



QPR

Question, Persuade, Refer

QPR

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

Suicide Myths and Facts

Myth

- No one can stop a suicide, it is inevitable.
- Confronting a person about suicide will only make them angry and increase the risk of suicide.
- Only experts can prevent suicide.

Fact

- If people in a crisis get the help they need, they will probably never be suicidal again.
- Asking someone directly about suicidal intent lowers anxiety, opens up communication and lowers the risk of an impulsive act.
- Suicide prevention is everybody's business, and anyone can help prevent the tragedy of suicide

Suicide Myths and Facts

Myth

- Suicidal people keep their plans to themselves.
- Those who talk about suicide don't do it.
- Once a person decides to complete suicide, there is nothing anyone can do to stop them.

Fact

- Most suicidal people communicate their intent sometime during the week preceding their attempt.
- People who talk about suicide may try, or even complete, an act of self-destruction.
- Suicide is the most preventable kind of death, and almost any positive action may save a life.

2014 **42,773**

2012 **40,600**

2011 **39,518**

2010 **38,364**

2009 **36,909**

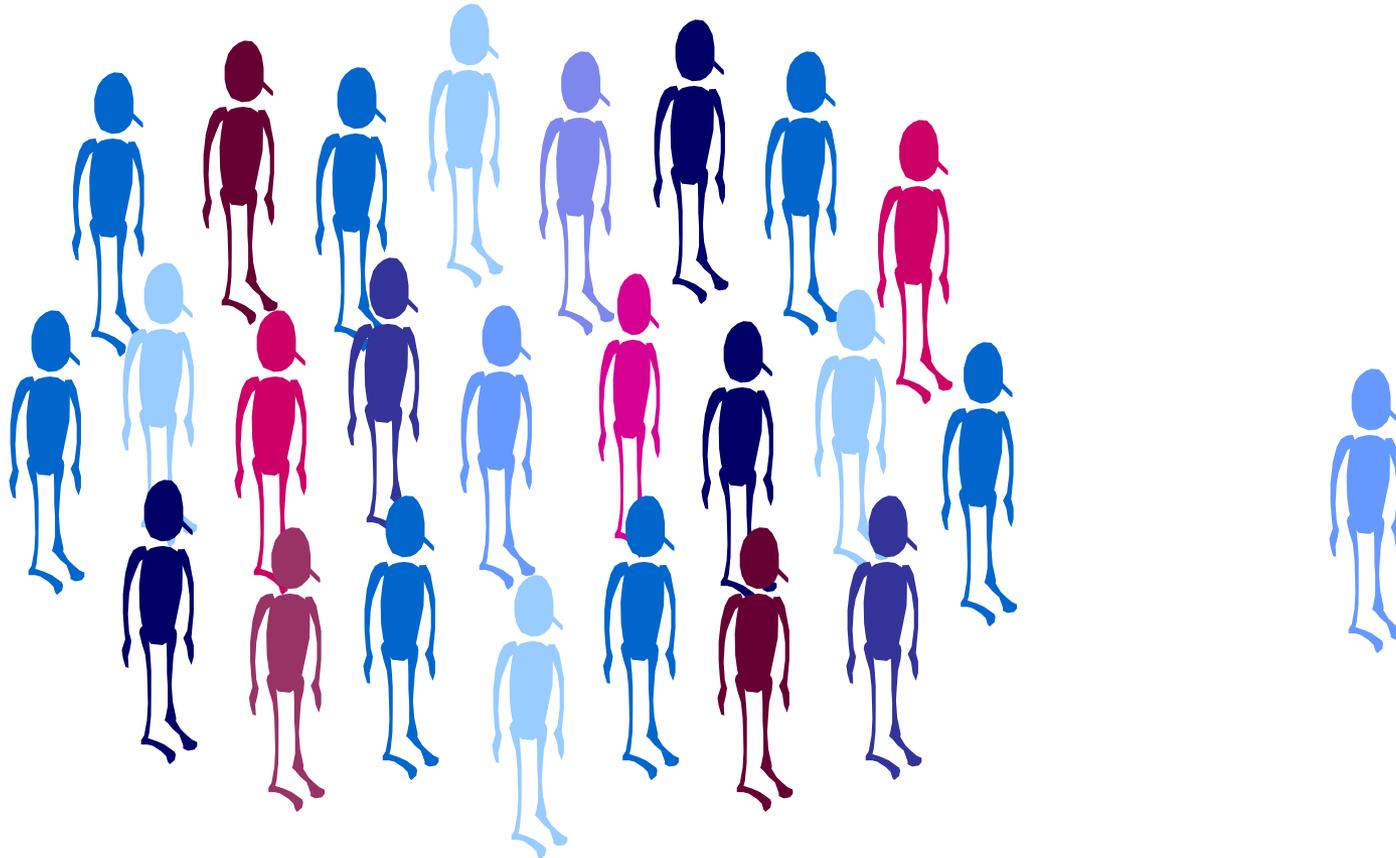
2008 **36,065**

2007 **34,598**

2006 **33,300**

attributed to suicide in the U.S.

Estimates on attempted suicide



25 attempts for each documented death

(Note: 40,000 suicides translates into 1,000,000 attempts annually)

Suicide Clues And Warning Signs

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

Direct Verbal Clues

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

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.”
- “Soon you won’t have to worry about me.”

