



First-Aid Suicide

Intervention Guidelines



First-aid Suicide Intervention Guidelines

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Myths About Suicide

Our beliefs about the nature of suicide will influence our reactions and responses.

Myth: “Asking the question gives people the idea to do it”.

Untrue: you are supporting them by listening to their painful feelings and alleviating their loneliness and isolation.

Myth: “People who talk about suicide are only looking for attention and won’t kill themselves”.

Untrue: If someone says they are feeling suicidal – always take it seriously!


Myth: “If somebody wants to end their life by suicide, nothing can be done to stop them”.

Untrue: Suicidal feelings are often a reaction to unbearably distressing life situations. Often the person does not want to die but wants the pain to end.



Risk Factors For Suicide

- Declining work performances and/or erratic attendance at lectures/work
- A noticeable change in behaviour and/or mood
- Displaying anxiety being restless, irritable, agitated
- Showing a loss of interest in things one cares about
- Withdrawing from family, friends, work, activities, and hobbies / Feeling isolated and alone
- Feeling of being a burden to others
- Experiencing being trapped and feeling there is no way out
- Suffering from a recent loss, threat of loss, for example bereavement or relationship break up, loss of status for example job loss
- Statement of hopelessness, helplessness and worthlessness/feeling there is nothing worth living for
- Impulsiveness and engaging in high risk taking behaviours
- Increase use/abuse of alcohol and/or other substance misuse
- Depression/intense anxiety
- Insomnia or excessive sleeping
- Expressing suicidal thoughts/wishing it was all over
- Giving away valued possessions/putting one's affairs in order
- Out of the ordinary visiting and calling to people one cares about
- A previous suicide attempt
- Suddenly calmer/relief now the decision is made



How to respond – what to be aware of and **what to do:**

If you find yourself faced with a situation where you feel a person is in your view at risk the following guidelines may be of assistance:


Remain calm. Sit and really listen to what the student/friend/colleague is saying. Show empathy and understanding. Take their concerns seriously. Be free of judging the person or their behaviour and relate to the person in a non-confrontational manner. Give them the opportunity to tell you how they are and what is troubling them. Acknowledge how they are feeling. Notice the risk signs.

Express your concern. Tell the person that you are concerned about his or her well-being. Reassure the person that they can get through this distress with the right support and that there are other options available to them.

Offer support and discretion but do not offer absolute confidentiality. If a person for instance, confides to you that he or she is thinking of harming themselves do not feel obligated to keep this information confidential.

In talking to the person, while being sympathetic, it is also necessary to ask both direct and indirect questions to attempt to gauge their state. Find out if the person has ever felt so badly in the past that they have thought about suicide. Explore what may have sparked off the current state. Whether they have a plan to take their life and if so have they thought about when and how they might carry out their plan? If they have a plan and have thought about when, this indicates a very high degree of risk.





At this point provide reassurance and hope. Remind the person at risk that there is help available and things can be better.


Listen and empathise with how the person is feeling. Empathy doesn't mean you necessarily agree but that you do understand their predicament. Attempting to minimise their experience, trying to convince the person that 'things are not that bad and they have everything to live for'; may in fact make them feel even more isolated. They may think that they have failed to communicate how they are really feeling or that there is no hope of being understood.

It is worth remembering that advising 'positive thinking' is rarely a remedy for intense psychological pain. The person isn't likely to be receptive to such strategies although they may feel obliged to say they are. However, do reassure that specialised help is available. This can open up dialogue about accessing and /or referral to a mental health professional such as a counsellor/psychologist/or to a GP.

When recommending/referring the person to professional care, talk to him/her in a straight forward manner. Name the specific behaviours that have lead to your concern. Inform them that it is essential to notify either their next of kin or a professional service. Provide information about the specialist services available on and off campus. If appropriate offer help in setting up the initial appointment or indeed suggest that you will accompany the person to the service itself.

In addition, if unsure about how to proceed in a particular case, the Counselling and Personal Development service offers consultative support on how to manage and what steps to take. This will be worked out in collaboration with you, taking into account the nuances of the particular situation.



