

THE OTHER SIDE OF CHILDHOOD

Wednesday, 1 February 2006

Suicide

Our guests this week were:

Professor Kevin Malone from St. Vincent's Hospital in Dublin
and the School of Psychiatry in UCD

Paul O'Hare, Public Relations Officer with the Samaritans

Catherine Brogan, Acting Director for mental Health and Addiction
with the Health Service Executive in the South West area

Dr Ella Arensman from the National Suicide Research Foundation

Last year, more than 450 people died by suicide in Ireland. Suicide accounts for one in four deaths in 15 to 24 year old males. We have one of the highest suicide rates in Europe.

Para suicide statistics tell us that 11,000 people who have deliberately harmed themselves are seen in Irish hospitals every year. And the highest rates are among 15 to 19 year old girls.

Why do we have such a high rate of suicide and attempted suicide among young people in Ireland?

Is it because there are so few services to help these people with emotional problems? Is it because suicidal teenagers have nowhere to turn? Is it because of our unhealthy relationship with drink? Or is it because we are a less caring society than we used to be?

On this week's programme, we discussed these questions with some of the foremost experts in this country – and indeed, worldwide.

We also heard some of the real stories behind the shocking statistics.

Suicide

www.wit.ie

When a young person commits suicide, everybody who knows that person experiences a deep sense of shock. Fellow students, friends and relatives usually have no idea how desperate the suicide victim was. People ask themselves why it happened, was the person depressed, was there a tragedy in their life, what was going on for the person that they didn't notice. Later, people wonder if anything could have been done. This fact sheet is written for students and parents so that they will know how to cope should they suspect somebody they know is contemplating suicide.

Vulnerability to suicide

The risk of suicide can be increased in certain vulnerable people in particular circumstances. Events such as bereavement, relationship break-up, problems regarding health, finance or employment, illness necessitating life changes, dependency on alcohol or drugs, or violence in the home, can place large emotional strains on people. Those who feel hopeless about their lives, their future and their ability to cope, can find these events even more distressing and may become vulnerable to thoughts of suicide.

Cushioning in the form of an adequate network of support is especially important when a person is experiencing increased stress from the environment (i.e.: from people around them or from situations in which they find themselves.) The isolation felt from the lack of knowledge of support can tip an otherwise self-sufficient person into insecurity leading towards suicidal thoughts.

Impact on family

The impact of a suicide on a family is devastating. In the immediate aftermath of a suicide, and possibly for years afterwards, many people are unable to speak the word 'suicide'. The most common feelings experienced by the family following a suicide are: loneliness, guilt, shame and shock at the violence of the act, particularly if committed by a formerly gentle person.

What to look out for

So, what can we watch out for? We are inclined to notice if a person's normal pattern of behaviour has changed.

- If a person is showing an unusual lack of energy or enthusiasm.
- When a suicide is well planned, the person may put their affairs in order or give away valued possessions.
- No longer caring about college, work or social activities.
- Being withdrawn or finding it difficult to relate to others. Especially if coupled with talking about suicide, this should alert family or friends that concern is needed.
- Dwelling on problems that have no solution, having no support in terms of a social network or friends, expressing feelings of failure, hopelessness or lack of self-esteem, having a belief or philosophy of hopelessness.

What can you do?

Become aware of those around you. Take the time to listen. Show them you want to understand. Show your concern and affection but do not try to cheer them up - reflect their feelings, however dark or morbid. It can make the difference between a person attempting suicide or seeking help. Help them to talk about their feelings and do not ask them about suicidal feelings. Do not avoid awkward subjects or questions.

Ask them have they tried to harm themselves. Ask have they a means to seriously harm or kill themselves. A *YES* answer to these

questions raises a red flag. Seek professional medical or psychological help *immediately*.

Myths

Certain myths surrounding suicide bear examining. It is not true that people who think about suicide are unlikely to commit suicide. Nor is it true that suicidal people are insane, that it is a disorder, or that people who have been suicidal always will be. Neither is suicide a sign of moral inferiority.

Sometimes people erroneously believe that talking about suicide will trigger an attempt. When a person begins to feel better following a suicide attempt, it does not mean that the risk is over; it is precisely at this time that more awareness and continued support is needed because the person has the energy and the means to turn suicidal thoughts into action.

What is the cause of suicide?

There is no simple answer to this question. In fact, a combination of different factors may be involved e.g.:

- Breaking up of close relationships or difficulties in interpersonal relationships with family and friends.
- Worry about academic performance and doing less well than hoped for.
- Lack of confidence in personal appearance and attractiveness.
- Lack of emotional stability; students, especially in their first year in college, often have difficulty in finding friends in their new environment and, consequently, they may experience a sense of isolation.
- The effects of drugs and alcohol may increase feelings of unhappiness and alienation.
- Feeling pessimistic about one's future and one's ability to meet goals.
- More than anything else, simply feeling lonely abandoned and isolated.

If you are aware of someone with suicidal thoughts, encourage them to seek professional help

We *can* have an impact on reducing suicides by developing an attitude of awareness around the issues involved and by being more sensitive to peoples' needs and problems.

