



Suicide Prevention

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City of Madison's EAP

Agenda

Psychoeducation on Suicide

Recognizing the Signs

Talking about Suicide

Connecting to Resources

Case scenarios | Break outs

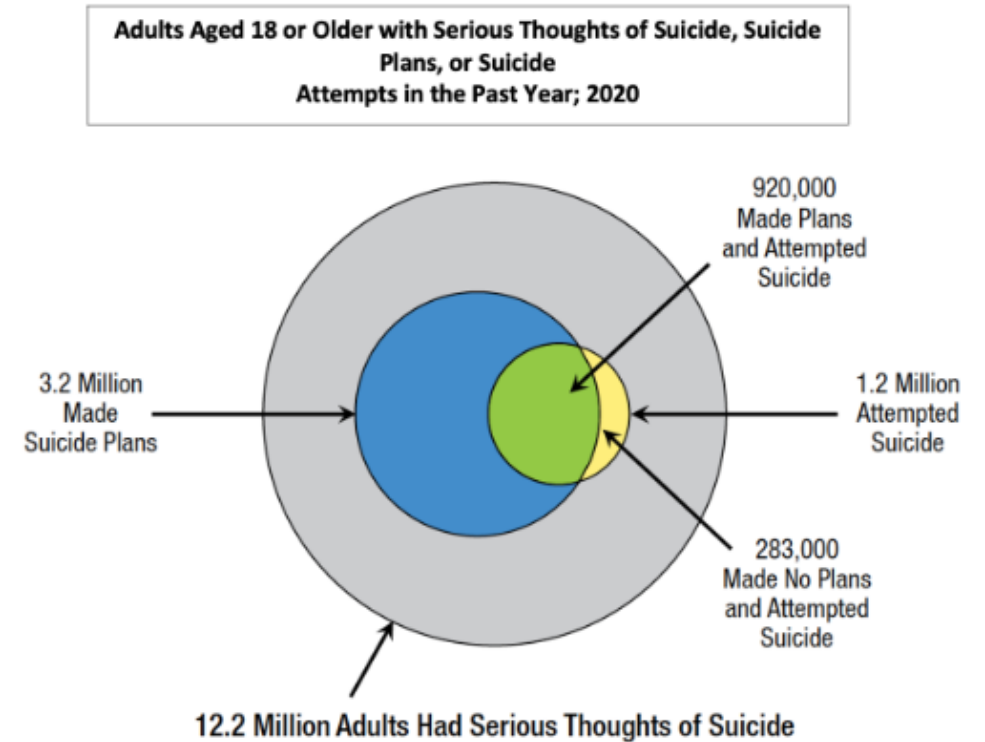
Resources



Language Changes: transitioning from “committed suicide” to “died by suicide”.

50 YEARS ADDRESSING THE LEADING CAUSE OF DEATH

- Every 40 seconds someone in the world dies by suicide, yet very few clinicians are trained to work with suicidal people using evidence-based treatments.
- 800,000 individuals across the globe die by suicide each year, 48,000 of them in the USA.
- There are over 12.2 million adults and 3 million teens in the United States with serious suicidal ideation each year.
- Funding for suicide research in 2020 was \$68 million versus breast cancer research funding of \$709 million.
- Suicide deaths have doubled over the last 50 years while every other leading cause of death has decreased.



Data Source: SAMHSA-Key Substance Use and Mental Health Indicators in the United States: Results from the 2020 National Survey on Drug Use and Health (PDF)

Statistics and General Information

Suicide Data: Wisconsin



Suicide is a public health problem and leading cause of death in the United States. Suicide can also be prevented – more investment in suicide prevention, education, and research will prevent the untimely deaths of thousands of Americans each year. Unless otherwise noted, this fact sheet reports 2020 data from the CDC, the most current verified data available at time of publication (March 2022).

