Suicide Risk Assessment & Prevention For Professionals

Sue Heguy, LCSW
Care Plus NJ, Inc.
SueH@CarePlusNJ.org
About our Presenters:

• Sue Heguy, LCSW

• Christopher Leonard, LCSW, M.Ed
Why is it important to Assess Suicidal Risk?

• More survive than actually die from suicide
• 2 of 3 students who attempt do not receive medical attention
• Most common causes for hospital admissions for adolescents
• Suicidal thoughts and behaviors are warnings
Thomas Joiner: Why People Die by Suicide

- Lots of people are depressed and hopeless, many severely. Why do some choose to end their lives and others do not?

- Factors that mark those most at risk of death
  1. The feeling of being a burden on loved ones
  2. The sense of isolation
  3. The learned ability to hurt oneself.
Joiner’s Theory of Suicide Supported by Research

• For an individual to die by suicide, he or she must have both the desire for death as well as the capability for lethal self-injury.

• Without the presence of both components, one does not truly desire or seek death.
Risk Factors for Youth Suicide

- Family history of suicide
- History of previous suicide attempts
- History of depression or other mental illness
- Stressful life event or loss
- Easy access to lethal methods
- Exposure to the suicidal behavior of others
- Incarceration

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SAGE DAY
Verbal Warning Signs

“I wish I could disappear forever”
“I want to run away”
“Nobody cares, I may as well be dead”

“I want to go to sleep and not wake up”
“I hate my life”
“I just can’t take it anymore”
Non-Verbal Warning Signs

• Social Withdrawal/Isolation
• Depression
• Lack of energy
• Unexplained weight loss or gain
• Increased alcohol or drug use
• Insomnia or Hypersomnia
• Dropping out of sports, hobbies, work or school
General Principles of Suicide Risk Assessment

• Be calm and non-judgmental
• Asking open ended questions
• Never promise unlimited confidentiality
• Suicidal thoughts are not uncommon
• Don’t be afraid to say the word “suicide”
How to Intervene

**SEPP**

S
Always treat suicidal behavior **seriously**

E
Eliminate access to firearms and potential tools that could cause harm

P
Involve a **parent** or guardian

P
Follow school **protocol**
Questions to Ask

Ask the person directly whether he or she is suicidal:

“Are you having thoughts of suicide?”
“Are you thinking about killing yourself?”

Ask the person whether he or she has a plan:

“Have you decided how you are going to kill yourself?”
“Have you decided when you would do it?”
How to Help

CHEST

C
Show Concern

H
Willing to help

E
Express empathy & encourage the person to talk

S
Suicide is often associated with a treatable mental disorder

T
Thoughts of suicide are common & don’t have to be acted upon

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Keeping the Person Safe

• Provide a safety contact number
• Identify people that have been supportive in the past
• Are those supports are still available?

• DO NOT:
  – Leave an actively suicidal person alone
  – Use guilt and threats to try to prevent suicide
  – Agree to keep their plan a secret
How to use 262- HELP

Facts regarding the Screening Law & 262-HELP
1. 262-HELP functions as the Designated Screening Center for Bergen County and is governed by the NJ Screening Law.
2. The Screening Law applies to individuals age 18 and older.
3. The primary function of a Screening Center is to provide Mobile Outreach services to adults & minors who may be dangerous due to mental illness.
4. 262-HELP does not have legal authority over minors and therefore can only provide recommendations for services.
5. 262-HELP does not provide school clearance letters as 262-HELP specifically assesses one's need for hospitalization.
6. 262-HELP bills for all services rendered.

Outreach assessment/treatment of Children and Adolescents
1. 262-HELP asks that you make every effort to locate the parent/guardian and request their presence during an outreach.
2. 262-HELP does not have the legal authority to provide a crisis assessment against a parent’s wishes.
3. Schools will be charged $250.00 for mobile outreach assessments provided on campus.
4. Outreach procedures:
   a. 262-HELP will arrive on the scene with a police officer.
   b. 262-HELP will provide a crisis assessment.
   c. 262-HELP will advise the parents, police officer, school official, etc. of our recommendation.
   d. If hospitalization is necessary, the police & parent will arrange transportation to a facility of their choice.
   e. If hospitalization is not necessary, the screener will provide recommendation(s) and resource information to the minor and family.
Resources to Provide Youth

• Care Plus NJ Access Dept. – 201-986-5000
careplusnj.org

• Sage Day – 201-843-3800
sageday.com

• Trevor Project - Providing crisis intervention and suicide prevention to LGBTQ youth. Lifeline for support 1-866-488-7386
Thetrevorproject.org

• 2nd Floor - A confidential and anonymous helpline for New Jersey’s youth and young adults ages 10-24. 1-888-222-2228
2ndfloor.org
Resources

• Jersey Voice – Real stories from teens and young adults making it through tough times

Jerseyvoice.net  Reachout.com


• Assessing and Managing Suicide Risk (2008). SPRC
Resources


Questions