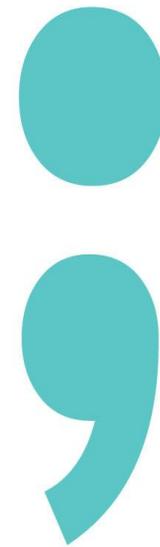


JACOB CROUCH

SUICIDE

PREVENTION

S E R V I C E S



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Presented By:

JACOB CROUCH
**SUICIDE
PREVENTION** 
S E R V I C E S 


**ACADIANA AREA
HUMAN SERVICES DISTRICT**
Serving Acadiana with Quality Compassionate Care

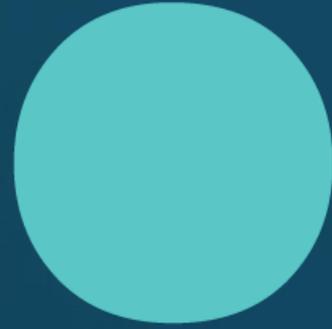


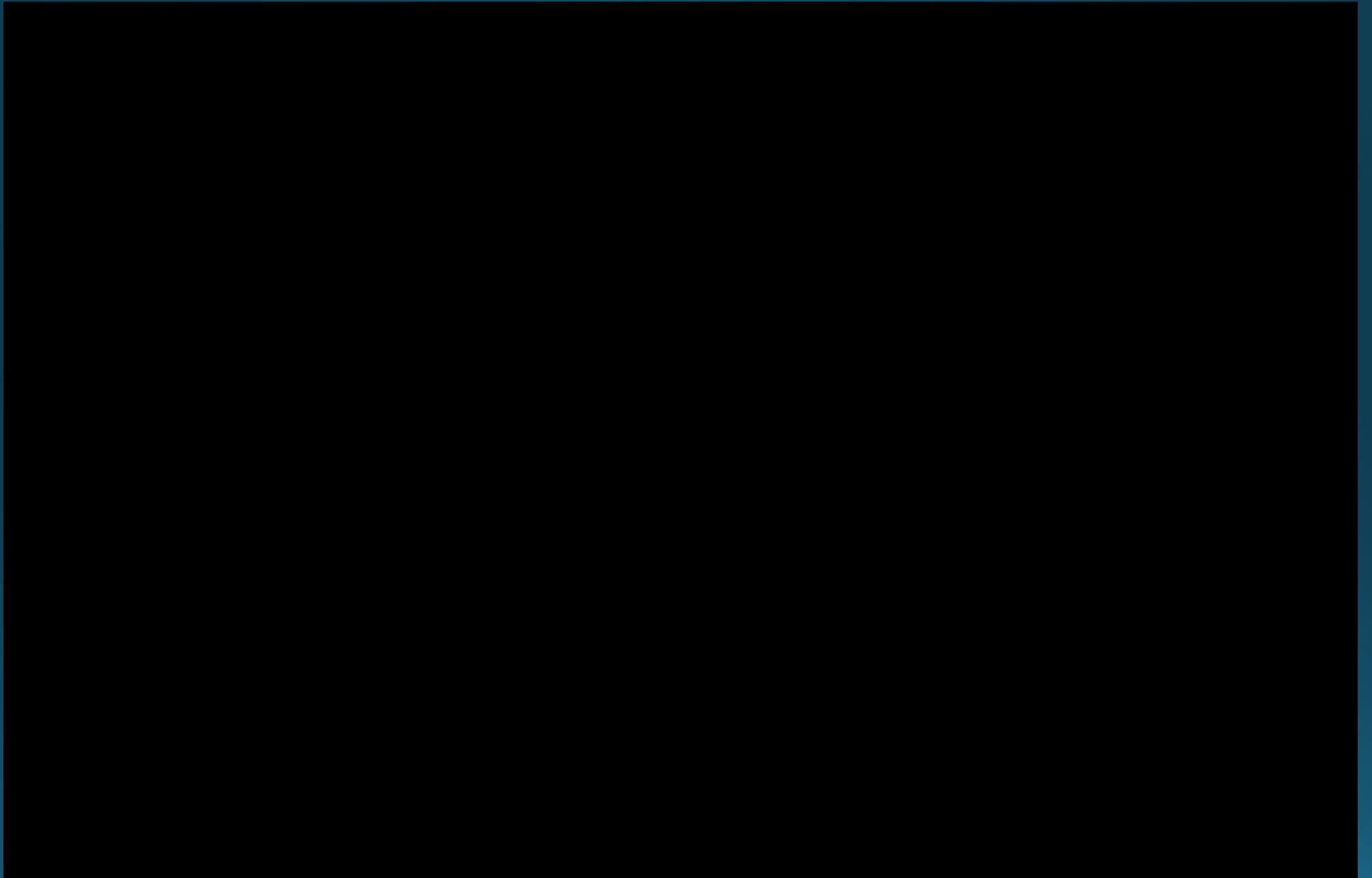
THE FAMILY TREE
INFORMATION, EDUCATION & COUNSELING CENTER

Pre-Evaluation

Who is Jacob Crouch?







SUICIDE STATISTICS