10th leading cause of death in Wisconsin

2nd leading
cause of death for ages 10-24

2nd leading
cause of death for ages 25-34

2nd leading
cause of death for ages 35-44

6th leading
cause of death for ages 45-54

9th leading
cause of death for ages 55-64

18th leading
cause of death for ages 65+

Suicide Death Rates

	Number of Deaths by Suicide	Rate per 100,000 Population	State Rank
Wisconsin	866	14.54	29
Nationally	45,979	13.48	

See full list of citations at afsp.org/statistics.

65.37% of communities did not have enough mental health providers to serve residents in 2021, according to federal guidelines.

Almost **five times** as many people died by suicide in 2019 than in alcohol related motor vehicle accidents.

The total deaths to suicide reflected a total of **17,636 years** of potential life lost (YPLL) before age 65.

62% of firearm deaths were suicides.

51% of all suicides were by firearms.

General Information

- People have suicidal thoughts for different reasons.
- If you're worried that someone may be having suicidal thoughts, you can talk to them. You can ask them how they're feeling.
- Talking to someone about their suicidal thoughts doesn't usually make them more likely to end their life.
- You can help someone who is feeling suicidal by listening, without judging them.
- You can support someone to think about other options to deal with their feelings. Such as accessing support from the NHS, charities, or self-help.
- If someone is in crisis, you can help them to get support from mental health or emergency services.
- Supporting someone with suicidal thoughts might have an impact on you, so it might help you to get support.

Suicide Prevention in the Workplace



Why Address Suicide Prevention

- Workers are an employer's most valuable asset.
- Creating a culture of health and safety is both humane and good for business.
- Good mental and physical health can help enhance workforce productivity.
- Many workplaces already have structures and resources in place to help employees get the help they need, so suicide prevention can be connected with them.

How Employers Can Take Action

- The best way to prevent suicide is to use a comprehensive approach that includes these key components:
 - Creating a work environment that fosters communication, a sense of belonging and connectedness, and respect
 - Identifying and assisting employees who may be at risk for suicide
 - Being prepared to respond to a suicide death

What Can Supervisors and Managers Do?



Provide information sessions for your staff on mental health and suicide prevention.

Ensure all staff know what resources are available for support, both within the organization and in the local community

Foster a work environment in which colleagues feel comfortable talking about problems that have an impact on their ability to do their job effectively and supporting each other during difficult times

Become familiar with relevant services and options.
EAP, Welfare checks, etc.

Offer flexibility when navigating challenges

Trauma Informed Culture

Aspiring to a Zero Suicide Mindset in the Workplace



Leadership

Cultivating a Caring Culture
Focused on Community Well-Being



Job Strain Reduction

Assess and Address Job Strain and
Toxic Work Contributors



Communication

Increase Awareness of Understanding
Suicide and Reduce Fear of Suicidal People



Self-Care Orientation

Self-Screening and Stress/Crisis
Inoculation Planning



Training

Build a Stratified Suicide
Prevention Response Program
Specialized Training by Role



Peer Support & Well-Being Ambassadors

Informal and Formal Initiatives



Mental Health & Crisis Resources

Evaluate and Promote



Mitigating Risk

Reduce Access to Lethal Means
and Address Legal Issues



Crisis Response

Accommodation, Re-integration and
Postvention

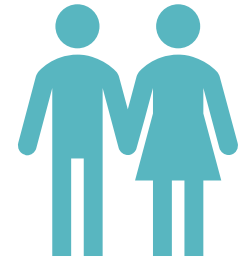
What To Do?



