

## The Herald Times

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### Q&A on suicide prevention coalition with Jean Scallon and Matt Oliver



Matt Oliver

Jean Scallon

*QUESTION: Moderator: Good morning everyone. Thanks for joining us today. We'll be discussing plans for a new suicide prevention coalition here in the area. Matt Oliver, regional director of clinic services at Centerstone & Jean Scallon, CEO of Meadows Bloomington Hospital, are here to answer questions. Please feel free to send in your own.*

*Matt and Jean, We appreciate you coming down to the newsroom to chat with our readers. Are you ready to get started?*

MATT OLIVER: Good to be here. Glad that we are able to offer the chat.

JEAN SCALLON: Yes. Let us know how we can help.

*QUESTION: I wish that a lot of people who had committed suicide would have had discussions on it. It is a topic worth talking to your kids about just like sex or violence. I'll donate to this charity in our area once it has began. What can we say to our youth about it how do you talk about an issue like this looking for answers to why and how to avoid it?*

SOLB, Btown

MATT OLIVER: Great. The support we will need from our community is key. The idea behind suicide prevention and in particular with the coalition is that we coordinate resources and let people know what is out there. It is nice that we have a lot of resources here in Bloomington but like a lot of other communities, folks may not be aware.

JEAN SCALLON: To get involved you can raise money and be involved on 10-10-10 at 10 in our local out of the darkness walk. To find out more log on to [www.outofthedarkness.org](http://www.outofthedarkness.org).

*QUESTION: What can we say to our youth about it how do you talk about an issue like this looking for answers to why and how to avoid it?*

SOLB, Btown

MATT OLIVER: One of our strategic partners w/ making connections for our youth has been to partner w/ the school corporation. Becky Rose has been our lead contact w/ the school corporation and was instrumental in helping to facilitate a day long workshop in May by Dr. Berry Walsh on high risk youth assessment in dealing with self-injurious behavior for teens. This has been a concern for teachers, law enforcement, and families as youth who engage in self injury are at elevated risk for suicide. The coalition was interested in bringing together stakeholders at a lunch break during the workshop so we could talk more about what we could be doing to look at suicide prevention, intervention, and post suicide support. We are really in the early stages of building the coalition but think we are off to a good start.

JEAN SCALLON: Never be reluctant to get involved. Always take the individuals intent to harm themselves seriously. Ask Why, don't ignore. Try to figure out what the trigger is/was. Seek help from clergy, schools, private therapists, local hospitals such as Bloomington hospital or Meadows Hospital, local mental health centers such as Centerstone. All have experts who can help. Many places offer free assessments to help point you in the helping direction. You can also log on to [www.jasonfoundation.com](http://www.jasonfoundation.com) for additional printable resources on how to talk with you child/adolescent.

*QUESTION: Tell me about the suicide coalition*

JW, Bloomington

MATT OLIVER: The coalition is a subcommittee to the Monroe County chapter of Mental Health of America. We have strove to bring together people from education, local government, health care, law enforcement, and advocacy groups to be able to look at needs at the community level as well as have a non-profit agency be able to assist us w/ respect to receiving donations and getting grants to help bring in resources and speakers. We are looking at strategies for having impact that are collaborative but really are looking at what key initiatives are will help the coalition be relevant. If we are not on the psychological radar of the community, at the time of suicide, it is simply too late. That said, we still want people to access the coalition for post suicide resources for support such as Ron Master's monthly survivor support group. So, our goal is to be prepared, integrated, and relevant.

JEAN SCALLON: We hope to really tie this in with our communities ACHIEVE initiative through policy development and community partnerships. Mental Health plays a big part in the overall health of our community and by bringing individuals together to reduce the stigma we can really focus in on all areas of health. Suicides in Indiana rank third next to Homicides then Injuries. We truly don't know the full impact because often times individuals don't want to talk about it or accept it.

*QUESTION: What resources are available in the community for those considering suicide?*

anon, Bloomington

MATT OLIVER: We are fortunate that there are actually a number of crisis lines for immediate assistance for those considering suicide. There are likely more but Bloomington Hospital, Meadows Hospital, Centerstone and IU offer crisis line services. There are always national hotlines such as the 1-800-273-TALK that use databases to assist in finding local resources.

I think that when people are considering suicide, they may be dealing with stress that has to do w/ a number of things such as housing, employment, loss of a loved one and so other resources besides mental health and substance use treatment may be helpful as well such as the housing authority, credit counseling, employment support agencies and so forth. Communities often have a number of social service agencies that are available it is just that when you are in a time of need, navigating can be difficult, especially if you are not feeling optimistic and are considering checking out. So, I often encourage people to call the hotlines at any rate because they can be a good resource for knowing about available resources and get people in touch w/ a live person in a hurry. The access to a helpful immediate person is critical.

