

SUICIDE PREVENTION

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SUICIDE: STATISTICAL GLIMPSE



- One among top 10 reasons of death
- More than 8 Lakh people in the world and 1.3 Lakhs
 People in India lose their life
- o 2020 Projection: 1.5 Million Life
- Most Affected Age group- 15 to 45 years
- Data Under reported
- It was a criminal act, got decriminalised recently through Mental Health Act



MYTHS & COMMONLY HELD INCORRECT BELIEFS IN THE SOCIETY ABOUT SUICIDES



Talking about suicide is a bad idea as it may give someone the idea to try it.

Most suicides happen in the winter months.

ALL THE STATEMENTS ARE FALSE

People who say they are going to take their own life are just attention seeking and shouldn't be taken seriously

Mental health problems do not happen to people who are 'strong'







A promise to keep a note unopened and unread should always be kept

Suicide attempts or deaths happen without warning

ALL THE STATEMENTS ARE FALSE

If a person attempts suicide and survives, they will never make a further attempt

Suicide is hereditary







People who talk about suicide aren't serious and won't go through with it

If a person is serious about killing themselves then there's nothing you can do

ALL THE STATEMENTS ARE FALSE

People who are suicidal want to die.

You have to be mentally ill to think about suicide







Only certain types of people become suicidal.

Suicide is painless.

ALL THE STATEMENTS ARE FALSE

The only effective intervention for suicide comes from professional psychotherapists with extensive experience in the area

Once a young person thinks about suicide, they will forever think about suicide







Only certain types of people become suicidal.

People thinking about suicide are always angry when someone intervenes and they will resent that person afterwards

ALL THE STATEMENTS ARE FALSE

Every death is preventable

Suicide is much more common in young people from higher (or lower) socioeconomic status (SES) areas



RISK FACTORS



- Previous attempts
- Depression
- Drug and alcohol abuse
- Conduct disorder & behavioral factors
- A disruptive and unsupportive family background
- Relationship conflicts
- Poor coping skills
- Psychiatric illnesses
- The readily available lethal means to commit suicide
- Geographic and social mobility
- Violence, including sexual abuse
- Suicidal behaviour within the family
- Poverty and other structural inequality in society



SOCIAL AND CULTURAL RISK FACTORS



- Increased rates of violence accompanied by decreased levels of concern.
- Marriage dissolution, remarriage and changes in family structure.
- Increased mobility, with disruption of friendships and social networks.
- Uncertainty, through changes in employment, residence and access to education
- Changing roles of men and women.
- Larger and less personal communities



OTHER RISK FACTORS



- Recent bereavement
- Chronic physical illness
- Anniversary phenomenon (of past losses or major life events)
- Early loss experiences
- School failure
- Chronic unemployment and job loss
- Debt
- Perfectionists and over-achievers who have high expectations of themselves



WARNING SIGNS



- The recent suicide, or death of a friend or relative.
- Previous suicide attempts.
- Preoccupation with themes of death or suicidal thoughts.
- Depression, conduct disorder and problems with adjustment such as substance abuse, particularly when two or more of these are present.
- Giving away prized possessions/ making a will or other final arrangements.
- Major changes in sleep patterns too much or too little.
- Sudden and extreme changes in eating habits/ losing or gaining weight.



WARNING SIGNS



- Withdrawal from friends/ family or other major behavioral changes.
- Dropping out of group activities.
- Personality changes such as nervousness, outbursts of anger, impulsive or reckless behavior, or apathy about appearance or health.
- Frequent irritability or unexplained crying.
- Lingering expressions of unworthiness or failure.
- Lack of interest in the future.
- A sudden lifting of spirits, when there have been other indicators, may point to a decision to end the pain of life through suicide



PROTECTIVE FACTORS



PF against youth suicide are less well studied. Some known protective factors are:

- The presence of an important person in the youth's life
- Good coping skills
- A supportive and caring family
- Interests and activities



ROLE OF MENTAL HEALTH



- Physical health- Exercise, nutritious food, vaccination:
 Physical Immunity
- Psychological Health, psychological vaccination (parenting, schooling, life skills education):
 Psychological immunity
- Protective buffer
- Like a **bank**



POSITIVE MENTAL HEALTH



- Not about happiyology!!
- Not about hiding or not feeling negative emotions!
- Not about being 'stress-free' all the time!

We are not talking about 'them' -out there...
BUT 'US'

Mental Health: FUNDA-MENTAL





Seeking Help-Breaking Barriers



Inspiring People to Health Mental



MENTAL HEALTH -TAKING CARE

- Feld 1047
- Dealing with potential sources of stress- proactively & Managing stress
- Investing time & efforts in developing skills/competence
- Managing emotions
- Discovering one's strengths and putting these in practice
- Avoiding over- reliance on quick –fix solutions to handle distress
- Making wise life choices- 'What feels good'- is that enough as a standard to choose something?
- o Going Beyond narrow self-focus —As a way of cultivating well being



WHY SHARING IS IMPORTANT......



- Ventilation and catharsis important
- Danger time can be avoided
- So the help can reach the person
- Talk is a **window** to person's mindset, perceptions and suffering
- Gives other persons an opportunity to help
- To assess the **intentionality and lethality** of future plans
- To help in developing a **personal safety plan**

WHAT CAN BE OUR ROLE

Estd. 1917

- Listen with sincere concern
- Avoid giving unsolicited advice
- o Don't be judgemental
- Never invalidate their feelings
- Ask them if they've been going through something like this before how did they cope with it?
- Share a time when you felt similarly and assure your friend that things can and will change
- Ask if she/he is feeling suicidal
- In a crisis, get the person help immediately.
- Be actively involved in seeking professional help

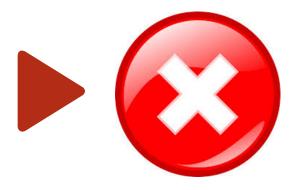


HOW SUPPORT IS GIVEN & NOT JUST WHAT IS GIVEN



COMMON ERRORS IN SUPPORTING...

- Premature reassurance without listening to feelings, not permitting emotional expression
- Trivializing/ignoring other's perspective
- Giving advice that is difficult to follow
- Offering solution when the person only wants to share feelings
- Not providing help in generating solutions, when needed









Suicide is not a solution, getting help is solution......



SUICIDE HELPLINE NUMBERS IN INDIA



• Aasra: 022 2754 6669

• Roshni: 040 66202000

• Sneha foundation india: 4424640050

Vandrevala foundation: 18602662345

• Connecting: 9922001122

• Cooj: +918322252525

• Tata institute of social sciences icall: 022-25521111

• Samaritans: 84229 84528

• 1life: 7893078930

• Sumaitri: 011-23389090

•Sahai: 080-25497777







"WORKING TOGETHER TO PREVENT SUICIDE"



THANK YOU....