Recognize



Talk



Connect: Bring
someone else in

Recognize

Warning Signs | Risk | Protective Factors

Take a mental health survey:
<https://screening.mhanational.org/screening-tools/?ref=BTS23>

Warning Signs



TALK

What a person may talk about:

- Killing themselves
- Feeling hopeless
- Having no reason to live
- Being a burden to others
- Feeling trapped
- Unbearable pain

BEHAVIOR

What a person may do:

- Increase use of alcohol or drugs
- Look for a way to end their lives, such as searching online for methods
- Withdraw from activities
- Isolate from family and friends
- Sleep too much or too little
- Visit or call people to say goodbye
- Give away prized possessions
- Become aggressive
- Feel tired

MOOD

How a person may present:

- Depression
- Anxiety
- Loss of interest
- Irritability
- Humiliation/Shame
- Agitation/Anger
- Relief/Sudden Improvement

What These Thoughts May Look like:

I am a burden

I am a failure

No one needs me

I am not good enough

There is no point in living

I will never find a way out of this problem

I have lost everything

I am useless

Nobody cares about me

If I die, it will be best for everyone

Research has found that 46% of people who die by suicide had a known mental health condition.

Although more women than men attempt suicide, men are nearly 4x more likely to die by suicide.

More than 1 in 3 people who die from suicide are under the influence of alcohol at the time of death.

The more risk factors a person has, the higher the likelihood of that person experiencing suicide thoughts and attempting suicide.



Health: Chronic, Terminal..



Mental Health: Depression...



Substance Use



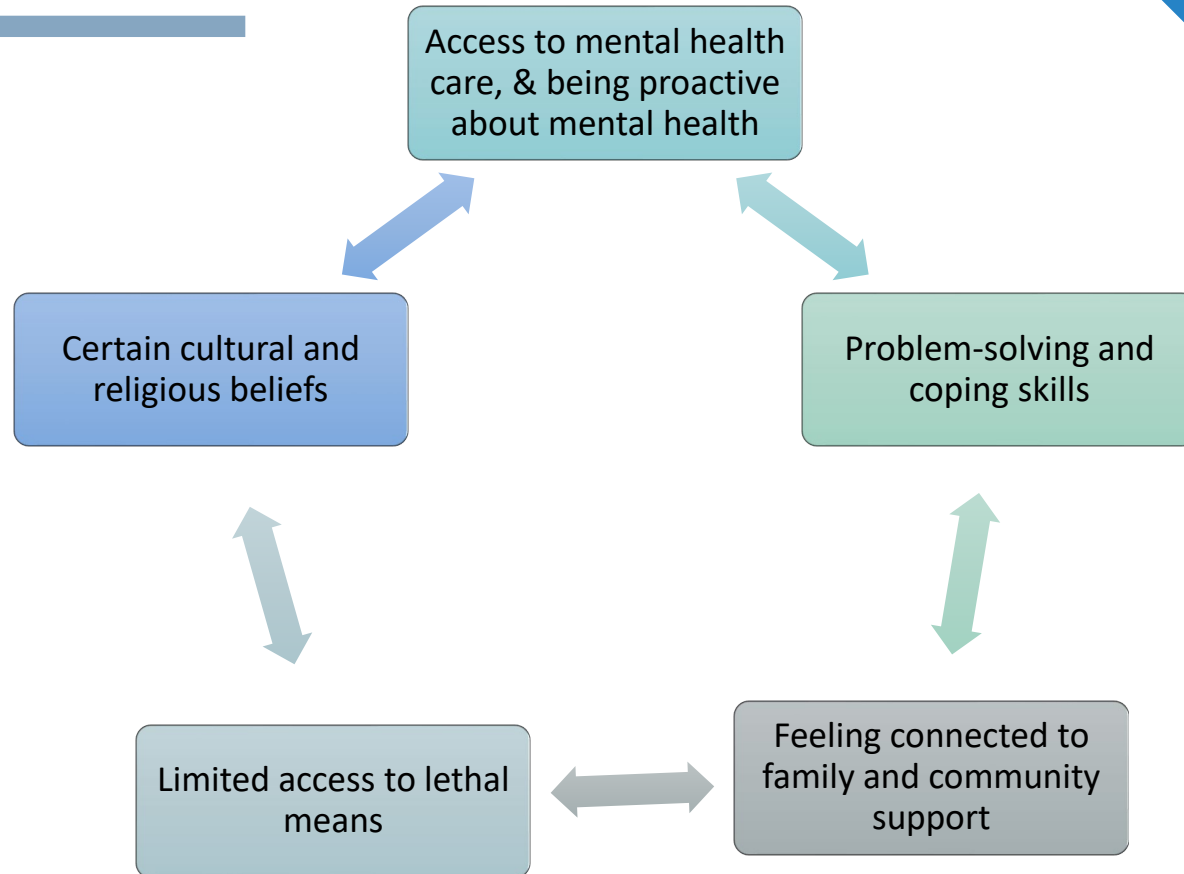
Environmental: Divorce..



