

WATERLOO REGION SUICIDE PREVENTION COUNCIL

Suicide Information and Awareness is Important – You're not Alone

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Waterloo Region Suicide Prevention Council

Living with a Person who is Suicidal

Mary Denomme

Living with someone who wants to die and may be contemplating suicide can be terrifying. You might be overwhelmed with guilt, or afraid that anything you say or do (or don't say or don't do) will cause them to take their life. Feeling responsible for someone else's life or death may be too much to bear. The more you understand about this, the easier it will be to deal with someone you love.

Persons who are suicidal feel that their problems are out of control and that suicide is the only way out. They cannot feel the love, support and acceptance of the people in their lives who care about them. They often hide their pain from those who care and those who can help.

Families commonly provide a safety net and a vision of hope for

their family member who is suicidal, and that can be emotionally exhausting. In order to be of help to the person you love, you need to first take care of yourself. Your attempt to help your family member will only succeed if you help yourself first. Don't let this take over everyone's life – maintain as much of your life as possible. Each member of the family will have their own individual way of coping with the emotions and reactions they experience.

Take Care of Yourself

If you can't care for yourself, you can't care for another. Recognize when you are feeling stressed and try to problem-solve ways to reduce your stress. Explore meditation, spiritual retreats, self help courses, support groups, reading or music to find your inner peace and strength. Other ways to take care of yourself can be to:

- go for a walk or run
- keep in touch with friends
- take a break
- read a good book
- enjoy a pet
- go for a massage
- accept help
- let go of the need for everything to go right
- delegate chores
- stay with a routine
- enjoy nature
- take up a hobby
- maintain a good diet
- set limits and keep time for yourself

- celebrate the good times

Reach Out for Support

Establishing a social support system is a necessity. Acknowledge and share your feelings with others who understand what you are going through. Find supportive relatives, friends, co-workers – anyone you feel comfortable talking to about your family member. Look for support groups for families where you can connect with other families and learn from their experiences. Get as much help as you can from professionals and mental health organizations.

Know Your Limitations

You don't want to find yourself overburdened by responsibilities. Decide what level of support and care you are realistically able to provide. Let others involved in the care of your family know what your limits are. This will help in making arrangements for care.

Sacrificing everything for your family member will only exhaust you. Remember there is only so much you can do to help your

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family member. Recognize the limits of what you are able to do. Signs you need to get support for yourself:

- isolation: you just don't see your friends anymore
- tears: you cry a lot or are constantly trying not to cry
- lack of concentration: you're overwhelmed and you can't think straight
- bad temper: you lose it and you can't remember why
- bouts of physical illness: you seem susceptible to whatever is going around
- pessimism: you've lost hope that things will ever get better
- everyone seems to want a piece of you: you are overloaded with others' needs to the point of exhaustion
- you're missing work: your care giving role is starting to take over your whole life
- depression: you've begun to experience the symptoms of a mental illness yourself

Be Aware of Your Health

If you're run down, you won't be able to provide the support your family member needs. Eat nutritiously and exercise as often as possible. Find activities you enjoy. Be patient with yourself – it takes time to adjust to major changes. Try to maintain a healthy and balanced lifestyle for you and the rest of the family. Find a place that you can go to when you need a break. We all need to replenish our strength from time to time. Let your doctor know you are caring for/supporting someone who is suicidal.

Be Good to Yourself

Continue to plan and pursue things that you enjoy. Give yourself permission to maintain

your normal routines. This will help reduce the stress for you and your family members.

Use What You Know

Use the experience and expertise you have built up caring for your family member to guide you when new problems arise. Get as much practical help as possible from other family members, friends or other relatives. Talk over your problems with someone you trust. Problems are rarely solved on the first attempt. Don't get discouraged. Try out a number of solutions until you find the ones that work for you. Don't lose hope – focus on the successes, no matter how small.

