Suicide Prevention



SUICIDE and FIRST RESPONDERS' ROLE

WHO ARE FIRST RESPONDERS?

First responders, also known as first interveners, include a variety of public officials who deal with emergency situations on a day-to-day basis. This group includes, but is not limited to firefighters, police officers, EMTs, paramedics and emergency department personnel. When calls or visits are made for individuals needing emergency assistance, whether by that individual or on their behalf, first responders are the first professionals to come into contact with the situation. First responders uphold a duty to shield those in their community from harm.

WHY THE ROLE OF FIRST RESPONDERS IS SO IMPORTANT

Situations that first responders encounter may be of suicidal nature, especially those that are mental health emergencies. The Illinois Violent Death Reporting System indicates 72 percent of Illinois suicides occurred at the victim's residence. First responders are the initial contact in emergency situations occurring in the home. At any time, first responders may be in situations where they need to refer a person to a mental health facility, or even personally recognize and remove lethal means from someone.

The nature of emergency situations that first responders come into contact with is wide in range. Many may assume that first responders deal with common themes, such as fire, theft and automobile accidents.

While this is true, it is important to consider that first responders also are used as a resource by and for people who are suffering emotional, mental health and substance abuse issues.

Unfortunately, most first responders are not specifically trained in the area of mental illness. Many are unaware of the common warning signs of suicide and do not know the appropriate action to take when they encounter someone who is exhibiting suicidal behavior.

Being the first point of contact with individuals in emergency situations, first responders' knowledge and handling of emergency situations greatly influences the end result of these crises. In situations involving suicide, the end result is ultimately fatal if not handled properly. First responders, with the appropriate knowledge and training, can save lives in suicidal situations.

PREVENTION/INTERVENTION STRATEGIES FOR FIRST RESPONDERS

STRATEGIES FOR RESPONDING TO THE SCENE

It is crucial for first responders to take suicide threats and attempts seriously. Suicide Prevention Resource Center (2013) recommends the following steps for taking precaution at the scene:

"Ensure the safety of everyone present" – this
includes eliminating access to lethal means. If
available, contact law enforcement who are
trained in suicide prevention to intervene.
Law enforcement officers should be aware of
the dangers of a "suicide by cop" situation,

where a suicidal person threatens harm to others in attempt to provoke officers to fire at him or her

- "Assess the person for need of medical treatment"

 Address any serious medical needs first, and if not equipped to handle mental health issues, involve somebody who is, such as a mental health clinician or crisis intervention worker. If not aware of the appropriate professional to contact, ask a supervisor for direction.
- "Establish rapport with the person" Listen carefully and speak with the person in a nonconfrontational manner.
- "Assess the person for risk of suicide" –
 Determine whether an attempt has already been made while keeping them under constant observation. If the person is suicidal, arrange for them to be transported to a local hospital or mental health center.

STRATEGIES FOR THE COMMUNITY

There are many ways for first responders to participate in community-wide suicide prevention efforts. First responders can get involved in local prevention efforts, such as community coalitions. If a community has a coalition, then extend an invitation to law enforcement and the fire services. First responders can share written materials with the community and include suicide prevention materials in the department's lobby.

STRATEGIES FOR THE WORKPLACE

Local first responders should promote awareness that suicide is a public health problem that is preventable. As often the first people to come into contact with suicidal situations, first responders must recognize how suicide affects their profession.

To promote an informed staff within their workplace/team, first responders can apply the

following objectives, as outlined by the National Alliance for Suicide Prevention (2012).

- "Assess the problem and its context within the workplace setting" - First responders should examine how suicide affects their profession.
- "Increase workplace buy-in about the consequences of not attending to suicidal behavior" – First responders can talk with colleagues about the importance of suicide prevention education.
- "Build the capacity of workplaces to engage in suicide prevention" – First responders can suggest trainings and print materials for the workplace to review.
- "Engage employers to take action and to evaluate results" – Employing the above strategies, first responders may capture the attention of leaders and see workplace changes.

STRATEGIES FOR OCCUPATIONAL TRAINING

Suicide prevention needs to be a focus of a first responder throughout their professional training and as a part of their continuing education. For example, information can be added to a training block at the academy or school with a brief update or refresher during the time staff received recertification for cardiopulmonary resuscitation (CPR).

The 2012 National Strategy for Suicide Prevention, a report of the U.S. Surgeon General and of the National Action Alliance for Suicide Prevention includes providing training to community and clinical service providers as a specific goal. Within that goal, the following relevant strategies are presented:

- Develop and implement protocols and programs for clinicians and clinical supervisors, first responders, crisis staff, and others on how to implement effective strategies for communicating and collaboratively managing suicide risk.
- Develop and promote the adoption of core education and training guidelines on the

- prevention of suicide and related behaviors by credentialing and accreditation bodies.
- Develop and promote the adoption of core education and training guidelines on the prevention of suicide and related behaviors by health professions, including graduate and continuing education.