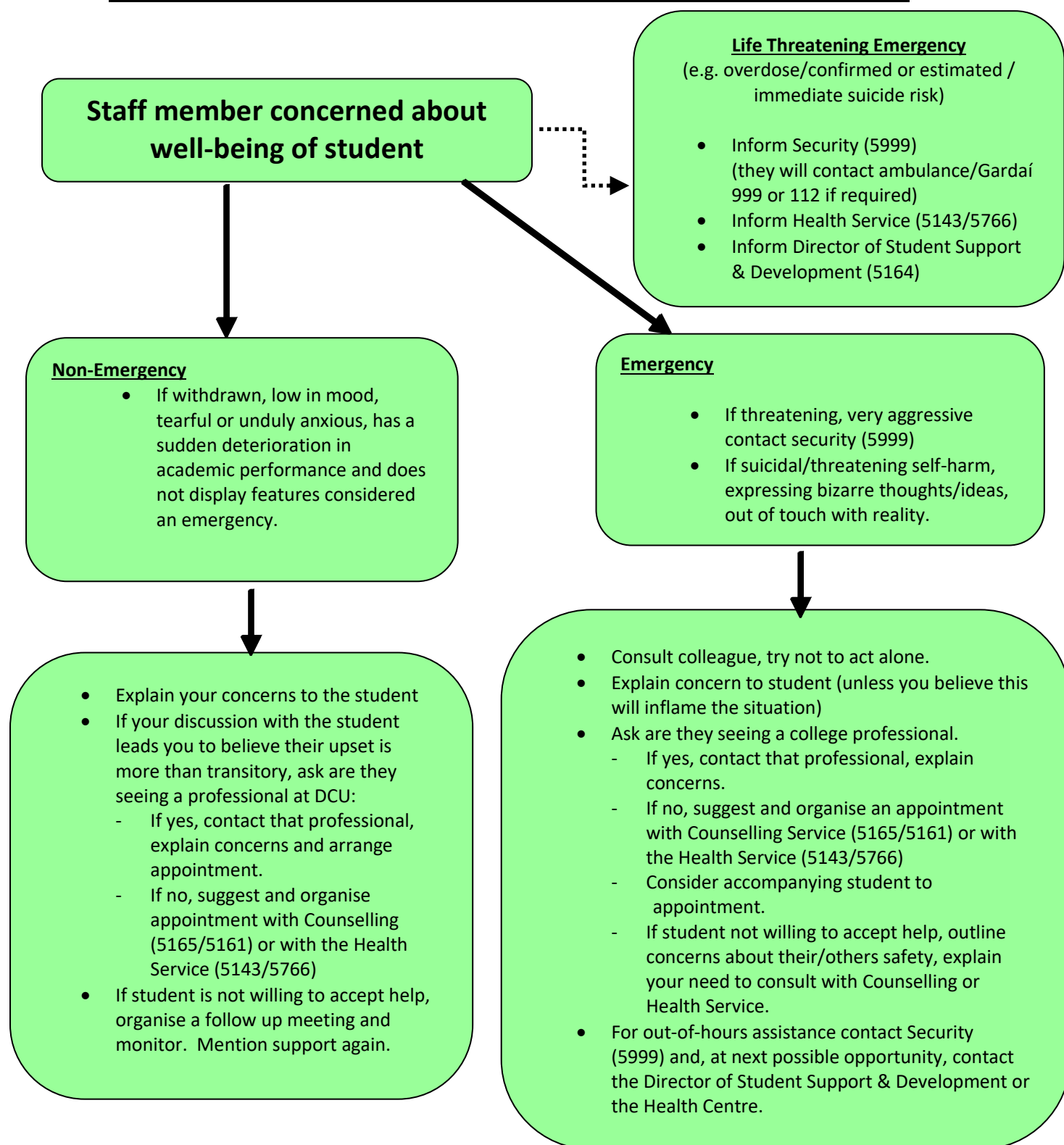


Finally, it is worth knowing that talking about suicide does not create or increase risk. It reduces it.

Open talk and genuine concern about someone's thoughts of suicide are a source of relief for the person and often the key elements in preventing the immediate danger of suicide. Avoidance leaves the person at risk feeling more alone and perhaps too anxious to risk asking someone else to help.

By talking and listening you may draw the person into a supportive relationship with you and away from self –destructive thoughts, until other forms of professional assistance can be mobilized.

How To Respond To A Student In A Psychological And/OR Medical Crisis



Contact Details

Security
Health Service
Counselling & Personal Development Service
Director of Student Support & Development

700 5999
700 5143/5766
700 5165/5161
700 5164



Support Services and Contact Detail:

The DCU Counselling and Personal Development Service provide professional and confidential counselling and psychological services to students. Consultative services are available to both students and staff.

For on campus professional services contact:

Counselling and Personal Development Service, Glasnevin Campus

T 01 700 5165 E counselling@dcu.ie

Counselling and Personal Development Service St Patrick's Campus

T 01 700 9215 E spd.counselling@dcu.ie

Health Centre

T 01 700 5143 E healthservices@dcu.ie

Student Advice Centre

T 01 700 7165 E student.support@dcu.ie

DCU Security: T 01 700 5999

Emergency Services: Fire Brigade, Gardai and Ambulance Phone: 999 or 112

Local Hospitals

Mater Hospital	Phone:	01 8032000
Beaumont Hospital	Phone:	01 8093000
St. Vincent's Hospital (Fairview)	Phone:	01 8842400

Your nearest Accident and Emergency Department or Health Service

www.hse.ie/eng/services/maps



National HSE Text Service Number

Free text HELLO to 50808 for 24/7 for anonymous text conversations

You will be listened to and supported by a trained Crisis Volunteer via text conversation in a safe and confidential environment. Click [here](#) for further information

Samaritans

<http://www.samaritans.org/branches/samaritans-dublin-branch>

T **116 123** (A national 24/7 hour helpline)

Drop in centre at: 112 Marlboro Street, Dublin 1. Open from 10am to 10pm 50508: a free 24/7 national text service.

For 24 hour confidential email Listening Support E: jo@samaritans.org

Aware

<http://www.aware.ie/>

A national support helpline for issues relating to depression and anxiety. T **1890 303 302**

This helpline is open seven days a week from 10am to 10pm.

Pieta House

Preventing suicide and self-harm <http://www.pieta.ie/contact-us>

T **01 8831000 - Dublin North**

Dublin Rape Crisis Centre

This helpline is open seven days a week, 24 hours a day. T **1800 77 88 88**



Your Mental Health

A national HSE 24/7 mental health information and support services information helpline

T 1800 742 444

Out of Hours GP Service

<http://www.hse.ie/eng/services/list/3/OutofHours/GPOOH.html>

D Doc Local **1850 224477** Out of hours GP

Monday to Friday 6pm - 8am,

Sat/Sun/Bank holidays 24 hours.

For a full list of external supports go
to http://www.dcu.ie/counselling/external_agencies.shtml

The DCU Counselling & Personal Development Service, Student Support & Development, Dublin City University Dublin 9.

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W <https://www.dcu.ie/counselling>