Historical

Risk Factors

Protective Factors



Talk

Ask Questions | Clarify

Self- Assessment

Check your biases

- Don't argue, threaten or raise your voice
- Don't debate whether suicide is right or wrong

Be aware of your body language

- If you're nervous, try not to fidget or pace

Be patient and empathetic

What are ways that ground yourself?

Grounding



#somaticexperiencing
therapywithgaby

...

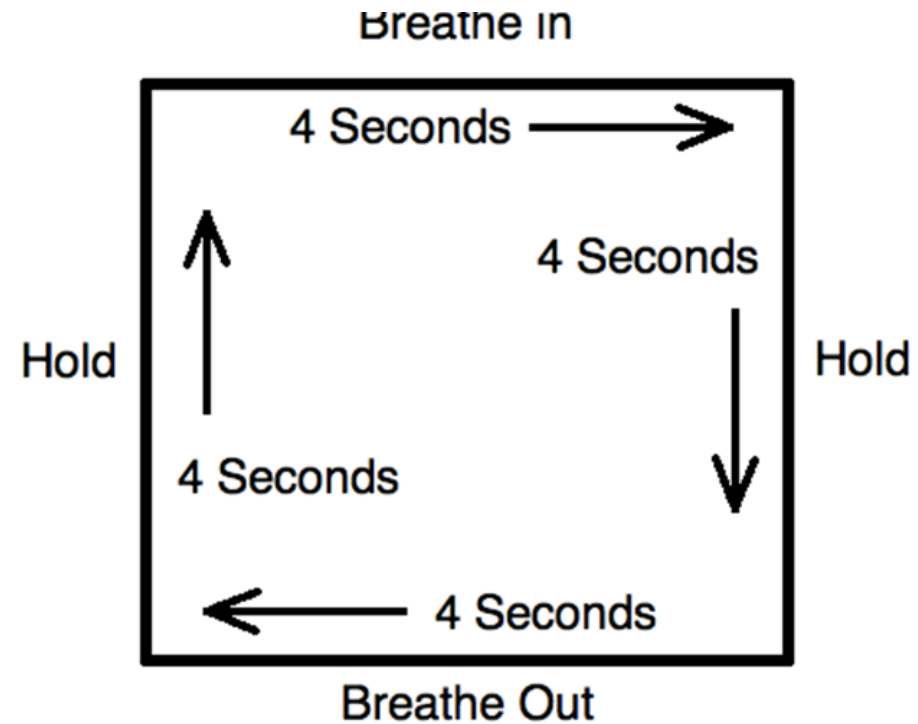
Butterfly Hug



Wrapping your arms around you and tapping your hands in a rhythmic butterfly motion back and forth is a stress reduction technique that can help rebalance your nervous system.

What can we use it for?

- Anxiety



Talk	Talk openly and honestly & ask questions like: “Do you have a plan for how you would kill yourself?” “Are you considering suicide?” “Are you having thoughts about ending your life?”
Avoid	Avoid using broad and general statements, this could imply you are uncomfortable talking about suicide Avoid making assumptions about safety Avoid judging
Ask	Ask for clarifying questions. Especially when you don’t understand what they mean. Ask simple and direct questions
Empathy	Express support and concern

Talking About Suicide

Ways to Start the Conversation

How are you?