Learn New Ways to Respond

Living with a person who has attempted suicide is difficult. They can be loving and “up” and fine, and maybe they are – but they can also seem happy even when they aren't. When they are hurting, they may not know how to ask for help, so they “ask” by acting out, or withdrawing and then rejecting your offers to talk or help. You don't know when to reach out, and when to stand back. You, your friends and relatives may disagree about what to do. Normal boundary setting or everyday differences may now be terrifying. Unrealistic expectations, ignoring the problem, giving in continually, or allowing yourself to become victimized are neither healthy for you nor helpful to the suicidal person. There are difficult decisions to make and as a loving parent/partner you want to make the best choices. Get professional help to learn new ways to respond and help you understand the options that are available.

People living in long term high stress or uncontrollable situations such as this are prime targets

themselves for depression, stress-aggravated physical illnesses (like arthritis, stroke and heart attack) and have less ability to effectively manage family, relationship and work issues. If you feel your own life is out of control, it is more difficult to provide positive support for someone else in crisis. Techniques like eating right, exercising, balancing work and play can help, but are only a start. Serious attention to your own physical and emotional help is imperative.

With suicide, real change can only begin when the suicidal person begins to believe that there is hope and help. You can build networks of caring and support for both yourself and the suicidal person. The important part during this time is not “who” or “how”, but that you can find safe places and safe people willing to support you on this difficult journey.

Sources:

Suicide: Following the warning signs. Available at: www.heretohelp.bc.ca/publications/factsheets/suicide.

The Cleveland Clinic Information Center. Recognizing Suicidal Behavior. Available at: www.clevelandclinic.org/health/healthinfo. SAFER. Living with someone who is suicidal. Available at: [www.thesupportnetwork.com/CASP/living with](http://www.thesupportnetwork.com/CASP/living%20with).

BC Partners for Mental Health and Addictions Information. 2004. How you can help: A toolkit for families. Available at: www.heretohelp.bc.ca.

What help is there for family and friends of a suicidal person? Available at: www.suicidal.com/depressionfaq.

Canadian Collaborative Mental Health Initiative. Working together towards recovery: Consumers, families, caregivers and providers. Available at: www.ccmhi.ca/en/products/toolkits/consumers.



Special thanks to Region of Waterloo Public Health for their support in the printing and distribution of this newsletter.

Waterloo Region Suicide Prevention Strategy: Moving Forward

Wayne Hobbs

A World Health Report “New Understanding, New Hope”⁽¹⁾ identified mental health as an international problem – lack of services, access to services, lack of government direction, and stigma were emphasized as key issues. The magnitude of the problem world-wide is astounding – more than 800,000 people died by suicide in 2001! We also know from the research presented by Dr. Liana Nolan, Medical Officer of Health-Region of Waterloo Public Health, that suicide is a major public health problem in our local community.⁽²⁾ We continue to face major challenges in addressing this complex problem.

“In no other field, except perhaps leprosy, has there been as much confusion, misdirection and discrimination against the patient, as in mental illness... Down through the ages, they have been estranged by society and cast out to wander in the wilderness. Mental illness, even today, is all too often considered a crime to be punished, a sin to be expiated, a possessing demon to be exorcised, a disgrace to be hushed up, a personality weakness to be deplored or a welfare problem to be handled as cheaply as possible”.⁽³⁾

These words were written nearly half a century ago. Yet the more than two thousand personal stories submitted to the Standing Senate Committee on Social Affairs, Science and Technology by Canadians living with mental illness, and their families, make clear that these words continue to ring true.⁽⁴⁾ “One in five children

has some form of mental health problem”.⁽⁵⁾ “Simply put, an Aboriginal teenager is more likely to die by suicide than to go to university”.⁽⁶⁾

Yet, we are moving forward on many fronts.

