



MENTAL HEALTH MATTERS

A MONTHLY NEWSLETTER FROM ATLANTIC BEHAVIORAL HEALTH

MENTAL HEALTH AWARENESS | September 2022

How Do We Talk About Suicide? Finding the Words That Help.

September is National Suicide Prevention Month and this month we want to talk to those who feel they have lost all hope. We are also talking to those who love them and want to help but don't always know what to say or do. We can all contribute to reaching the goal of "Zero Suicide" by getting informed and more skilled at talking about our own mental health and talking with our loved ones and community.

"I Just Don't Know What to Say"

Many families are afraid to talk about a loved one's mental health and that can be especially true when they are worried about talking to someone about suicide. There can be cultural and social stigmas that prevent them from getting help. Learning about good mental health care and talking to someone about it can be the most important first step. Suicide has been in the shadows and for so long has not been talked about or was only whispered about in hushed voices. Let's change that. We can all talk out loud about mental health and suicide prevention.

"It's been 10 years and I still can't believe my son killed himself. How could I not have seen it?"

"No one really ever says anything about it, but I think my grandmother died of suicide."

"I am doing pretty well now, getting back to school, have a girlfriend. But a few years ago, I was ready to take my own life. I am so glad I got the help I needed."

"I just don't know what to say" is a common reaction when we are faced with someone who is exhibiting signs of mental instability. Here are a few ideas to get the conversation going:

- *"Are you ok?"*
- *"You don't seem like yourself"*
- *"I'm worried about you"*
- *"Are you thinking about hurting yourself or of suicide?"*

Let's Talk Out Loud About Mental Health

A Look at Suicide Through Data

According to Mental Health America, in May 2020, MHAScreening.org saw a dramatic spike in suicidal or self-harm thinking. More than **21,000** people reported this – [four times the average numbers from November to January](#)

- Suicide is the 10th leading cause of death in the U.S., accounting for more than 1% of all deaths. It is the [second leading cause of death](#) among people ages 15-24.
- In 2020, 46,000 Americans died by suicide. There were [13.48 deaths by suicide per 100,000](#).
- In 2020, 12.2 million adults had serious thoughts of suicide, 3.2 million made a suicide plan, and [1.2 million attempted suicide in the last year](#).
- 40% of persons who complete suicide [made a previous attempt](#). Nine of out 10 people who attempt suicide and survive [do not go on to complete suicide](#) at a later date.
- Previous suicide attempts serve as a risk factor for completed suicide. Suicide risk is 37% higher in the first year after deliberate self-harm than in the general population. Older white adults have [triple the suicide risk](#) than younger, adults of another race.
- Suicide rates are [highest among adults ages 45-64 at 19.6 per 100,000](#). The second highest rate is 19.4 per 100,000 among those 85 years or older. Compared with middle-aged older adults, younger populations have consistently lower suicide rates. While males are four times more likely to do die by suicide, females are three times more likely to attempt suicide.
- Those with substance abuse disorders are [six times more likely to complete suicide](#) than those without. The rate of completed suicide among men who abuse alcohol/drugs is two-three times higher than among those who don't abuse substances. Women who abuse substances are at six-nine times higher risk of suicide compared to women who do not abuse substances.

Misunderstandings and Myths About Suicide

Here are just a few to help clear things up.

Myth:	Fact:
It's dangerous to talk to someone about suicide. It could put ideas in their head.	The fact is that people who are feeling depressed are looking to find someone to listen and connect with. Simply asking the question can help clear a way to get help.
People who want to die will just find a way.	The truth is that most people are very ambivalent about wanting to live or die. Being able to talk about it, feeling like someone cares can help them shift toward getting help.
People take their lives out of the blue.	More often there are signs along the way. That's why knowing what to look for can really help.
People who look like they have it all together are not at risk of suicide.	Sadly, we just need to look at some of the famous people who have taken their lives to know this is just not always true. Robin Williams, Chester Bennington, Anthony Bourdain and Kate Spade are high-profile examples of prominent people dying by suicide, seemingly happy people in your own life might be at risk, too. So even if someone seems to have it all, if their behaviors change, don't be afraid to check in.
Once a person gets help and is out of the darkest part they are not at risk for suicide.	Unfortunately, that's oftentimes not true. Many times, people are at the highest risk of attempting suicide when they first get out of the hospital. It is so important to make sure that person has ongoing treatment and support. Not sure if your loved one has the necessary support in place? ASK. If the answer is "no", offer to help find the resources they need.