*QUESTION: What causes a person to want to attempt or commit suicide?*

Joesph, Bloomington

MATT OLIVER: I think it really is a combination of things and that while there are a number of risk factors, usually when a person chooses to kill themselves, it is something they have been thinking about for a long time. So, it is important to ask people if they are considering suicide directly and respectfully if they are in fact considering suicide. We don't have to do this alone and often encouraging a person to talk to a crisis worker by phone can be very helpful. Most of the time, people really don't want to die. When they

do, it is usually when they may be facing distress from multiple directions and that they really don't feel that life will get any better. They feel trapped. When talking to individuals or families about suicide risk, it is helpful to know about a person's risk history and about what is going on right now and what is anticipated over the next couple of days. It is hard to predict who will and won't commit suicide, so it is important to take comments on suicidal thoughts seriously. The thing that we don't want to do is be submissive or over reactive as that tends to shut down communication. Even people who are not "trained" can be a big help in linking people to providers who can help get individuals appropriate treatment and support. Ideally, we want to help people get to a place of hope.

JEAN SCALLON: There are numerous causes as Matt mentioned in the previous response on resources in the community. Maybe someone has returned from their third tour in the military and hasn't developed the best coping skills. It could be divorce, illness, loss of job, home, etc... Many children/adolescents don't realize the finality of it and think they may just come right back like their video game or favorite show. Many people won't ask for help. There are many causes and the best way to prevent is to talk openly, take the threats seriously, watch for signs, and don't leave someone alone...get them help. Four out of five young people who attempt suicide have given clear warning signs. It is the third leading cause of death for ages 10-24 and the second leading cause of death for college age youth.

*QUESTION: What is the best way to support someone who has recently experienced the suicide of someone close to them? What are the wrong things to say?*

Suz, Bloomington

JEAN SCALLON: Be a good listener. Don't judge. Let them know what their options are for help and the resources available to them.

Be cautious in your response by taking cues from the one who is hurting. Sometimes it is better not to say anything but just let the individual talk. When responses are needed, keep them neutral and non-judgmental.

*QUESTION: Can we find a way to get suicide awareness in schools more? As someone who knows many people who have at least considered, if not tried, suicide, I think it'd be extremely beneficial to introduce suicide awareness into schools more than just the typical brochure in the guidance offices and such.*

Olivia D., Bloomington

MATT OLIVER: A recent stat from the 2009 Indiana Youth Risk Behavior System Report indicated that over 17% of Indiana high school students seriously considered suicide and over 9% actually attempted. The numbers for national averages are 13.8% and 6.3%, respectively. This is a relevant issue for Indiana and having more suicide awareness training options in schools, faith organizations, as well as other locations that work w/ at risk teens is critical and I see it as being a responsibility of the coalition to bring awareness to training deficits to try to get more training done in critical places of need.

I am told that currently Indiana does not directly fund suicide prevention initiatives and that the suicide prevention infrastructure depends heavily on federal grants that are then coordinated through groups like the Indiana Suicide Prevention Coalition. Centerstone has partnered with the ISPC and has been fortunate to get some local funding for SafeTALK trainings--SafeTALK is an evidenced based training protocol that targets helping people to simply be "suicide alert" and to help people be confident when they ask basic questions about suicide risk so people can be linked up w/ the right people for more formal assessment. We anticipate doing more of these and will work w/ community members to make sure there is a higher level of awareness for available trainings as we go forward.

JEAN SCALLON: Through Meadows Hospital we work with a non-profit foundation called Jason Foundation. It is free to the schools and offers a curriculum and training. It is designed for educators, school personnel, and youth workers. It is available in several formats; staff presented, interactive CD or

DVD, via internet access. There is also a Parent Resource Program. This program came about as a result of someone losing their son Jason Flatt. It also has resulted in the Jason Flatt Act which requires training on suicide prevention and intervention in schools for all teachers and principals.

We also hope, through the Monroe County Suicide Prevention and Intervention Coalition, a variety of resources through a comprehensive speakers bureau.

*QUESTION: Moderator: That's all the time we have for today's chat. Thanks for the questions on this important topic.*

*Matt and Jean: Thanks for being here and answering questions. Any closing comments?*

MATT OLIVER: Thanks again for the opportunity. This is an important issue and I am so appreciative that we have a community wherein stakeholders are excited about the possibility of a coalition and have made significant contributions and steps in making it a helpful reality.

JEAN SCALLON: Get involved, help reduce the stigma by speaking out, asking questions and making a difference. If you would like to get involved with the Coalition feel free to contact myself or Matt Oliver. Jean.Scallon@psysolutions.com or Matt.Oliver @centerstone.org. Be well.

<http://www.heraldtimesonline.com/stories/2010/09/07/news.878356.sto>