- Be prepared for 'fine' or 'good thanks' and follow up with: How are you really?

You don't seem like yourself, is everything okay?

- Letting your friend or loved one know you have noticed something different about them shows you care. It's important to let them know you're concerned about them, not upset with them for behaving differently. Make sure to have some examples of what you have noticed.

I've had a difficult week, how was yours?

- Sometimes it's good to break the ice with the fact that life isn't always great, and to show that you understand. Sharing some of the things you are struggling with can help start the conversation. Be careful not to make it all about you though.

Is everything okay at home/work/school?

- Making the question specific can get the conversation started, but remember that it might not be one thing. It might be a combination of many things, or maybe nothing in particular – just a general feeling.

Be direct

- I have noticed that _____. I am concern about you because _____.

What To and Not To Say/Do

What to do:

- If you feel you cannot ask this person to seek help, take steps yourself to alert the proper people.
- Tell the person you are worried about that you do not want them to die.
- Say, “I am here” and listen to the person without judging.
- If you believe that a person is at immediate risk of hurting themselves or others, call 911 immediately.
- Point them to resources.
- Make sure you close the loop with resources if you are concerned about someone and tell the involved supervisors and EAP.
- Act on your instincts and take necessary action.

What not to do:

- Don’t say, “I know how you feel.”
- Don’t say, “you will get over it.”
- Don’t say, “suicide is selfish.”
- Don’t compare or say, “There was a tornado in Arkansas. Be thankful for what you have and realize other people have it worse than you do.”
- Don’t say things that may be interpreted as guilt ridden like “please don’t hurt yourself,” “I don’t want you to kill yourself; I would miss you terribly,” “My life would be less full without you,” because they may add distress, guilt and shame to the person.
- Do not ignore warning signs.
- Do not keep it a secret.

The Power of Words

Language matters when discussing issues of suicide. Language reflects our attitudes and influences our attitudes and the attitudes of others. Words have power; words matter. The language we choose is an indicator of social injustice and has the power to shape our ideas and feelings in very insidious ways.

Say this	Instead of this
Died of suicide	Committed suicide
Suicide death	Successful attempt
Suicide attempt	Unsuccessful attempt
Person living with suicidal thoughts or behavior	Suicide ideator or attempter
Suicide	Completed suicide
(Describe the behavior)	Manipulative, cry for help, or suicidal gesture
Working with	Dealing with suicidal crisis



Connect

Bring other people into the conversation

What Can You Do?



Express empathy and concern, encourage them to talk, and listen without judgment



Ask if there is anyone they would like to call or have called



Encourage them to reach out to EAP for help getting them connected to support, and offer to call or go there together



Be honest, let them know that you are concern about their safety and will need to bring someone else into the conversation

Imminent Risk

If your colleague has attempted to or indicates that they are about to intentionally harm themselves:

- Don't leave them alone – stay with them or find someone to stay with them
- Call 911
- Do they have access to means?
- What if you are not physically with them?



Resources

Tell
someone

- EAP
- A Supervisor

24 Hours
Resources

- 988 Suicide and Crisis Lifeline
- Dane County Crisis Line: 608-280-2600
- Crisis Text Line: Text or use Whatsapp to message HOME to 741741

What if they deny there's a problem?

Your friend or loved one might not be ready to talk right now. You don't want them to feel pressured and it's their personal choice to talk about it or not.

What if they don't want to see a professional?

It can take time for people to feel ready to talk to someone – and they may not ever want to. Let your friend know there are other options.

Make a safety plan even if they're OK

Safety planning can help someone experiencing suicidal thoughts or feelings get through the tough moments.

What if they're not OK

If you feel like your friend or loved one is at risk of immediate harm, you need to act now. Don't keep it a secret.



Be Prepared:

Practice!

