

Pain Isn't Always Obvious

**KNOW
THE SIGNS**

Suicide Is Preventable.org

Suicide Prevention and First Responders

October 2nd, 2013

Webinar for small counties



Welcome!

- Please mute your line
- If you have a question, please type it into the “Questions” box or “raise your hand” by clicking the hand logo on your control panel



The screenshot displays the GoToWebinar interface. On the left, a chat window titled "conference" contains a message: "anything, test your the link below." Below this, there are timestamps and partial messages: ":45 PM", ":46 PM", "panel that the attendees always come into the webinar", "s already on) here: 1.", "rophone and speakers", and "nar." A red box highlights the chat message, with a red arrow pointing to the right. The main interface on the right has a menu bar (File, View, Help) and a window title "Attendee List (2 | Max 101)". It features two tabs: "Attendees (1)" and "Staff (1)". Under "Attendees (1)", there is a dropdown menu "NAMES - ALPHABETICALLY" and a list containing "you know who (Me)". Below the list is a search bar. The "Audio" section shows "Telephone" and "Mic & Speakers" (selected) with a "Settings" link. A "MUTED" indicator and a volume slider are present. The "Talking" section shows "Talking: The Know the Signs Campaign". The "Questions" section has a text input field with the placeholder "[Enter a question for staff]" and a "Send" button. A red arrow points to the "Send" button. At the bottom, the text "practice Webinar ID: 158-173-683" and the "GoToWebinar" logo are visible.

Agenda for Today's webinar

- Roles of first responders in prevention and postvention
- Supporting first responders
- Examples of how behavioral health agencies are working with first responders

Today we'll hear from:

- Stan Collins, Consultant, San Diego County Suicide Prevention Council
- Anne Robin and Captain Andy Duch, Butte County
- Stasia Pringle, Shasta County
- and *YOU!*

Poll

Is your county engaged in any suicide prevention work with first responders?

- Yes
- No
- Not sure

“First responders are in a unique position to determine the course and outcome of suicidal crises.”

-World Health Organization, 2009

Suicide Prevention Gatekeeper Training for First Responders

Law Enforcement
and
Emergency Medical
Services



a project facilitated by:
COMMUNITY HEALTH
IMPROVEMENT PARTNERS
making a difference together

COUNTY OF SAN DIEGO



HHSA

HEALTH AND HUMAN SERVICES AGENCY

Stan Collins, Consultant
San Diego Suicide
Prevention Council

Know the Signs >> Find the Words >> Reach Out

Why is this important to you?

- First responders do and will encounter mental illness, on the job and in their life.
- First responders **can** and **do** make a huge difference in the way they handle these calls.

Increase in Mental Health Related Crisis Calls

- Agencies and departments throughout the country have witnessed an increase in mental health crisis related calls over the past 2-3 years.
 - ***“The fact of the matter is since 2008 we’ve seen an almost 53 percent increase in calls for service in the San Diego Police Department for persons in crisis”***
 - Former SDPD Assistant Police Chief Boyd Long, Dec. 17th, 2012

Other roles of first responder

- Colleague
- Friend
- Family Member
- Community Member
- Role Model

Objectives of Training

- Help prepare first responders to prevent suicide by:
 - Raising awareness about factors of suicide
 - Learning conversation tools for suicide prevention
 - Discussing resources available to you, and for community members; how best to utilize them
 - Understanding factors of suicide to help educate community members to recognize if someone is at risk for suicide, and how to appropriately respond

Objectives of Training (cont'd)

- Explore the issue of suicide and suicide prevention in San Diego and across the nation
- Discuss other efforts for suicide prevention in San Diego County
- Resources
- Question and Answer

Asking about Suicide Intent

- Are you thinking about suicide?
- Do you have a plan?
- When was the last time you thought about suicide?

Recommendations for discussing thoughts of suicide

- Give yourself plenty of time
- Avoid Yes/No questions
- Allow the person to speak freely
- Respect the persons privacy
- Have your resources handy

Two Functional Approach Styles

- *Detached Concern*

vs.

- *Empathic Concern*

Detached Concern Approach

- Typical approach of most medical, law enforcement and fire personnel for most situations
 - Saves time in life-threatening emergencies when eliciting factual information or giving instructions
- Asks necessary questions/provides necessary information
 - Visual: Limited eye contact
 - Physical: Only as required for job
 - Verbal: Courteous but formal (or clinical) tone of voice

Empathic Concern Approach

Best approach for emotionally upset or frightened people.

Asks necessary questions/provides necessary information

- Visual: Maintains eye contact
 - At eye level if possible
- Physical: Appropriate physical contact
 - Hand on shoulder, back of arm
- Verbal: Friendly, caring tone of voice
 - Like you would use for a (loved) family member
 - Reflective Listening “one-liners”
 - Reassuring statements

First responders and postvention

Postvention is any intervention that happens after a suicide to reduce the negative consequences for survivors.

Postvention is also prevention, because survivors of suicide loss may themselves be at increased risk of suicide over time.

Helping Suicide Loss Survivors

- Express empathy
- Briefly explain the investigation process
- Help survivors find support:
 - Friends and family members
 - Support Groups
 - Provide written materials about resources

Suicide prevention for law enforcement

Stasia Pringle

Shasta Suicide Prevention Workgroup
2013

Cultural barriers

Unlikely to accept help from “outsiders”

Unlikely to talk to fellow officers

Man-up environment



The crisis behind the scenes

- Substance abuse/self-medicating behavior
- High stress/cumulative stress
- No help-seeking behavior
- 100 percent firearm ownership
- High suicide rate

How to present your message

- A cop to cop message
- Make it law enforcement schedule friendly

How to get them to attend

- General announcements will not work
- Use law enforcement training schedules
- Use peer support groups and other LE to promote the message

Next time

- Better resources for help
- Rank and file officers
- Firefighters weren't interested

Partnerships between law enforcement and behavioral health for suicide prevention

Anne Robin, Director, Butte County Behavioral Health

Captain Andy Duch, Jail and Court Security Commander, Butte County Sheriff's Office

Questions & Discussion

If you have a question, please type it into the “Questions” box or “raise your hand” by clicking the hand logo on your control panel



Resources – first responders and suicide prevention

- Preventing Suicide: A resource for police, firefighters and other first line responders. World Health Organization. 2009
- The role of EMS providers in preventing suicide. SPRC, 2013
- Emergency responders management of patients who may have attempted suicide. Internet Journal of Rescue and Disaster Medicine, 2006.
- Question, Persuade, Refer (QPR) Training for EMS/Firefighters.

Resources – Postvention and survivor support

What emergency responders need to know about suicide loss: A suicide postvention handbook.
Montgomery County EMS. 2009

A guide for early responders supporting survivors bereaved by suicide. Winnipeg Suicide Prevention Network. 2012

Resources –Support for first responders

- A Manager's Guide to Suicide Prevention in the Workplace: 10 action steps for dealing with the aftermath of a suicide. By the Workplace Prevention Task Forces of the American Association of Suicidology and the National Action Alliance for Suicide Prevention.
- Firefighters coping with the aftermath of a suicide video. Carson J Spencer Foundation, 2013.
- How can emergency responders manage their own response to a traumatic event? American Academy of Experts in Traumatic Stress, 2001.

Thank you!

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Next small county webinar:

Wednesday, November 6th, 2-3pm

Suicide Prevention and the Faith Community

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