- ; How many people die by suicide in U.S.A. each year?
- ; 48,344 people died by suicide in the U.S. in 2018

- ; Suicide is the 10th leading cause of death in the U.S.
- ; Average of 132 suicides per day in the U.S. (Boeing 737)

- ; Average of 1 person dies by suicide every 11.1 minutes
- ; U.S. Suicide Rate: 14.5 per 100,000 individuals
- ; LA Suicide Rate: 15.5 per 100,000 individuals

(2018 Statistical Data- QPR Institute)

Ages 15-24

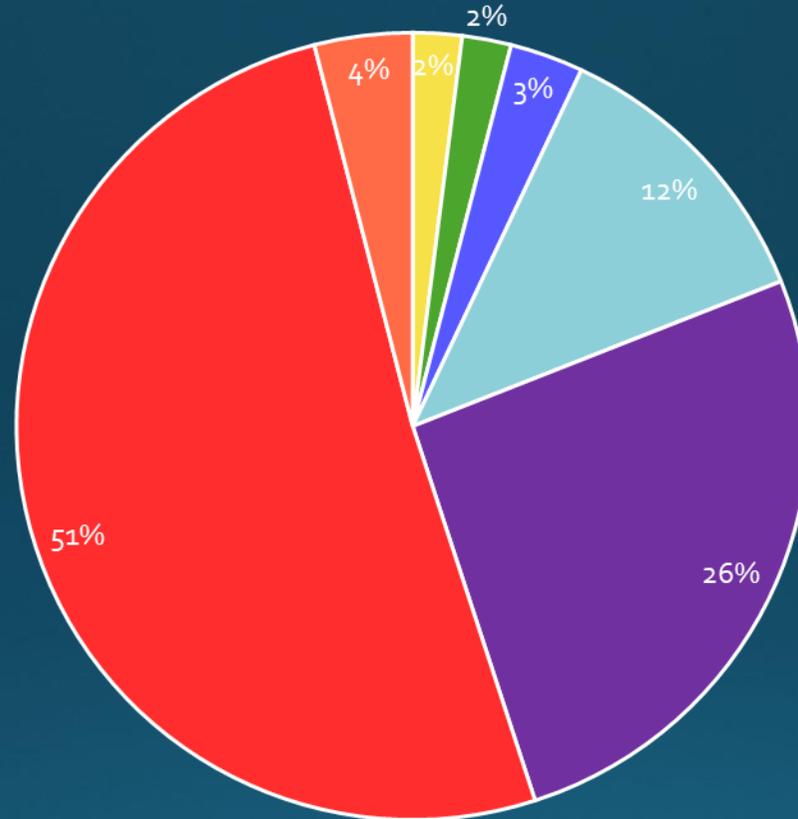


6,211 young people
died by suicide (2018) at a rate of
one suicide every two hours.

