



HELPING HANDS



September is Suicide Awareness Month

(excerpts from NAMI.org/help)



Suicidal thoughts, much like mental health conditions, can affect anyone regardless of age, gender, or background. In fact, suicide is often the result of an untreated mental health condition. Suicidal thoughts, although common, should not be considered normal and often indicate more serious issues.

September is Suicide Prevention Month — a time to raise awareness of this stigmatized, and often taboo, topic. We use this month to shift public perception, spread hope and share vital information to people affected by suicide. Our goal is ensuring that individuals, friends, and families have access to the resources they need to discuss suicide prevention and to seek help.

What are the Risk Factors?

- Age. Suicide is the 2nd leading cause of death for people aged 10-34
- A family history of suicide
- A history of trauma or abuse
- Gender. Although more women than men attempt suicide, men are nearly 4x more likely to die by suicide
- Intoxication. More than 1 in 3 people who die by suicide are found to be under the influence of alcohol
- A serious or chronic medical illness
- Prolonged stress
- A recent tragedy or loss
- Access to firearms
- Substance misuse or overuse. Drugs and alcohol can result in mental highs and lows that exacerbate suicidal thoughts
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If you're in crisis, call, or text the Suicide and Crisis Lifeline at 988, available 24/7
Or visit, nami.org/help

Your local EAP Representative is a good resource for information. Please refer to the placard below for their contact information.



How to Support Someone

When a suicide-related crisis occurs, friends and family are often caught off-guard, unprepared, and unsure of what to do. The behaviors of a person experiencing a crisis can be unpredictable, often changing dramatically without warning.

Supporting Someone in a Crisis

- Talk openly and honestly. Don't be afraid to ask questions such as, "Have you had thoughts of ending your life?"
- Calmly ask simple and direct questions such as, "Can I help you call your psychiatrist?"
- If there are multiple people around, have one person speak at a time
- Express support and concern
- Remove means such as guns, knives, or stockpiled pills
- Don't argue, threaten, or raise your voice
- Don't debate whether suicide is right or wrong
- If you are nervous, try not to fidget or pace



Warning Signs:

Comments or thoughts about suicide - also known as suicidal ideation – can begin small like "I wish I wasn't here" or "nothing matters." But over time, they can become more explicit and dangerous. Knowing the risk factors and warning signs can assist you in finding help for yourself, a loved one, or a friend. Warning signs can also include increased alcohol and drug use, aggressive behavior, withdrawal from friends, family and community, dramatic mood swings, and impulsive or reckless behavior.

The heart and soul of the District 141 Employee Assistance Program is the local lodge EAP peer coordinator. These dedicated men and women volunteer their personal time to assist union members and their families who are experiencing personal difficulties. EAP peers do not make clinical diagnoses or clinical evaluations; however, they are trained to get an idea of your situation and refer you to an appropriate resource for a more detailed evaluation. EAP peers will follow up to ensure you have been able to access services that address the difficulty you were experiencing.



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Employee Assistance Program
Regional Representative:

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Suicide Resources (from NIMH.NIH.gov)

Tips for Talking With a Health Care Provider About Your Mental Health



Talk to a primary care provider



Prepare ahead of your visit



Consider bringing a friend or relative



Be honest



Ask questions



National Institute of Mental Health

nimh.nih.gov/talkingtips

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