Support services for those affected by suicide

(<http://www.oasis.gov.ie/>).

In Ireland, many people have a role to play in providing appropriate assistance within the first few hours following a death by suicide. These people include the Gardai, Coroners, health professionals, funeral directors, etc. If you are, or have been bereaved by suicide you may experience a range of emotions including shock, disbelief, guilt and anger. As suicide may occur unexpectedly or be very sudden, this makes it traumatic for those left behind (particularly for family and friends).

The Central Statistics Office in Ireland recorded the number of suicides that were registered in 2004 as 457. There were 189 suicides of people under 35, an 11% decrease on the 2003 figures. However, there were 268 suicides for those aged 35 and over, a 16% increase on 2003 figures. Males represented 78% of those who died by suicide, while females represented 22%.

Even though this is an extremely difficult time, there are important practical and material matters that can and will arise after any death. Information for the Bereaved has been specially written to help guide you through all the issues and all the stages. It contains information such as what to do immediately after a death, possible social welfare entitlements, tax, financial and legal issues that can and will arise. This booklet also contains information about where to go for further information and support.

It's important to be aware that there are a range of organisations throughout Ireland that can help if you have been bereaved through suicide or if you find yourself in a supporting role to someone who has been bereaved in this way. Each situation involving suicide is different and people react in different ways.

If you are in a supporting role it is important to be extremely sensitive to the needs of the bereaved person. It's also important to know that if you are in a supportive role, there may come a time when you find that you can no longer offer the level or standard of support that is needed. The following organisations can help. They will offer you advice, information and support during this very distressing time and can also help put you in touch with other people in your area that have been through this experience.

National Office for Suicide Prevention

In September 2005 the Department of Health and Children announced the establishment of a National Office for Suicide Prevention. The establishment of a National Office arose as a result of Ireland's National Strategy for Action on Suicide Prevention (pdf). The National Strategy is a ten-year plan setting out a range of actions to be taken by various State and non-governmental agencies targeting suicide prevention among specific target groups (e.g., young men, prisoners, general population, etc).

Immediate priorities of the National Office include:

- The development of a major national campaign to promote positive mental health;

- The delivery of a national intervention skills training programme;

- The creation of new services for treating deliberate self-harm in public hospitals and the expansion of existing services;

- The development of bereavement support services.

The National Office for Suicide Prevention is currently (2006) in the process of being set up and further information on their role and responsibilities will be made available when they are established.

Useful Organisations:

There is a network of ten Suicide Prevention Resource Officers appointed in HSE Areas across Ireland that provide information on local support services for those who have been bereaved through suicide. You may also find some of the following voluntary and community organisations may be of assistance.

AWARE

Aware operate a helpline providing non-directive counselling from 10 a.m. to 10 p.m. every day all year round.

*Aware,
72 Lower Leeson Street,
Dublin 2.*

Lo-Call: 1890 303 302 (helpline only)

*Tel: (01) 661 7211
Fax: (01) 661 7217*

E-mail: aware@iol.ie

Useful Web Addresses

www.evovx.ie

www.spunout.ie

SOLAS

*Solas, (bereavement helpline for children),
Barnardo's,
Christchurch Square,
Dublin 8,*

*Tel: (01) 473 2110 (Mon-Fri 10am - 12noon)
E-mailsolas@barnardos.ie*

CONSOLE

*Console,
All Hallows College
Drumcondra,
Dublin 9.*

*Lo-call helpline: 1800 201 890 (Mon-Fri 9:00am - 5:00pm) Hours
may vary during holiday periods*

*Tel: (01) 857 4300 (Mon-Fri 9:00am - 5:30pm)
Fax: (01) 857 4310*

E-mail: info@console.ie

*Low-cost one-on-one counselling service for anyone affected by
suicide. Also run therapeutic support groups and courses (low-
cost). Provide referral service.*

NATIONAL SUICIDE BEREAVEMENT SUPPORT NETWORK

*National Suicide Bereavement Support Network,
P.O. Box 1,
Youghal,
Co. Cork,
E-mail: nsbsn@eircom.net*

Offers support and information to those bereaved by suicide. Holds seminars, information days, training days, etc.

NATIONAL SUICIDE RESEARCH FOUNDATION

*National Suicide Research Foundation,
1 Perrott Avenue,
College Road,
Cork.*

*Tel: (021) 4277 499
E-mail: nsrf@iol.ie*

IRISH ASSOCIATION OF SUICIDOLOGY

*Irish Association of Suicidology,
16 New Antrim Street,
Castlebar,*

Co. Mayo.

Tel: (094) 925 0858

Fax: (094) 925 0859

E-mail: office@ias.ie

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SAMARITANS

Samaritans

To contact your nearest branch simply select a region on the map available on the website at

www.samaritans.org/talk/local_branch.shtm

Tel (Republic of Ireland): 1850 60 90 90

Dublin Branch

Usual hours open to receive callers: 10 am - 9 pm

112 Marlborough Street, Dublin 1,

Phone: 01 872 7700

E-mail: jo@samaritans.org

Web: www.samaritans.org