U.S. SUICIDE FACTS

- ; In 2018, there were an estimated of 1.4 million suicide attempts in the U.S.
- ; In 2018, firearms accounted for 50.57% of all suicide deaths.
- ; Men died by suicide 3.6x more often than women. Women were 1.4x more likely to attempt suicide.
- ; 90% of those who died by suicide had a diagnosable mental health condition at the time of their death.
- ; In 2017, the suicide rate was 1.5x higher for Veterans than for non-Veteran adults over the age of 18.
- ; The rate of suicide is highest in middle-aged white men.
- ; White males accounted for 69.67% of suicide deaths in 2018.

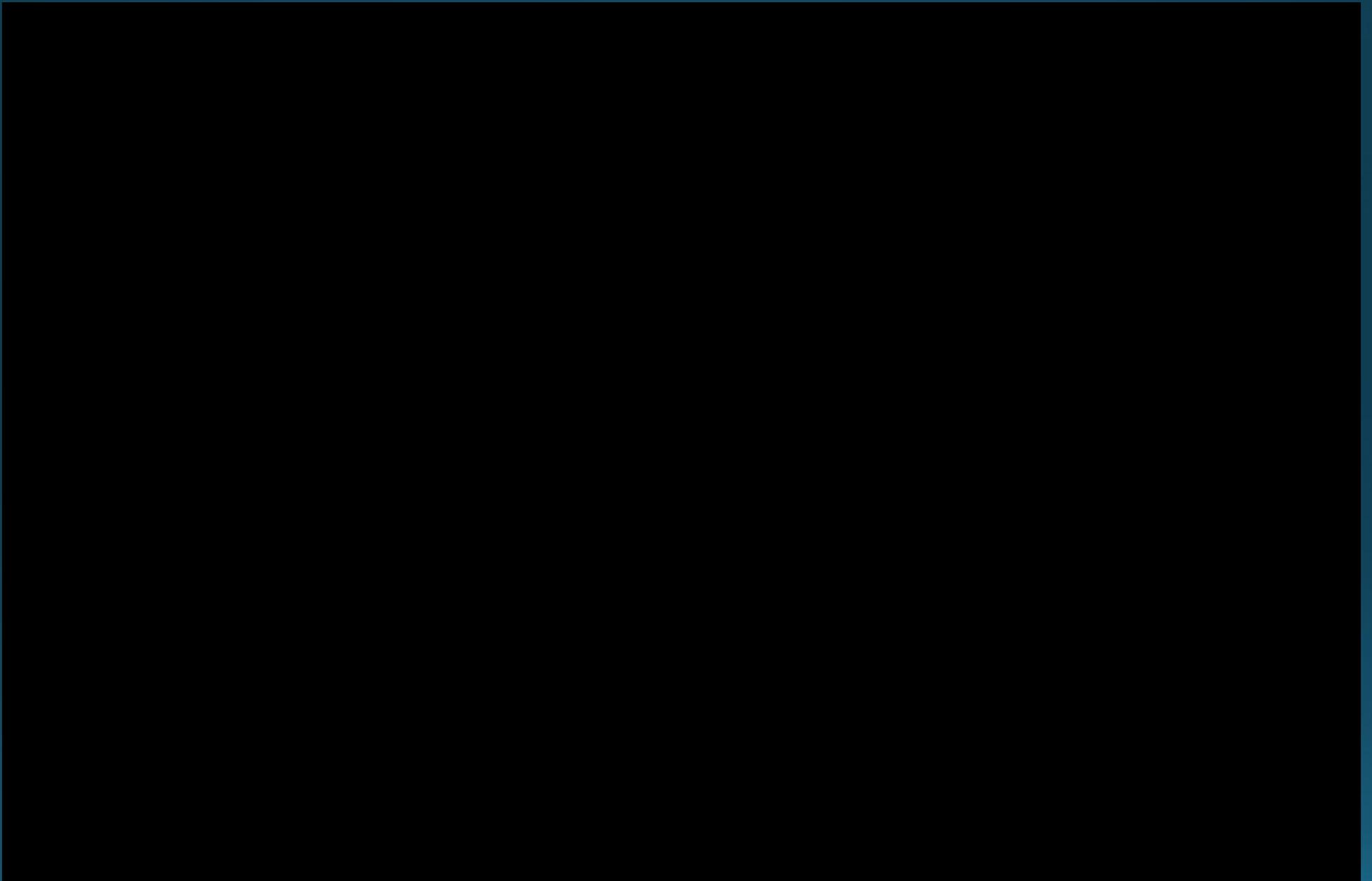
Suicide Death Rates in the U.S. by Method



