



South West London and
St George's Mental Health

NHS Trust

A photograph of a woman wearing a wide-brimmed hat and a man in a wheelchair sitting on a wooden bench outdoors. They are both looking towards the right. The background is a lush green field with trees. The image is partially covered by a large green graphic element that contains the title.

Suicide Prevention

Patient information

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This leaflet is for people who want to know more about suicide - so they can help someone they are concerned about if needed.

Reaching out to someone who is feeling suicidal

Every year, over 800,000 people die from suicide; this roughly corresponds to one death every 40 seconds. The number of lives lost each year due to suicide exceeds the number of deaths due to homicide and war combined.

There is no doubting it is a serious public health issue and the effects impact thousands of families every day. This leaflet is designed to explore some of the myths about suicide and offer advice about how you could help someone you are concerned about – a friend, neighbour, work colleague or even a stranger.

Myths about suicide

Myth: People who talk about suicide or who have made previous attempts aren't serious or are attention-seeking and won't actually do it.

Fact: People who have made previous attempts are at much higher risk of dying from suicide than the rest of the population. A person might talk about suicide as a way of getting the attention they need, but it is still important that someone who talks about their suicidal feelings is listened and responded to.

Myth: You have to be mentally ill to think about suicide.

Fact: Many people have thought of suicide from time. Not all people who die by suicide have diagnosed mental health problems at the time of death. However, research indicates that people with conditions such as schizophrenia, depression or a personality disorder are at a greater risk.



Myth: People who are suicidal are weak.

Fact: This just isn't true. Whether or not a situation is tolerable may differ from person to person. What one person may be able to endure, may not be bearable to someone else and what is manageable at one point in time may not be so at another time.

Myth: Talking about suicide puts the idea into someone's head.

Fact: There is no evidence that asking a person about suicidal feelings increases the risk that they will harm themselves. In fact, it is often a relief for the distressed person to be able to share their thoughts with someone who will listen and try to understand. People who have felt suicidal will often say what a huge relief it is to be able to talk about what they are experiencing.

Myth: People who are suicidal want to die.

Fact: The vast majority of people who feel suicidal do not want to die; it can just be a response when the feelings become so overwhelming that the person can see no other way to cope with the problem. They don't want to die - it is just that the pain exceeds their current resources for coping with that pain.

Myth: If a person is serious about killing themselves, then there is nothing anyone can do.

Fact: Suicide can be prevented and suicidal feelings can be temporary. This is why getting the right kind of support at the right time is so important.


"I felt trapped inside my head. Whatever I did, nothing changed how I felt. I was so tired, so tired of fighting. I thought to myself that if this was how my life was going to be, I'd be better off ending it and then later that day by chance I met my old Head Teacher someone who I respected and she could see I was distressed. She reminded me of some of the important things that I had achieved and that I can do more of this in my life; that gave me so much hope."

What are the warning signs that someone may be at risk from suicide?

Not everyone who thinks about suicide will tell someone and there are some people who give no indication at all of their intention. However, there may be some warning signs to look out for.

These include, if a person:

- has to tried to end their life before
- has other people in their family who have died by suicide
- has started doing things that seem to indicate they are planning for a big change; for example they may suddenly start to put their things in order, such as writing a will, sorting out personal possessions or attending to unfinished business
- is expressing ideas that you, other family members, friends, partners or children would be better off without them
- has recently expressed thoughts about the burden they feel they are placing on those close to them or talking about feelings of guilt
- has specific plans about how they would end their life
- has access to a way to end their life
- has experienced conflict, disaster or abuse, or a recent relationship breakdown, bereavement, loss of job or other family difficulties
- is under the influence of, or affected by drug or alcohol misuse
- is on prescription medication for a physical or mental health condition or has chronic pain.



What can I do to help someone who is suicidal?

Create opportunities to talk and listen

Most people find it uncomfortable to discuss death, suicide or even someone's emotions and it is natural to feel worried or concerned if someone tries to discuss these issues with you. Nevertheless, it is important to try not to reject the person's approaches and remain calm to avoid increasing the person's feelings of guilt or shame.

You don't have to be an expert to support someone who is feeling suicidal; the simple act of listening without judgement can be very powerful, indeed. You may not be able to find the answers so concentrate on listening to them rather than seeking solutions or offering advice, although you may be able to reassure them that they will not feel this way forever.

"It's hard to know what to say when you are feeling suicidal. I didn't want to burden others and couldn't find the words to describe how I felt but wanted someone to listen and understand as I felt so afraid and alone."

You could also try...

- talking directly to the person instead of sending an email or texting
- asking how their weekend was and really listening when they tell you
- stopping and gently asking someone who looks distressed (if it is safe to do so)
- giving a colleague a lift to work or sharing the journey home with them

Ask questions or make enquiries

Just asking questions has the potential to have an amazing impact on the individual and will give them the opportunity to respond and help them to feel heard and understood.

