QPR

Ask A Question, Save A Life
QPR

Question, Persuade, Refer
QPR

A Story About a Bridge
<table>
<thead>
<tr>
<th>Year</th>
<th>Number</th>
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<tbody>
<tr>
<td>2008</td>
<td>36,065</td>
</tr>
<tr>
<td>2009</td>
<td>36,909</td>
</tr>
<tr>
<td>2010</td>
<td>38,364</td>
</tr>
<tr>
<td>2011</td>
<td>39,518</td>
</tr>
<tr>
<td>2012</td>
<td>30,600</td>
</tr>
<tr>
<td>2013</td>
<td>41,149</td>
</tr>
<tr>
<td>2014</td>
<td>42,773</td>
</tr>
<tr>
<td>2015</td>
<td>44,193</td>
</tr>
<tr>
<td>2016</td>
<td>44,965</td>
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45,000 deaths annually attributed to suicide
Timing of USA suicides

1 suicide every 12 minutes

OR

123 suicides every day
Estimates on attempted suicide

25 attempts for each documented death

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

Inclusive of blood relatives, Julie Cerel at U of KY has reported the following additional impacts from a single death by suicide:

- 115 are exposed
- 53 have short term disruption in life
- 25 have a major life disruption
- 11 have devastating effects on their life

Impacts especially severe in small, tight-knit communities.
The ratio of 11 people experiencing devastating effects per suicide means there are:

11 new people experiencing devastation every 12 minutes

OR

1332 every day
Ohio ranks 35\textsuperscript{th} in the nation for suicide deaths but is 5\textsuperscript{th} in the nation for total number of suicides.

For every one homicide in Ohio there is two suicides.

Males account for 79\% of Ohio suicides, and male rates are 4 times greater than female rates.

Youth Risk Behavior for high school students in Cuyahoga County showed 31\% of teens reported feeling sad and hopeless.

In the same survey, 17\% reported considering suicide, and 11\% reported attempting suicide in past year.
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

<table>
<thead>
<tr>
<th>Myth</th>
<th>Fact</th>
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</thead>
<tbody>
<tr>
<td>No one can stop a suicide, it is inevitable.</td>
<td>If people in a crisis get the help they need, they will probably never be suicidal again.</td>
</tr>
<tr>
<td>Confronting a person about suicide will only make them angry and increase the risk of suicide.</td>
<td>Asking someone directly about suicidal intent lowers anxiety, opens up communication and lowers the risk of an impulsive act.</td>
</tr>
<tr>
<td>Only experts can prevent suicide.</td>
<td>Suicide prevention is everybody’s business, and anyone can help prevent the tragedy of suicide.</td>
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</table>
# Myths And Facts About Suicide

<table>
<thead>
<tr>
<th>Myth</th>
<th>Fact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suicidal people keep their plans to themselves.</td>
<td>Most suicidal people communicate their intent sometime during the week preceding their attempt.</td>
</tr>
<tr>
<td>Those who talk about suicide don’t do it.</td>
<td>People who talk about suicide may try, or even complete, an act of self-destruction.</td>
</tr>
<tr>
<td>Once a person decides to complete suicide, there is nothing anyone can do to stop them.</td>
<td>Suicide is the most preventable kind of death, and almost any positive action may save a life.</td>
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How can I help? Ask the Question...
Myths And Facts About Suicide

**Myth**  If a suicidal youth tells a friend, the friend will tell an adult.

**Fact**  Most suicidal young people do not tell an adult.

**Good Friends Don’t Keep Deadly Secrets**

**How can I help?**  Ask the Question...
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 commit suicide.”

“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.”

“Pretty soon you won’t have to worry about me.”
Behavioral Clues:

Any previous suicide attempt
Acquiring a gun or stockpiling pills
Co-occurring depression, moodiness, hopelessness
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
Unexplained anger, aggression and irritability
QPR

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
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
The Many Paths to Suicide

**Fundamental Risk Factors**
- Genetic Load
- Sex
- Race
- Age

**Personal/Psychological**
- Child Abuse
- Loss of Parent
- Culture Shock/Shift
- Values Religion Beliefs
- Drugs or Alcohol

**Environmental**
- Season of year
- Urban vs. Rural
- Model for Suicide

**Proximal Risk Factors**
- Crisis in Relation
- Loss of Freedom
- Fired/Expelled
- Illness
- Major Loss

**Cause of Death**
- Poison
- Gun
- Hanging
- Autocide
- Jumping

- All “Causes” are real.
- Hopelessness is the common pathway.
- Break the chain anywhere = prevention.
**QPR**

*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; 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
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?”
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?”

“You look pretty miserable, 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 Suicide Question

“You’re not suicidal, are you?”
How Not to Ask the Suicide Question

“You’re not thinking about suicide, are you?

Or

“You’re just kidding about killing yourself, right?
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 hope in any form
Then Ask:

Will you go with me to get help?”

“Will you let me help you get help?”

“Will you promise me not to kill yourself until we’ve found some help?”

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

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.
REMEMBER

WHEN YOU APPLY QPR, YOU PLANT THE SEEDS OF HOPE. HOPE HELPS PREVENT SUICIDE.
Helpful phone numbers

Suicide Prevention Hotline
1-800-TALK (8255)

Ohio Suicide Prevention Foundation
614-429-1528  www.ohiospf.org

Mobile Crisis Team
216-623-6888  www.FrontLineService.org

Recovery Resources
216-431-4131  www.recres.org
How 1 person CAN make a difference

2 -3 years old - His infant brother, Thomas died.

9 yrs old – Great Aunt, Uncle and Mother died of “milk Sickness” all within a two week period.

After his mother’s death he was raised by his sister, Sarah.

19 years old – His sister Sarah dies

26 years old – His best friend died.
How 1 person CAN make a difference

31 years old – Experienced 6 months of serious depression.

Friends were so concerned that they “removed al razors, knives, pistols, etc. from his room and presence” because they feared he would commit suicide.

He described himself as: “the most miserable man living ... to remain as I am is impossible; I must die or get better.”
How 1 person CAN make a difference

He had a friend, Joshua Speed, who remained with him constantly during this time. Joshua spent six months with him before the crisis passed.

After this time he still had many struggles in his life including the death of one of his sons, but there is no indication that he ever suffered to that degree of depression again or had any other bouts with suicidality.
Abraham Lincoln was the 16th president of the United States. He preserved the Union during the U.S. Civil War and brought about the emancipation of slaves.