■ Cutting ■ Jumping/Falling ■ Gas Inhalation ■ Poisoning/Overdose ■ Suffocation/ Hanging ■ Firearms ■ Other

JOINER'S THEORY OF SUICIDE





QPR

Ask A Question, Save A Life



GOALS

- ; Raise awareness of suicide as the most preventable cause of death
- ; Speak of the most common causes of suicidal thinking
- ; Teach the warning signs of suicide
(booklet covers additional warning signs)
- ; Teach 3 simple steps that may avert a suicide & perhaps save a life
- ; Provide a message of hope that can be used to prevent suicide
- ; Discuss the myths and misconceptions of suicide
- ; Teach the skills needed to become a QPR Gatekeeper so that you will know what to look for and what to do if/when you encounter someone that becomes suicidal

QPR

- QPR is not intended to be a form of counseling or treatment.
- QPR is intended to offer hope through positive action.

QPR

Suicide Myths and Facts

- **Myth** No one can stop a suicide, it is inevitable.
- **Fact** *If people in a crisis get the help they need, they will probably never be suicidal again.*
- **Myth** Confronting a person about suicide will only make them angry and increase the risk of suicide.
- **Fact** *Asking someone directly about suicidal intent lowers anxiety, opens up communication and lowers the risk of an impulsive act.*
- **Myth** Only experts can prevent suicide.
- **Fact** *Suicide prevention is everybody's business, and anyone can help prevent the tragedy of suicide*

QPR

Myths And Facts About Suicide

- **Myth** Suicidal people keep their plans to themselves.
- **Fact** *Most suicidal people communicate their intent sometime during the week preceding their attempt.*
- **Myth** Those who talk about suicide don't do it.
- **Fact** *People who talk about suicide may try, or even complete, an act of self-destruction.*
- **Myth** Once a person decides to complete suicide, there is nothing anyone can do to stop them.
- **Fact** *Suicide is the most preventable kind of death, and almost any positive action may save a life.*

How can I help? Ask the Question...

Suicide Clues And Warning Signs

- Threats to hurt or kill him or herself
- Current talk of suicide/making a plan
- Strong wish to die/preoccupied with death
- Anxious and depressed, not sleeping
- Abusing substances

The more clues and signs observed, the greater the risk. Take all signs seriously!!



QPR

Direct Verbal Clues:

- “I’ve decided to kill myself.”
- “I wish I were dead.”
- “I’m going to commit suicide.”
- “I’m going to end it all.”
- “If (such and such) doesn’t happen, I’ll kill myself.”

QPR

Indirect Verbal Clues:

- “I’m tired of life, I just can’t go on.”
- “My family would be better off without me.”
- “Who cares if I’m dead anyway.”
- “I just want out.”
- “I won’t be around much longer.”
- “Pretty soon you won’t have to worry about me.”