Resiliency

Robert Friedman⁽⁷⁾ talks about the importance of moving away from deficit language when we discuss our communities and issues. His resiliency model has five external protective factors:

- Social connectedness
- Competency and skill
- Giving to others
- Sense of hope/optimism
- High expectations

I believe Waterloo Region is a very resilient, resourceful community as demonstrated by our community’s courage to identify suicide as a problem, accept our responsibility, and develop a community response.⁽⁸⁾

Collaboration/Synergy

To do this we must, and will, work together. Again, this community has many groups working to achieve synergy. Guided by the work of John VanDenBerg⁽⁹⁾, people have recognized the benefits of:

- collaboration vs. competition
- acting as communities vs. independent silos
- systems of care vs. discrete services
- shared responsibility vs. professional arrogance

De-stigmatization

Significant stigma continues to impose a major barrier to mental health services (both the availability as well as the willingness of people to access service) and government responsibility/leadership. The

proviso from a major cola company sponsoring a teen peer helping service in Ottawa that “Never associate our company name with your program” emphasizes the ongoing challenge.

My Heroes

Despite such stigma, many community heroes are coming forward to share their personal stories. Through their courage, others are receiving the support and encouragement to discuss their losses. Below are just a few of my heroes who have led us “out of the shadows” by publicly discussing their personal mental health and suicide stories:

-Doris Sommer Rotenberg, who was instrumental in establishing the Arthur Sommer Rotenberg Chair in Suicidology at the University of Toronto in 1995, acknowledging her son (a physician who suffered from bipolar disorder) who died by suicide in 1992

-George Chuvalo-Boxer, David Gilmour-Novelist, and Michael Wilson-former Finance Minister who told their stories of the loss of their children to suicide-Toronto 1999

-Debbie Mahaffey who shared with us about her depression following the murder of her daughter, Leslie-Hamilton 1996

-Mike Neuts who talks of his loss, anger, and healing following the death of his son Myles in an elementary school washroom-February 1998

-Karen Liberman who shared her personal story of her mother’s battle with depression and then her own. Karen was the driving force behind the establishment of Moods Magazine-Toronto 2003

-James Bartleman, Lieutenant Governor Ontario, who spoke about his depression and advocates for Aboriginal youth-Mississauga, November 2005

-Fran Brown, who talked about the death of her daughter by suicide-Waterloo 2005

-Bonny Ball, who shared about the loss of her son to suicide, and her positive energy to make a difference by helping others-Dimensions of Suicide Conference, Waterloo September 2006

Research is the Key to Improved Understanding

Improved understanding is also the key to de-stigmatizing mental illness and suicide. "Our experience has taught us that there is a science to childhood development, a science to what causes mental health problems, and how they can be solved. The solution lies in knowledge and the wider dissemination of that knowledge out into the community".⁽¹⁰⁾

Positive Energy

With the release of "Out of the Shadows at Last", there is a strong indication that the Canadian government is taking notice and, hopefully, action. The Waterloo Region Suicide Prevention Strategy is a local response to this challenge. Waterloo is one of the few Canadian communities to develop and release such a road map.

And yes, there is a lot of positive energy in Waterloo carrying on the vital work of suicide prevention as demonstrated by the following few examples of activities/ events:

- Dimensions of Suicide Conference: September 14/15, 2006
- Waterloo Region Suicide Prevention Implementation Strategy: Fall 2006
- Kevin Cameron: The Alliance for Children and Youth of Waterloo Region and the Community Safety and Crime Prevention Council, April 2007

Congratulations to all for their efforts because every time we have a conversation with someone about this topic, we do a little bit to reduce the stigma and help us "Out of the Shadows".

