

# Inward-Focused Emotions: Suicide

## Chapter 27

# Learning Objectives

## Lesson 27.1: Inward-Focused Emotions: Suicide

(Slide 1 of 2)

1. Explain the range of self-protective behavioral responses.
2. Discuss three myths about suicidal behaviors.
3. Identify two cultural or social factors that relate to suicide.
4. Examine four categories of motivation for attempting suicide.
5. Explain how suicide affects family members and friends.

# Learning Objectives

## Lesson 27.1: Inward-Focused Emotions: Suicide

(Slide 2 of 2)

- 6. Describe three theories that attempt to explain the causes of suicide.
- 7. Discuss the occurrence of suicide throughout the life cycle.
- 8. Outline the process for assessing the suicidal potential of a client.
- 9. Choose three therapeutic goals and interventions for clients with suicidal behaviors.

# Continuum of Behavioral Responses

(Slide 1 of 2)

- Maladaptive self-protective responses, if not changed, eventually can lead to self-destruction
  - Self-destructive behaviors are classified as direct or indirect
    - Direct self-destructive behaviors
      - Any form of active suicidal behavior, such as threats, gestures, or attempts to end one's life
    - Indirect self-destructive behaviors
      - Any behaviors or actions that may result in harm to the individual's well-being or death

# Continuum of Behavioral Responses

(Slide 2 of 2)

- Myths about suicide

- Suicide has always been present in society, but little effort was made to understand its nature until the beginning of the twentieth century
- Many false ideas about suicide exist
  - People who talk about it will not commit suicide
  - One does not need to take a suicide threat seriously
  - Only psychotic or depressed people commit suicide

# Impact of Suicide on Society

(Slide 1 of 3)

- Tenth leading cause of death in the United States
- Second leading cause of death among people between 10 and 34 years of age
- Twenty percent of all suicides occur in white men older than 65 years of age
- It is important for nurses and other health care providers to be well versed in recognizing and intervening with clients who are suicidal

# Impact of Suicide on Society

(Slide 2 of 3)

- Cultural factors

- Culture usually includes a view of suicide

- Laws

- Customs

- Beliefs

- Values

- Norms

- Customs and rituals may play a role in suicide

# Impact of Suicide on Society

(Slide 3 of 3)

## ● Social factors

- Many social influences affect the incidence of suicide
  - Social isolation
  - Inability to meet basic needs
  - Availability of weapons
  - One's state of health
  - People who have HIV and AIDS
- Be aware of social changes in this world as they may offer clues to caring for clients who are thinking of ending their lives



# Dynamics of Suicide

(Slide 1 of 2)

## ● Characteristics of suicide

### ➤ Physical dimension

- Thoughts of suicide produce many of the same biochemical changes in the body as are produced by depression

### ➤ Emotional dimension

- Clients are filled with feelings of ambivalence, anger, aggression, guilt, helplessness, and hopelessness

### ➤ Intellectual dimension

- Intense emotional suffering leads to distorted thinking and self-defeating thoughts

### ➤ Social dimension

- Includes one's views of others

### ➤ Spiritual dimension

- Cultural, religious, and ethical dilemmas associated with one's own demise

# Dynamics of Suicide

(Slide 2 of 2)

- Categories of motivation

- Suicide victims share two major viewpoints
  - Deep despair, poor self-esteem, and feelings of being trapped
  - Relief from the miseries of this life and the need to connect with immortality
- A cry for help
- Refusal to accept a diminished quality, style, or pace of life
- Need to affirm one's soul
- Relief from distress
- Preoccupation with suicide

# Effects of Suicide on Others

- Suicide has a strong effect on those left behind
  - Survivor guilt
    - Survivors often think that they could have done something to prevent the suicide
    - Anger may be expressed
    - Socially, the stigma of suicide is felt
- The survivors of suicide, no matter who they are, must grieve and learn to heal

# Theories About Suicide

- Psychoanalytical theory
- Sociologic theory
- Interpersonal theory
- New biological evidence
- Anxiety and depression are often the forerunners of suicidal thoughts

# Suicide Throughout the Life Cycle

(Slide 1 of 4)

- Suicide and children

- Suicide in children is most often the result of family conflict or disruption
- Suicide in children usually is not planned
- Any child whose attitudes, behaviors, or habits change dramatically in a short time, especially following a stressful event or situation, is a candidate for suicide

# Suicide Throughout the Life Cycle

(Slide 2 of 4)

- Suicide and adolescents

- Adolescents, especially those with low self-esteem, may consider suicide as an option for solving their problems

- Factors in adolescent suicide

- Depression

- Poor impulse control

- Emotional isolation

- Dysfunctional or disrupted family

- Adolescents with anorexia nervosa have higher rates of suicide

# Suicide Throughout the Life Cycle

(Slide 3 of 4)

- Suicide is a significant problem in adulthood
  - Women attempt suicide three times more frequently than men
  - Men are more successful at completing the act
  - Loneliness is a factor in adult suicides
- Do not hesitate to ask clients if they ever think about suicide

# Suicide Throughout the Life Cycle

(Slide 4 of 4)

- Suicide and older adults

- As age increases, so does the rate of suicide
  - Passive suicide: Refusal to eat, drink, or cooperate with care
- Older adults tend not to communicate their intentions unless directly asked; thus suicidal attempts in older adults are more successful
- Most older adults view the timing of death in one of the following ways:
  - God-controlled
  - Physician-controlled
  - Individual-controlled
  - Controlled by the individual alone



# Therapeutic Interventions

- Thoughts about suicide can be described by:
  - Suicidal ideation
  - Suicidal threats
  - Suicidal gestures
  - Parasuicidal behaviors
  - Suicidal attempts
- The last level is completed suicide—the successful attempt to end one's life
- Motivation for the successful suicide may be conscious or unconscious

# Assessment of Suicidal Potential

- Preventing a suicide from occurring means saving a life
- Assessment of suicidal potential
  - Evaluate every client for the potential
  - Assess risk factors for the age of the client
  - Ask the client directly whether he or she has any thoughts related to suicide

# Suicide Assessment

- Suicide ideation (thoughts)
- History of suicide attempts
- Existence of a suicide plan
- Availability of items to carry out plan
- Substance use or abuse
- Level of despair
- Ability to control own behavior



# Therapeutic Interventions for Suicidal Clients

## ● Interventions

- Protect from harm
  - Take suicide precautions
- Establish rapport with the client
  - Make a no self-harm agreement
- With the encouragement and advocacy of their caregivers, many suicidal clients are able to develop effective strategies for living satisfying lives

# Questions?