Behavioral Clues:

- Any previous suicide attempt
- Acquiring a gun or stockpiling pills
- Impulsivity/increased risk taking
- Giving away prized possessions
- Self-destructive acts (i.e., cutting)
- Unexplained anger, aggression and irritability
- Chronic truancy, running away
- Behavior health issues
- Perfectionism
- Frequent crying or sobbing
- Sudden decline or improvement in academics
- Increased apathy
- Co-occurring depression, moodiness, hopelessness
- Putting personal affairs in order
- Sudden interest or disinterest in religion
- Changes in behavior



Situational Clues:

- Being expelled from school /fired from job
- Family problems/alienation
- Loss of any major relationship
- Death of a friend or family member, especially if by suicide
- Diagnosis of a serious or terminal illness
- Financial problems (either their own or within the family)
- Sudden loss of freedom/fear of punishment
- Feeling embarrassed or humiliated in front of peers
- Victim of assault or bullying
- Fear of becoming a burden to others
- Loss of a cherished therapist, counselor or teacher



Physical Clues:

- Eating disturbances
- Anxiety/ Panic Attacks
- Changes in sleep patterns
- Chronic headaches
- Stomach problems
- Menstrual irregularities
- Scars or injuries from past suicide attempts
- Chronic and/or terminal illness



QPR

Tips for Asking the Suicide Question

- If in doubt, don't wait, ask the question
- If the person is reluctant, be tactfully persistent
- Talk to the person alone in a semi-private setting
- Allow the person to talk freely
- Give yourself plenty of time
- Have your resources handy; QPR Card, phone numbers, counselor's name and any other information that might help

Remember: How you ask the question is less important than that you ask it

Q

QUESTION

Less Direct Approach:

- “Have you been unhappy lately?
Have you been very unhappy lately?
Have you been so very unhappy lately that you’ve been thinking about ending your life?”
- “Do you ever wish you could go to sleep and never wake up?”

Q

QUESTION

Direct Approach:

- “You know, when people are as upset as you seem to be, they sometimes wish they were dead. I’m wondering if you’re feeling that way, too?”
- “Are you having thoughts of suicide?”
- “You don’t look like yourself, I wonder if you’re thinking about suicide?”
- “Are you thinking about killing yourself?”

NOTE: If you cannot ask the question, find someone who can.

"I've noticed you've been down lately. What's going on?"

"This is awkward, but I'd like to know if you're really all right."

"Hey, we haven't talked in a while. How are you?"

"Whenever you're ready to talk, I'm ready to listen."

"Maybe it's me, but I was wondering if you were all right."

"I know you're going through some stuff; I'm here for you."

"Are you OK? You don't seem like yourself lately."

"Is there anything you want to talk about?"

"Seems like you haven't been yourself lately. What's up?"

"I haven't heard you laugh in a while. Is everything OK?"

"No matter what you're going through, I've got your back."



QUESTION

How NOT to ask the suicide question:

- “You’re not thinking of killing yourself, are you?”
- “You wouldn’t do anything stupid/crazy would you?”
- “Suicide is a dumb idea. Surely you’re not thinking about suicide?”
- “Are you thinking of hurting/harming/injuring yourself?”

Asking in these ways encourage a negative response from the person you’re talking to. Always be aware of your non-verbal clues.

P *PERSUADE*

HOW TO PERSUADE SOMEONE TO STAY ALIVE

- Listen to the problem and give them your full attention
- Remember, suicide is not the problem, only the solution to a perceived insoluble problem
- Do not rush to judgment
- Offer realistic hope in any form

P *PERSUADE*

Then Ask:

- Will you go with me to get help?”
- “Will you let me help you get help?”