References

1. **The World Health Report.** 2001. Mental health: New understanding, new hope. Available at: www.who.int/whr/previous.
2. **Cited from Waterloo Region Suicide Prevention Strategy Planning Group Meeting.** March 24, 2005. Presented by Dr. L. Nolan, Medical Officer of Health-Region of Waterloo Public Health.
3. **Canadian Mental Health Association.** 1963. More for the mind: A study of psychiatric services in Canada. Pg. 1.Toronto.
4. **Final Report of the Standing Senate Committee on Social Affairs, Science, and Technology.** May 2006. Out of the shadows at last: Transforming mental health, mental illness and addiction services in Canada. Available at: www.parl.gc.ca/39/1/parlbus/commbus/senate/com-e/soci-e/rep-e/rep02may06.htm
5. **Pyke, Nicholas.** July 15, 2006. One in five children has some form of mental health problem. The Tablet. Available at: www.thetablet.co.uk/issues.
6. **Canadian Psychiatric Association.** March 2006. Wait time benchmarks for patients with serious psychiatric illnesses. Policy paper. Available at: www.cpa-apc.org. 2006-1PP.
7. **Friedman, Dr. Robert.** 2006. University of South Florida. Available at: http://cfs.fmhi.usf.edu/cfnews/2006news/interim_chair.html.
8. **Waterloo Region Suicide Prevention Strategy.** March 1, 2006.
9. Available at: <http://www.vroonvdb.com/john.html>
10. **Szatmari, P.,** June 2006. Promising futures. Offord Centre for Child Studies. Promising Futures. Available at www.offordcentre.com.

safeTALK...A New Suicide Prevention Workshop

Linda Bender

In May 2006, two ASIST (Applied Suicide Intervention Skills Training) trainers had the opportunity to attend the International Living Works Conference in Alberta. The conference offered five days of learning and sharing, as well as an opportunity for one of the trainers to be certified in the newest Living Works workshop – *safeTALK: Suicide Alertness for Everyone*. *safeTALK* is a half-day workshop suitable for anyone who connects with people in a school, recreational, security, community service, faith community, health, self-help, neighbourhood or other community setting.

safeTALK is designed to help individuals identify persons with thoughts of suicide, and to link them to suicide first-aid resources. Persons attending this workshop need no previous experience or training. *safeTALK* prepares participants to become more ready and willing to listen and talk with individuals at risk of suicide and then link them to resources for intervention and support.

This workshop is another resource that can be used to enhance the continuum of suicide prevention activities, helping to make Waterloo Region a suicide-safer community. For more information, or to register for *safeTALK*, ASIST or the ASIST TuneUP, e-mail workshops@cmhawrb.on.ca or call 1-866-448-1603 Ext. 323.

UPCOMING EVENTS:

ASIST: Applied Suicide Intervention Skills Training

ASIST is an intensive, two day workshop that helps people to recognize risk and intervene to prevent the immediate risk of suicide. It is designed for service providers, teachers, youth workers, emergency workers, counsellors, faith leaders community volunteers, family members and friends. It is offered from 9:00 to 5:00 each day. The cost of this workshop is \$135.00 (valued at over \$400.00). Enrolment is limited.

Dates and Locations:

Kitchener:

November 11/12, 2006

Fergus:

January 22/23, 2007

New Hamburg:

February 20/21, 2007

Orangeville:

April 25/26, 2007

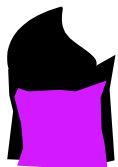
Cambridge:

May 15/16, 2007

Guelph:

June 14/15, 2007

To register, call 519-766-4450 or 1-866-448-1603, or email: workshops@cmhawrb.on.ca.



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candles for your enjoyment. A set of 3-6" pillars on a glass plate in four different scents for only \$15.00. To order, call 519-744-7645 Ext. 310 and leave a message.



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RESOURCES AVAILABLE THROUGH WRSPC

Waterloo Region Suicide Prevention Council Brochure

WHY?? Suicide Information Brochure

WHY?? Youth Suicide Brochure

WHY?? Suicide and the Older Adult Brochure

Suicide Risk Assessment and Intervention for Caregivers Booklet

Waterloo Region Suicide Prevention Council Newsletter published twice yearly

These and other resources are available on the Waterloo Region Suicide Prevention Council website at www.wrspc.ca

