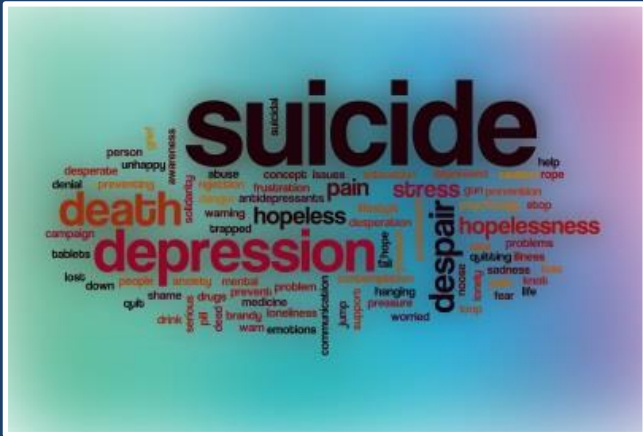




Suicide Prevention



Reflection

Suicide is *not* a normal reaction to any kind of stress, but a complicated response to multiple, interconnected causes. Suicide almost always occurs in response to suffering or anticipated suffering.

- Suffering could be physical, mental, emotional, or spiritual in nature.
- Reasons for suicide may include: depression, financial trouble, dissolution of a relationship, identity confusion, escape from punishment, or perceived pain.

Preventing suicide is a community effort. Yes, it starts with the family, but extends to neighbors, schools, and other organizations. At every level, people have different roles to perform.

Scripture also tells believers that our bodies are not our own but a temple for the Holy Spirit; we have no right to destroy that temple by ending our lives (1 Corinthians 6:19–20). Over and over we see that God is a God of life—not death.

Common Misconceptions about Suicide

Myth:

People who talk about suicide won't really do it.

Almost everyone who attempts suicide has given some clue or warning. Don't ignore even indirect references to death or suicide. Statements such as "You'll be sorry when I'm gone," "I can't see any way out," — no matter how casually or jokingly said, may indicate serious suicidal feelings.

Myth:

People who die by suicide are people who were unwilling to seek help.

Studies of suicide victims have shown that more than half had sought medical help in the six months prior to their deaths.

Action Steps for Helping Someone in Emotional Pain

Help them connect: RIGHT NOW put the National Suicide Prevention Lifeline's number in your phone so it's there if ever needed: 1-800-273-TALK (8255).

Ask: "Are you thinking about killing yourself?" It's not an easy question but studies show that asking at-risk individuals if they are suicidal does NOT increase suicides or suicidal thoughts. While this is not always easy, ask if the at-risk person has a plan.

Remove or disable lethal means: Reduce a suicidal person's access to potentially dangerous items (knives, poisons, etc).

Restrict access to hazardous areas: May include medicine cabinets, wood shop, etc.

Listen carefully: Discover what the individual is thinking and feeling. Findings suggest acknowledging and talking about suicide may in fact reduce rather than increase suicidal thoughts.

Stay Connected: Stay in touch after a crisis or after being discharged from care. Studies have shown the number of suicide deaths goes down when someone follows up with the at-risk person.

"All life has inestimable value even the weakest and most vulnerable, the sick, the old, the unborn and the poor, are masterpieces of God's creation, made in his own image, destined to live forever, and deserving of the utmost reverence and respect."

Pope Francis, 2013