Responsibility / Relief
- **Spiritual**
 - Values and expectations undermined
 - A Crisis of faith

ALL OF LIFE IS SHATTERED

- Relationships to self, God and others
- Increased fear and insecurity
- Increased feelings of isolation & withdrawal from the community
- May feel adrift spiritually



SURVIVORS NEED TO KNOW ...

- **It is safe to talk about the pain, cry, ask questions, be angry**
- **They are not going crazy**
- **Survival and healing are possible**
- **They are not alone**
- **It is OK to heal.**
- **It will take a life time because everything has changed**
- **Help is available**

WHAT YOU CAN DO ...

Help them to re-tell their story

- Re-Member

- Re-Frame

- Re-Focus

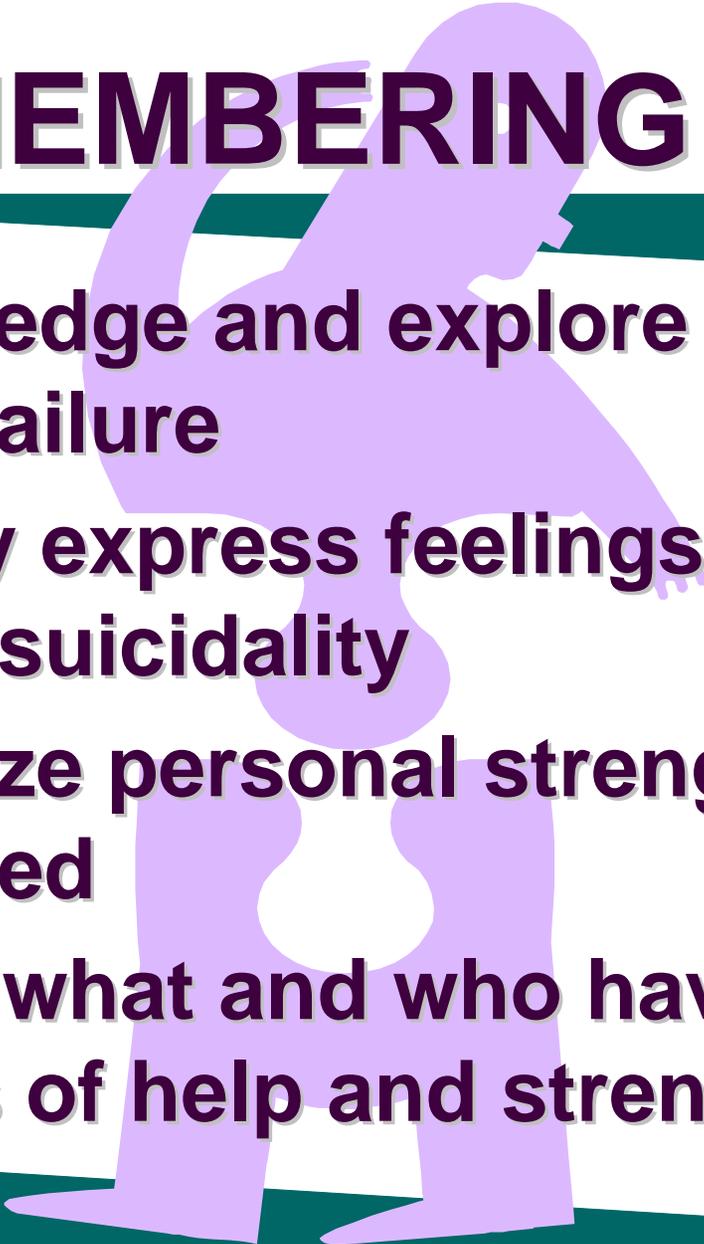


REMEMBERING THE STORY

- Working through and releasing feelings
- Resisting moralism - blaming - stigma
- Caring for ambivalence
- Truth telling



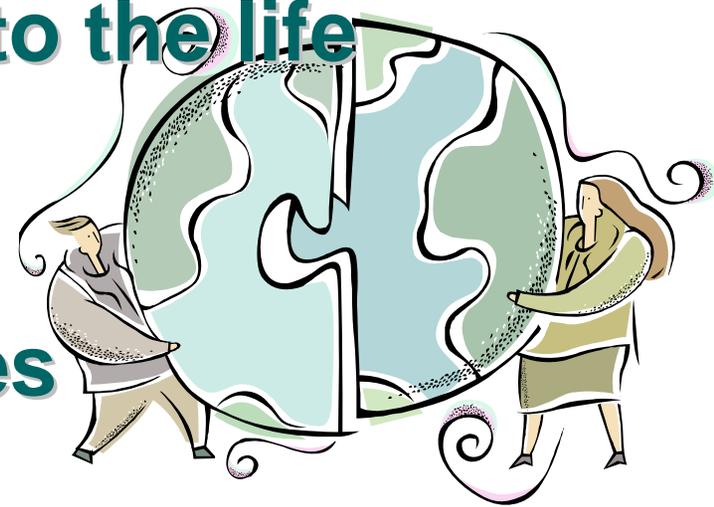
RE-MEMBERING SELF



- **Acknowledge and explore one's pain, guilt and failure**
- **Honestly express feelings of despair and even suicidality**
- **Recognize personal strengths that have helped**
- **Identify what and who have been sources of help and strength**

RE-MEMBERING THE LOVED ONE

- Say the name of the loved one
- Moving beyond the death to the life
- Recalling strengths and accomplishments
- Remembering funny stories and favorite activities
- Recognizing the relationship continues in new and different ways



RE-FRAMING IN HOPE

- **Help dismantle the stigma**
- **Inform about current theories about suicide**
- **Let them know help is available**



RE-FOCUS ENERGY

- **Finding the “New Normal”**
- **Finding Meaning**
 - **Helping others**
 - **Raising Awareness**

CONTACT INFORMATION

C. Karen Covey Moore
71 Harbor Drive, Apt. 8
Claymont, DE 19703

302.798-1478- Home
302-478-2575- Office
302-650-0790-Cell

chabereth@verizon.net