



Those at risk of suicide need encouragement to seek help

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Last week's article addressed the complexity of the issues surrounding risk of harm to self or others. Cautioned was urged not to oversimplify matters relating to the causes or the solutions.

We need to focus on the things that we do know and understand about risk and put these things into action to impact our community.

Last week's column noted that 90 percent of completed suicides are associated with a mental health diagnosis, according to the American Association of Suicidology. The two most commonly associated are major depression and substance abuse.

We also know that the suicide rate increases nationally in bad economic times.

There are some common warning signs of suicide:

- Approximately 60 percent of those who die by suicide had major depression at the time of their death.
- Individuals at acute risk of a suicidal crisis will often talk about wanting to die, wanting to hurt themselves, or wanting to end the pain (physical or psychological pain).
- Feelings of hopelessness are reported to be the No. 1 predictor of suicide risk. Individuals at risk of suicide often feel trapped, and in their crisis, they do not see a way out of their situation. They lose focus and cannot clearly see a reason for living.

The good news is there is hope. Major depression is treatable; help is available.

The best form of treatment is therapy and, in some more severe situations,

therapy is used in combination with medications.

However, when we look at the 2010 statistics from the Vanderburgh County Coroner's office, only three out of the 54 individuals who committed suicide in 2010 were reported to be in therapy or counseling. That is only 5 percent.

Comparatively, the number of individuals taking antidepressant medications was 12 out of 54, or 22 percent.

What this reveals is that people are more likely to seek solutions to their hopelessness with medications than with therapy. This also demonstrates is that this strategy is not effective.

As a community, we need to encourage individuals at risk to seek therapy. As professionals, we need to prepare ourselves to provide effective assistance.

Last week's column also noted the risk of suicide among individuals who abuse substances is 50 to 70 percent higher than the general population.

In fact, alcohol intoxication is indicated in as many as 64 percent of suicide attempts.

Again, the good news is that chemical dependency is treatable. It may not be easy, but it is doable.

The Vanderburgh County Coroner's data reveal that the number suicide deaths resulting from overdose has exceeded any other method for the second straight year.

Historically, the most frequent lethal means has been gunshot. Access to prescription medications and illegal drugs has contributed not only to the suicide rate, but to accidental overdoses as well.

We know that restriction of lethal means is one of the best interventions available to reduce suicide. Now we need to link this best practice to our local data.

For individuals at acute risk of suicide, we need to restrict access to medications as well as restrict access to guns.

Hopelessness, substance use, and access to lethal means add up to the "trifecta" of suicide risk. Intervention in one or more of these areas will greatly impact completion.

If you recognize yourself or someone you now in the descriptions above, take action.

For immediate assistance, call Southwestern Behavioral Healthcare's suicide prevention line at (812) 422-1100.

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