Take turns asking the questions

Case Scenario 1

A co-worker has been showing up for work but their demeanor seems to be progressively changing. You have noticed them engaging less with other people, having lost their sense of humor and lightness, struggling to keep up with the work, and missing deadlines. One day they just ask you to take over some of their projects and you heard from other peers that they were asked to do the same. You know they haven't resigned from their position nor have they been let go.

What would you do?

Case Scenario 2

One of your employees has been showing up late for work this week. When you check up on them, their demeanor is different to how they usually present. They share that they are okay but last week their partner of 15 years moved out and took the kids. You notice that their eyes are puffy, they smell like alcohol, and they seem unkempt. You ask about their support system and they share that they haven't told their family and they don't want them to know yet.

What do you do?

Getting Connected



Scheduling a
Consultation:

(608)266-6561

eap@cityofmadison.com

www.cityofmadison.com/EAP



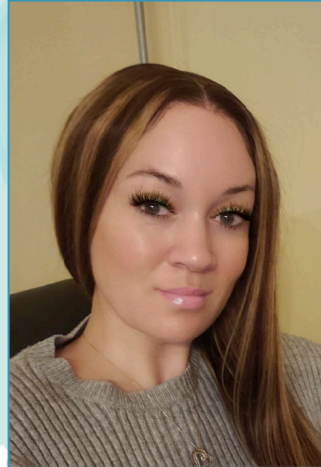
For free 24/7
consultations:

Call (800)236-7905

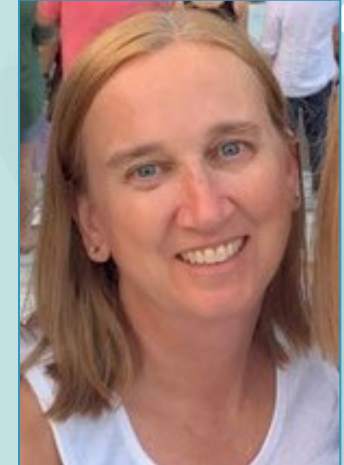
Our Current Team



Arlyn Gonzalez,
EAP Manager
Provides bilingual EAP services
in English and Spanish
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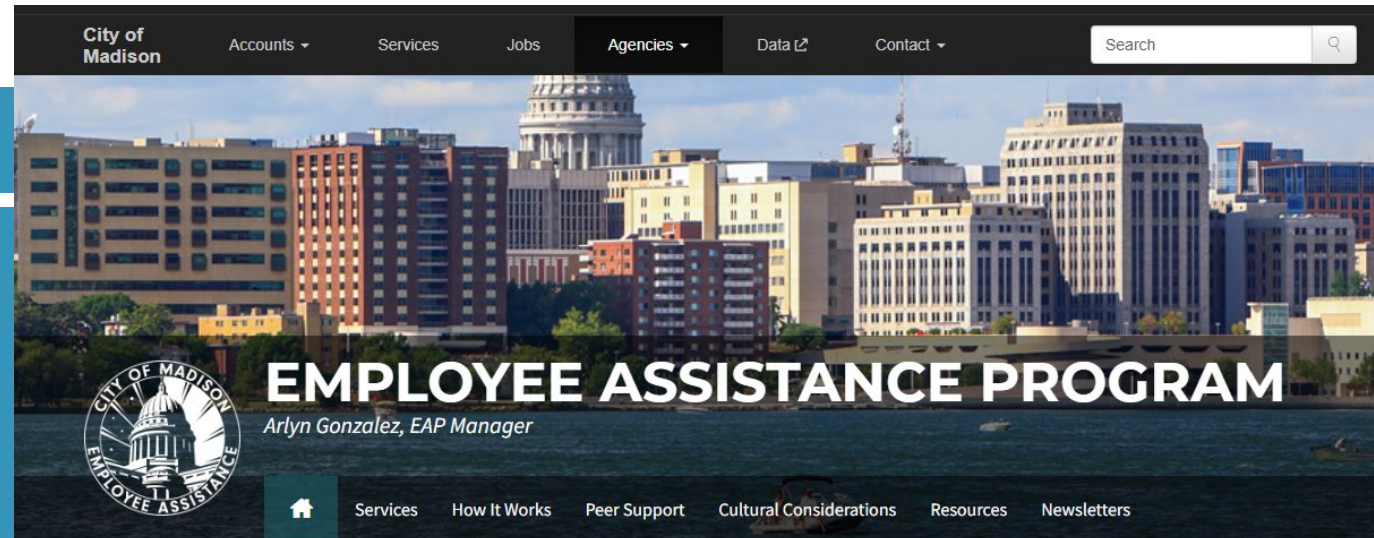