UNIQUE CHALLENGES FOR FIRST RESPONDERS

First responders are often exposed to unique situations related to a suicide or a suicide attempt. In addition to directly interacting with suicidal individuals, first responders also must take special care in their interactions with family and friends of a suicidal individual. They need to convey empathy and provide support, but at the same time may be faced with the task of asking sensitive questions in order to obtain more information on the situation.

If an individual completes a suicide, their family and friends become "survivors." Interacting with survivors of suicide presents the same challenges as mentioned, but also may pose greater risks. Survivors of suicide experience strong emotions following their loss and, in extreme cases, may show concerning behaviors that can be classified as suicidal.

Additionally, first responders may be approached by news media for information. First responders must be aware of the danger of releasing information that may be used to glamorize or criticize a victim. Out of safety to the victim, first responders must learn to react to the media in a minimal way, as detailed media coverage regarding suicide can contribute to other suicide attempts. If first responders must speak with the media, they should take such opportunities to provide sources of assistance for others in danger of suicide.

PROTECTING FIRST RESPONDERS

Professionals who act as first responders are in high-stress situations for much of their work time. Being involved with these kinds of situations exposes them to overwhelming images, both physical and psychological, of both the victims and surrounding individuals.

If an agency does not have a policy, then they are strongly encouraged to debrief first responders involved with critical incidents, including suicide. Many local organizations will provide the training at no cost.

Co-workers, friends and family members of first responders can recommend Acute Traumatic Stress Management strategies to help them cope with overwhelming work experiences. These include:

- Encourage them to admit their connection to the situation is creating physical and psychological reactions.
- Support them in talking about their personal reactions to their work. Self-disclosure helps them understand experiences and promotes closure.
- Remind them not to forget they are a normal person who has experienced an abnormal event, and remind them not to feel ashamed to seek professional help.

Unfortunately, first responders' exposure to distress in their work may cause weaker connections in their personal lives, as they may feel like a burden when sharing work-related grief with others. Combined with some first responders' access to firearms (police officers), the above factors make first responders at risk for attempting and/or completing suicide themselves. If you know a first responder under stress, familiarize yourself with the warning signs of suicide and refer them for assistance.

First responders at risk of suicide may display warning signs that differ from that of the public.

The Firefighter Behavioral Health Alliance has identified five common warning signs linked to depression and suicide in firefighters. If you see firefighters who display these signs, step in to help.

- Sleep deprivation
- Anger
- Impulsive behavior may include sudden changes in ideals
- Isolation those who suddenly withdraw from others in the workplace more than usual may be at risk
- Loss of confidence in skills many lose the confidence to perform their jobs

The following warning signs were identified within the International Journal of Emergency Mental Health as warning signs specific to police officers. While not all suicidal officers will show all of these signs, even a few such cues should raise sufficient concern for a supervisor to take action.

- Verbal cues threatening self; threatening others; surrendering control; throwing it all away; out of control; hostile, blaming, insubordinate; defeated; morbid attraction to suicide or homicide; overwhelmed; or out of options.
- Behavioral cues gestures; weapon surrender; weapon overkill, excessive risk-taking; boundary violations; procedural violations; final plans; or surrendering control.

HELP FOR EVERYONE

The following signs may mean someone is at risk for suicide. The risk of suicide is greater if a behavior is new or has increased and if it seems related to a painful event, loss or change. If you or someone you know exhibits any of these signs, seek help as soon as possible by calling the Lifeline at 1-800-273-TALK (8255).

- Talking about wanting to die or to kill themselves.
- Looking for a way to kill themselves, such as searching online or buying a gun.
- Talking about feeling hopeless or having no reason to live.
- Talking about feeling trapped or in unbearable pain.
- Talking about being a burden to others.
- Increasing the use of alcohol or drugs.
- Acting anxious or agitated; behaving recklessly.
- Sleeping too little or too much.
- Withdrawing or isolating themselves.
- Showing rage or talking about seeking revenge.
- Displaying extreme mood swings.

RESOURCES

- National Center for Injury Prevention and Control <u>www.cdc.gov/ncipc</u>
- National Strategy for Suicide Prevention

 http://mentalhealth.samhsa.gov/suicideprevention/
- It Only Takes One public awareness campaign for Illinois – <u>www.itonlytakesone.org</u>
- Firefighter Behavioral Health Alliance www.ffbha.org
- The Role of Emergency Medical Providers in Preventing Suicide http://www.sprc.org/sites/sprc.org/files/ems.pdf
- The Role of Law Enforcement Officers in Preventing Suicide http://www.sprc.org/sites/sprc.org/files/LawEnforcement.pdf

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