**YOUR WILLINGNESS TO LISTEN AND TO HELP CAN REKINDLE HOPE,
AND MAKE ALL THE DIFFERENCE.**

R

REFER

- Suicidal people often believe they cannot be helped, so you may have to do more.
- The best referral involves taking the person directly to someone who can help.
- The next best referral is getting a commitment from them to accept help, then making the arrangements to get that help.
- The third best referral is to give referral information and try to get a good faith commitment not to complete or attempt suicide. Any willingness to accept help at some time, even if in the future, is a good outcome.
- If the person refuses help, you may need to get others involved.
- While arranging for help, stay with the person

R Refer

- Get help immediately.
- Contact a mental health professional
- Call the **National Suicide Prevention Lifeline**
1-800-273-TALK (8255)
- Contact **Crisis Text Line**
741-741
- Call 911
- Get them to the nearest emergency room



ADDITIONAL SUICIDE PREVENTION RESOURCE

- American Association of Suicidology
 - www.suicidology.org
- American Foundation for Suicide Prevention
 - www.afsp.org
- JED Foundation
 - www.jedfoundation.org
- QPR Institute
 - www.qprinstitute.org
- Suicide Prevention Resource Center
 - www.sprc.org



HELPFUL APPS



<https://www.prevent-suicide.org.uk/find-help-now/stay-alive-app/>
(STAY ALIVE APP)



<https://www.talklife.co/>
(TALK LIFE APP)



<https://my3app.org/>
(MY3 APP)



https://www.thebetterappcompany.com/better_stop_suicide
(BETTER STOP SUICIDE APP)

<https://apps.apple.com/us/app/suicide-safety-plan/id1003891579>
(SUICIDE SAFETY PLAN APP)



For Effective QPR

- Join a Team. Offer to work with clergy, therapists, psychiatrists or whomever is going to provide the counseling or treatment.
- Follow up with a visit, a phone call or a card, and in whatever way feels comfortable to you, let the person know you care about what happens to them. Caring may save a life.
- Say: “I want you to live,” or “I’m on your side...we’ll get through this.”
- Get Others Involved. Ask the person who else might help. Family? Friends? Brothers? Sisters? Pastors? Priest? Rabbi? Bishop? Physician?