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<https://www.cityofmadison.com/employee-assistance-program>



[City of Madison](#) / [Employee Assistance Program](#)

Mission Statement

The mission of the City of Madison Employee Assistance Program (EAP) is to provide 24-hour personalized & culturally inclusive counseling, management consultation, resource referral, education, and trauma response for both work and personal problems. The services are free and always voluntary for staff, their family members and significant others, as well as retirees.

Our organization's most important assets are its employees and their health and overall wellbeing. We are committed to providing confidential services designed to help City employees prevent or resolve personal, family and workplace problems. We strive to create and support workplaces where individuals with diverse backgrounds and experiences can feel empowered and flourish in the organization.

Announcements

[EAP Connections Newsletter](#)

posted August 17, 2023

This newsletter highlights back to school stresses, human trafficking, trauma relationships and the introduction of targeted trauma treatment (EMDR).

[Subscribe to Email List](#)

<https://fei.mylifeexpert.com/login/cityofmadison>



[ESPANOL](#) [FRANÇAIS](#)

Log In

LOG IN

[FORGOT YOUR PASSWORD?](#)

If you have already created your personalized login, you can sign in with your username and password. If you are creating an account for the first time, sign up here using the company access code provided by your organization.

Create a **new account** with your company code.

SIGN UP

Well-Being. Done Well.

Our member website is your personal guide to achieving greater work-life balance, health and well-being. Here you will find solutions and guidance to navigate life's transitions, challenges and opportunities.



Welcome to your secure and confidential member website for the members of City of Madison.

Call 24/7: 800-236-7905

New Members: Use company code **madison** to create your new account.

Browse as a Guest: Username: **cityofmadison** Password: **employees**



How can I access the member portal from my phone?

Scan this **QR Code** from your mobile device to download our PWA to your home screen.



[LOGIN HELP](#)



Please complete our evaluation survey:

Sources

https://cams-care.com/?gclid=CjwKCAjwlqOXBhBqEiwA-hhitPp-7qGdkvdGrIMjpAHw35p1zG_blk32tzx3qNJg-EUJGm-Im9ZckRoCca0QAvD_BwE

<https://afsp.org/risk-factors-protective-factors-and-warning-signs>

https://www.nami.org/About-Mental-Illness/Common-with-Mental-Illness/Risk-of-Suicide?gclid=CjwKCAjwlqOXBhBqEiwA-hhitKue9n303L_CaodbupsOwWYekUeMOA-zjWjcsYjxQqgcgMzzXcPoCRoCITkQAvD_BwE

<https://www.beyondblue.org.au/the-facts/suicide-prevention/worried-about-someone-suicidal/having-a-conversation-with-someone-you%27re-worried-about>

<https://supportandsafety.colostate.edu/tell-someone/5-dos-and-donts/>

<https://www.irmi.com/articles/expert-commentary/language-matters-committed-suicide>

<https://www.beyondblue.org.au/the-facts/suicide-prevention/worried-about-someone-suicidal/having-a-conversation-with-someone-you%27re-worried-about>

<https://www.sprc.org/settings/workplaces>

<https://workplacesuicideprevention.com/wp-content/uploads/2019/10/Executive-Summary.pdf>

<https://www.who.int/docs/default-source/mental-health/suicide-prevention-employers.pdf>