You could try

- How you are today, are you ok? You look a bit down to me?
- Shall we go somewhere to talk?
- I've noticed that you haven't been yourself these last few weeks.
- Thanks for telling me. No, you are not a burden and what you are saying makes sense to me.
- I can understand now how bad things are for you at the moment.
- What would help you right now do you think?

Remember, it is a myth that asking the person if they are suicidal will put the idea into their mind; if you are concerned that someone might cause harm to themselves, asking more direct questions about their safety is the right thing to do.

You could say

- Have you any thoughts of wanting to hurt yourself right now?
- Do you feel safe? Have you had thoughts about wanting to end your life?
- Have you been thinking about ending your life?

Remember you don't have to be a mental health professional to help someone who is feeling suicidal

"The person who helped me the most listened and did not judge me. She didn't overwhelm me with advice or tell me to pull myself together. She simply listened and kept telling me that she believed in my strength even though I didn't and reminded me that how I felt would pass"



Helping someone seek professional help as soon as possible

In an emergency

Think about what is the safest thing to do and if it is not safe to leave the person on their own, it is important that you tell someone.

- If you believe the person is at immediate risk of serious harm, **dial 999** and ask for the police or ambulance. In this case, do not leave the person alone.
- If you are unsure, **call NHS 111 (NHS Direct)** – open 24 hours a day, 365 days a year.

If the situation isn't an emergency, but is still concerning:

Encourage the person to seek support from other people around them and help them to do so if you can; contact a close friend, family member or their GP or mental health professional if they have one.

Alternatively provide them with a support line number.

Samaritans

A 24-hour-a-day service offering confidential and emotional support

Tel: 08457 909090

Freephone: 116123

Email: jo@samaritans.org

Website: www.samaritans.org

Saneline

Helpline for people affected by mental illness, open 6 -11pm

Tel: 0845 767 8000

Website: www.sane.org.uk

CALM (Campaign Against Living Miserably)

Helpline for men aged 15 to 35, open 5pm to midnight

Tel: 0808 802 5858

Website: www.thecalmzone.net

Maytree

Offers a sanctuary in London where people can stay a few nights

Tel: 020 7263 7070

Website: www.maytree.org.uk

PAPYRUS (prevention of young suicide)

Helpline open Mon – Fri 10am-5pm & 7-10pm, and 2-5pm on weekends

Tel: 0800 068 4141

Website: www.papyrus-uk.org


Get help and support for yourself

Supporting someone who is expressing suicidal feelings can be emotionally and physically exhausting.

Besides ensuring you are able to take a break from providing emotional support, you could talk to:

- A trusted friend, partner, family member or work colleague
- Your own GP
- You could ring one of the support lines listed above.

If you have been bereaved through suicide, there is a dedicated National Helpline, **0300 111 5065**, open from 9am to 9pm every day provided by Survivors of Bereavement by Suicide **www.uk-sobs.org.uk**



Finding someone to support you will ensure you protect your own wellbeing as well as putting you in the best position to carry on providing support, if that is what you want to do. If the support you are providing develops into something more regular and ongoing, you could register with your local Carers Centre, where they can talk you through various local options of support available to you.

There is a dedicated support service in each of the Boroughs of Kingston, Merton, Richmond, Sutton and Wandsworth. Contact details and further information, can be found at www.carers.org

You can also find information about support available to carers on our website, including support in a crisis. www.swlstg-tr.nhs.uk

Thank you for taking the time to read this leaflet. It is important to remember you cannot be responsible for another person's actions. But you can offer to help by simply listening, staying calm and trying to be supportive - and often these simple steps can be enough to save a life.

To find out more about how one person made a difference to someone who was feeling suicidal, please go to:

<https://www.youtube.com/watch?v=8JUPQVYpBME>

What you do and say can make a difference

“Never give up for this is just the place and time for the tide to turn” Harriet Beecher Stowe

Contacting the Trust

✉ Trust Headquarters, Springfield University Hospital
Building 15, 2nd Floor, South West London and St George's
Mental Health NHS Trust, Springfield University Hospital,
61 Glenburnie Road, London SW17 7DJ

☎ **020 3513 5000**

In an emergency

- **Mental Health Support Line: 0800 028 8000**
(for existing patients of the Trust)
5pm to 9am Monday to Friday, 24 hours Saturday and Sunday.

If you are worried about your immediate safety or have thoughts about hurting yourself or other people:

- **Call 999** for emergency services or go to your nearest Accident and Emergency (A&E) department.
- If you are not currently a patient of ours you should speak to your GP (family doctor).
- You can also contact the **Samaritans 08457 90 90 90** (they're there to listen).

Disclaimer

We make every effort to ensure that the information we provide is accurate and up to date but it should not be relied upon as a substitute for specialist professional advice tailored to your situation. So far as is permitted by law, South West London and St George's Mental Health NHS Trust does not accept liability in relation to the use of any information contained in this publication, or third-party information or websites included or referred to in it.

Sources

For a full list of the sources we used:

Tel: **020 3513 6006** Email: communications@swlstg-tr.nhs.uk