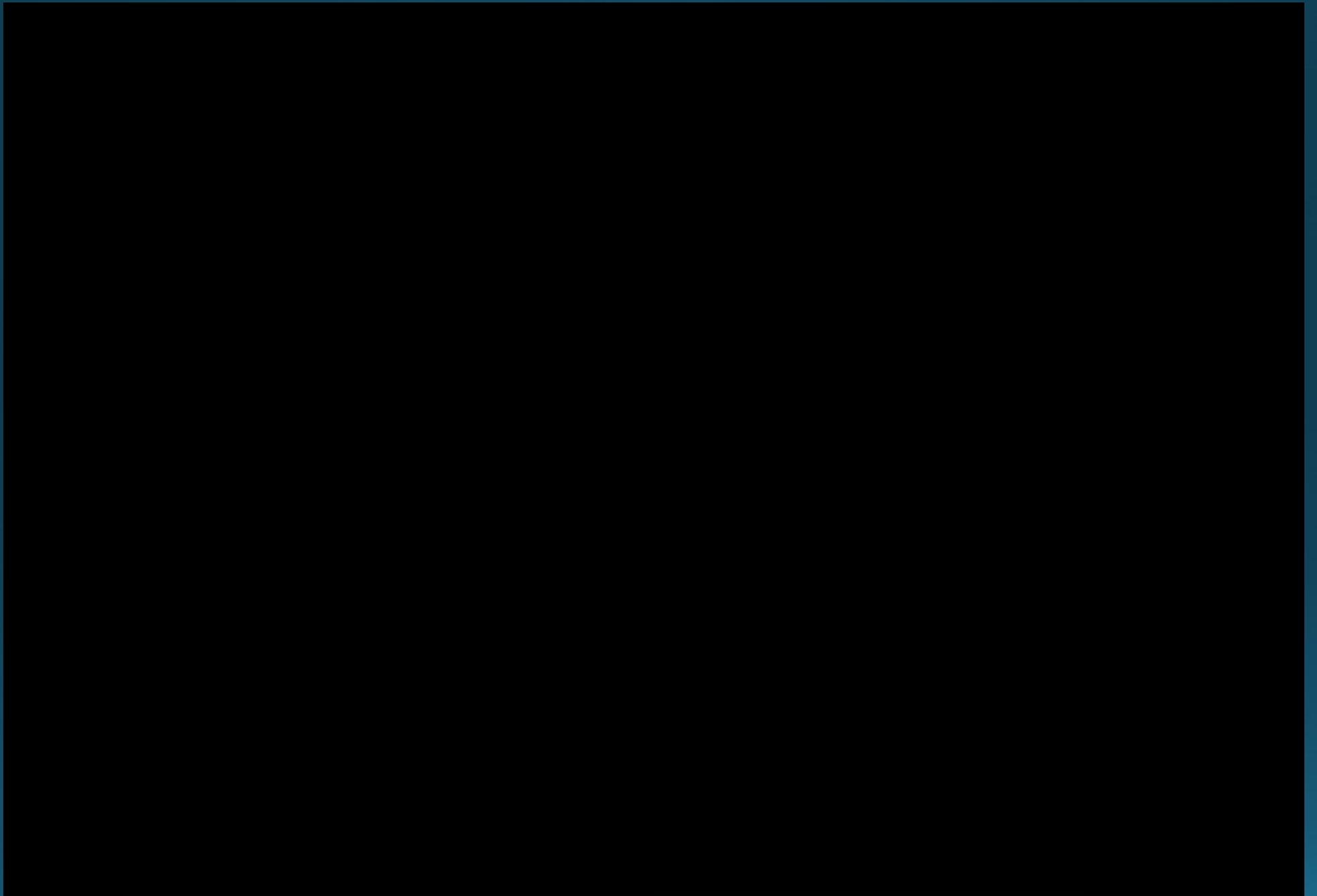
HELPFUL REMINDERS

- ; If the person seems unwilling to accept treatment, call the police or 911 if you feel that he or she is in immediate danger.
- ; Take precautions to consider your own personal safety. It is important not to put yourself in harm's way.
- ; Do NOT assume that the situation will take care of itself
- ; Suicidal crises do not last forever. Timely intervention can make a difference and save a life. Even if someone seems angry at you for helping, in the end they will be grateful for it.



Golden Gate Bridge







SERVICES

- ; QPR Gatekeeper Training (1-2 hour class)
- ; Survivor of Suicide Support Group (Lafayette)
- ; Student Presentations



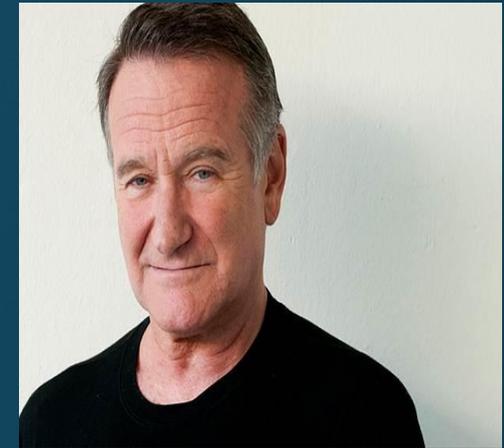
Jacob Crouch



Nigel Shelby



Kate Spade & Anthony Bourdain



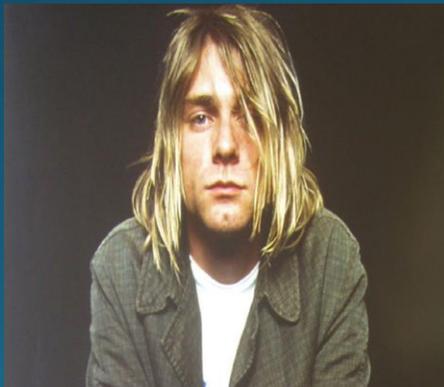
Robin Williams

OUR WORK ISN'T OVER;

Freeda Foreman



Kurt Cobain



Amy Bleul



Lee Thompson Young



Q & A Session

Post-Evaluation

You Always Have A Friend In Us.....