[5 Common Myths About Suicide Debunked | NAMI: National Alliance on Mental Illness](#)

[7 Myths About Suicide and the Real Facts | Aetna](#)

[8 common myths about suicide - Mayo Clinic Health System](#)

Sometimes life can get very hard. We get discouraged, we have deep losses, we can feel unbearably lonely. To feel is to be human. This is normal and natural for all of us.

Most of the time we bounce back. Things change, something new and interesting comes along, we get help, and we heal. This is also a normal and natural part of being human.

It is the hope that helps bring us back.

But sometimes the dark times can last so long, the dark places feel so deep a person might not be able to see the way through and out. This can lead to feelings of wanting to escape, run away, or put an end to it all together.



What Can You Look for When You Are Concerned About Someone's Mental Health?

Mental Health America provides the following guidance. Remember that it is not your job to be a mental health professional. You don't have to diagnose or take on the burden of fixing everything for someone with a mental illness or who is going through a hard time. But noticing some changes or warning signs can be the first step in supporting someone you care about.

Warning Signs to Look Out For:

- Confused thinking
- Prolonged depression (sadness or irritability)
- Feelings of extreme highs and lows
- Excessive fears, worries and anxieties
- Social withdrawal
- Dramatic changes in eating or sleeping habits
- Strong feelings of anger
- Strange thoughts (delusions)
- Seeing or hearing things that aren't there (hallucinations)
- Growing inability to cope with daily problems and activities
- Suicidal thoughts
- Numerous unexplained physical ailments
- Substance use

Remember: 8 out of 10 people who are considering suicide give some sign of their intentions. Talking about suicide is not a typical response to stress. All talk of suicide should be taken seriously and be addressed immediately

Atlantic Behavioral Health ACCESS Center:
888-247-1400

Atlantic Behavioral Health Crisis Intervention Services 24/7 Hotlines:

Chilton Medical Center: 973-831-5078
Hackettstown Medical Center 908-454-5141
Morristown Medical Center: 973-540-0100
Overlook Medical Center: 908-522-3586
Newton Medical Center: 973-383-0973

If You Think Someone Is Considering Suicide:

- Trust your instincts that the person may be in trouble.
- Talk with the person about your concerns. Communication needs to include listening to the person.
- Ask direct questions without being judgmental. Determine if the person has a specific plan to carry out the suicide. The more detailed the plan, the greater the risk.
- Get professional help, even if the person resists.
- Do not leave the person alone.
- Do not swear to secrecy.
- Do not act shocked or judgmental.
- Do not counsel the person yourself.

CRISIS RESOURCES

If you feel you or someone you know may harm themselves or someone else:

- **988 Suicide and Crisis Lifeline:** 988
- **The Trevor Lifeline for LGBTQIA+ Youth :** 1-866-488-7386
- **Disaster Distress Helpline:** Call 1-800-985-5990 or text TalkWithUs to 66746 to connect with a trained crisis counselor.
- **Veterans Crisis Line:** Dial 988 and Press 1
- **Dial 211 :** 211 provides callers with information about and referrals to social services for every day needs and in times of crisis
- **SAMHSA Treatment Locator:** findtreatment.samhsa.gov



Website:
atlanticealth.org



Atlantic Health System
Behavioral Health



Email:
Nomorewhispers@atlanticealth.org