Handling a Suicidal Caller

"Suicide is not chosen; it happens when pain exceeds the resources for coping with pain."

- 1. **Be yourself**. "The right words" are unimportant. If you are concerned, your voice and manner will show it.
- 2. Listen. Let the person unload despair, ventilate anger. If given an opportunity to do this, he or she will feel better by the end of the call. No matter how negative the call seems, the fact that it exists is a positive sign, a cry for help.
- 3. **Be sympathetic, non-judgmental, patient, calm, accepting**. The caller has done the right thing by getting in touch with another person.
- 4. If the caller is saying "I'm so depressed, I can't go on," ask **The Question:** <u>"Are you having</u> <u>thoughts of suicide?"</u> You are not putting ideas in his head, you are doing a good thing for him. You are showing him that you are concerned, that you take him seriously, that it is OK for him to share his pain with you.
- 5. If the answer is yes, you can begin asking a series of further questions: <u>Have you thought about how you would do it?</u> (PLAN); <u>Have you got what you need?</u> (MEANS); <u>Have you thought about when you would do it?</u> (TIME SET). 95% of all suicidal callers will answer no at some point in this series or indicate that the time is set for some date in the future.
- 6. Simply talking about their problems for a length of time will give suicidal people relief from loneliness and pent up feelings, awareness that another person cares, and a feeling of being understood. They also get tired -- their body chemistry changes. These things take the edge off their agitated state and help them get through a bad night.
- 7. Avoid arguments, problem solving, advice giving, quick referrals, belittling and making the caller feel that has to justify his suicidal feelings. It is not how bad the problem is, but how badly it's hurting the person who has it.
- 8. If the person is ingesting drugs, get the details (what, how much, alcohol, other medications, last meal, general health) and call Poison Control at 1-800-525-5042. Another person can call while you continue to talk to the person, or you can get the caller's permission and do it yourself on another phone while the caller listens to your side of the conversation. If Poison Control recommends immediate medical assistance, ask if the caller has a nearby relative, friend, or neighbor who can assist with transportation or the ambulance. In a few cases the person will initially refuse needed medical assistance. Remember that the call is still a cry for help and stay with him in a sympathetic and non-judgmental way. Ask for his address and phone number in case he changes his mind. (Call the number to make sure it's busy.) If your organization does not trace calls, be sure to tell him that.
- 9. Your caller may be concerned about someone else who is suicidal. Just listen, reassure him that he is doing the right thing by taking the situation seriously, and sympathize with his stressful situation. With some support, many third parties will work out reasonable courses of action on their own. In the rare case where the third party is really a first party, just listening will enable you to move toward his problems. You can ask, "Have you ever been in a situation where you had thoughts of suicide?"
- 10. If the person is resistant to help and presents as being at imminent risk of suicide, have another person call 911 with any information that you have about the caller (name, location, etc.). Do not notify the caller that you are contacting authorities and remain on the line until the authorities arrive or another party arrives that will agree to get the person to medical assistance. Remember that the call is still a cry for help and stay with him in a sympathetic and non-judgmental way. Ask for his address and phone number in case he changes his mind.
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