Behavioral Clues

- A previous suicide attempt
- Acquiring a gun or stockpiling pills
- Co-occurring depression, moodiness, hopelessness, unexplained anger
- Putting personal affairs in order
- Giving away prized possessions
- Sudden interest or disinterest in religion
- Drug or alcohol abuse, or relapse after a period of recovery
- Sudden mood lift or unexplained peacefulness

Situational Clues

- Being fired or being expelled from school
- A recent unwanted move
- Loss of any major relationship
- Death of a spouse, child, or best friend, especially if by suicide
- Diagnosis of a serious or terminal illness

Situational Clues

- Sudden unexpected loss of freedom/fear of punishment
- Anticipated loss of financial security
- Loss of a cherished therapist, counselor or teacher
- Fear of becoming a burden to others

Tips for Asking the Suicide Question

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

Q: Question

Less Direct Approach:

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

Q: Question

Direct Approach:

- “When people are this sad they sometimes wish they were dead. I’m wondering if you’re feeling that way, too?”
- “I’m worried about you and, 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.

How *Not* to Ask the Question

“You’re not suicidal, are you?”

“You wouldn’t do anything stupid
would you?”

P: Persuade

HOW TO PERSUADE SOMEONE TO STAY ALIVE

- LISTEN to them and give them your full attention
- Do not argue, judge, give advice or tell them they have so much to live for
- Tell them you are sorry things are so hard
- Offer 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**

P: Persuade

What if they say, “No, I don’t think I need help. I’m OK now that we talked.” *But, you don’t believe them?*

Tell them, “I don’t know if you need more help either. I’m not a mental health professional. Let’s talk to someone who is.”

R: Refer

- Have resources handy
- When to call 911?
- County crisis team assessment
- Include the individual in the decision if possible
- Do not leave them alone

R: Refer

- Get Others Involved
- Ask the person who else might help
- Call their therapist, doctor, family, friend, a leader or member of their faith community
- 1-800-273-TALK (8255) 24/7
- Don't try to do this alone

Remember

Since almost all efforts to persuade someone to live instead of attempt suicide will be met with agreement and relief, don't hesitate to get involved or take the lead

For Effective QPR

- Say: “I want you to live,” or “I’m on your side...we’ll get through this.”
- Follow up with visits, phone calls and cards
- Treat this as you would any other illness

Reducing a Suicidal Person's Access to Firearms – Bonus Module

The QPR Institute wishes to thank Elaine Frank and Cathy Barber of Dartmouth and Harvard training program.

What you are about learn is an approved derivative program from Counseling Access to Lethal Means (CALM) - an AFSP/SPRC Registered Best Practice training program.

Traditionally, suicide prevention has focused on “why” people attempt suicide



We are beginning to understand that “how” people attempt suicide plays a crucial role



Sri Lanka & Pesticides

- Pesticides are the leading suicide method in Sri Lanka
- Restrictions were placed on sales of the most highly human-toxic pesticides in the mid to late 1990s
- Suicide rates dropped 50% from 1996 to 2005
- Nonfatal poisonings and suicide by other methods did not drop



UK & Domestic Gas

- Before 1960, domestic gas was the leading method of suicide in the United Kingdom
- By 1970, almost all domestic gas in the UK was non-toxic
- Suicide rates dropped by nearly a third
- The drop was driven by a drop in gas suicides; non-gas suicides increased slightly



Why Means Matter

- Suicidal crises are often relatively brief
- Suicide attempts are often undertaken quickly with little planning
- Some suicide methods are far more deadly than others (“case fatality” ranges from 1% for some methods to 85-90% for the most deadly)
- 90% of those who survive even nearly-lethal attempts do not go on to later die by suicide

Focus on Firearms

- Firearms are the leading suicide method in the U.S.
- Gun owners and their families are at about 3 times higher risk of suicide than non-gun owners
- This isn't because they're more suicidal. Gun owners are NO more likely to have a mental illness, to think about suicide, or to attempt suicide
- Rather, they're simply more likely to die in a suicide attempt

Reducing Access

- A simple step to increase a suicidal person's safety is to reduce access to firearms at home
- Many counselors and providers and family members of at-risk people don't think to do this
- This temporary safety intervention is not anti-gun

Making a Difference

- Family and friends can protect a suicidal person by temporarily storing all firearms away from home
 - Have a trusted person outside the home hold onto them until the situation improves
 - Some storage facilities, police departments, gun clubs, and gun shops will store guns
- If off-site storage isn't an option:
 - Use gun locks and gun safes
 - Keep ammunition out of the home or locked separately
 - Or remove a key component of the guns, e.g., the bolt

To keep him safe...

... when, as a young man, Abraham Lincoln was depressed and suicidal, a friend said of him, “Lincoln told me that he felt like committing suicide often.” Seeing suicide warning signs, Lincoln’s neighbors mobilized to keep him safe, watching over him, and removing his knives and pistol. They pulled together the same kind of safety net QPR gatekeepers can build today – and which included making sure our President did not have access to the means of suicide.

It was said that when he again became depressed later in life he “dared not carry even a pocket knife...”

For More Information

QPR website: www.qprinstitute.com

Means Matter website: www.meansmatter.org

Suicide Hotline: 1-800-273-TALK (8255)

**This workshop is made possible by a grant from the
Minnesota Department of Health**

What We Do

- Education classes, booklets and fact sheets
- Suicide prevention
- Support groups, Helpline
- Public awareness presentations
- Legislative advocacy
- NAMIWalks

Support NAMI Minnesota

- Advocate for a better Mental Health System
- Attend an event
- Sign up for a newsletter
- Join an affiliate
- Be a sponsor
- Volunteer
- Become a donor

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September 2016