



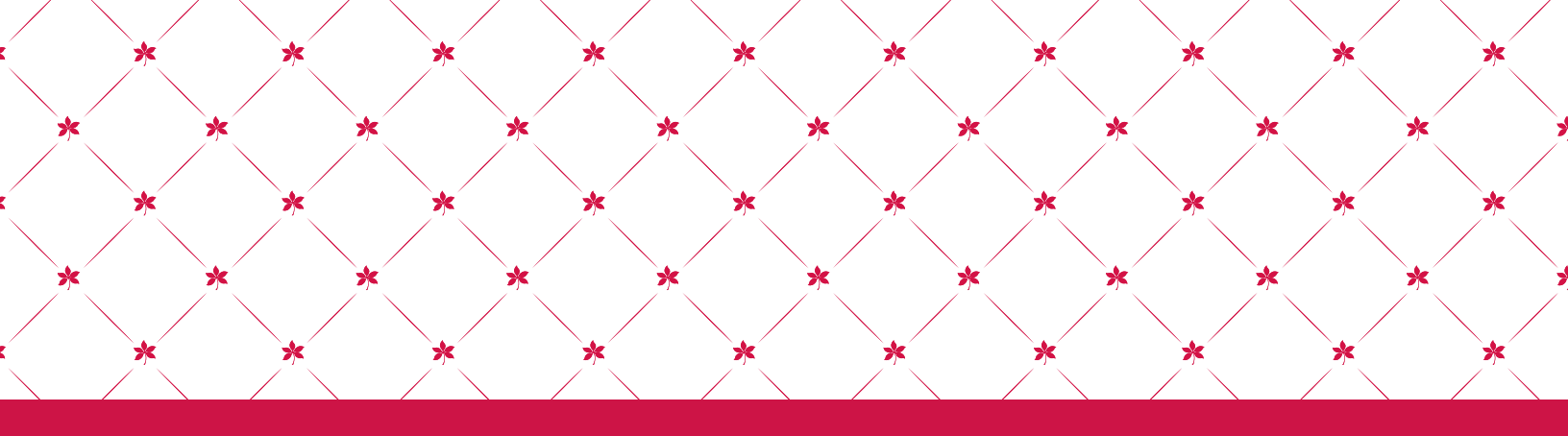
When Your Loved One Is in the Hospital for Suicidal Thoughts or Actions

A Guide for Families, Friends, and Caregivers



THE OHIO STATE UNIVERSITY

WEXNER MEDICAL CENTER



If your loved one is in the hospital (hospitalized) for suicidal thoughts or actions, you may wonder how you can help them. This guide will give you some things to do (and not do) to support them. It will also give you steps for taking care of yourself and resources to help you.

Please ask questions about anything you do not understand or would like to know more about.

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For a digital copy of this book, please visit go.osu.edu/pted5165.

This book is for informational purposes only. Talk to your doctor or health care team if you have any questions about your care.

For more health information, go to wexnermedical.osu.edu/patiented or contact the Library for Health Information at 614-293-3707 or health-info@osu.edu.

Providing Support in the Hospital

Sharing and Planning

When your loved one is entering or in the hospital for suicidal thoughts or actions, you can provide important information to help with their care.

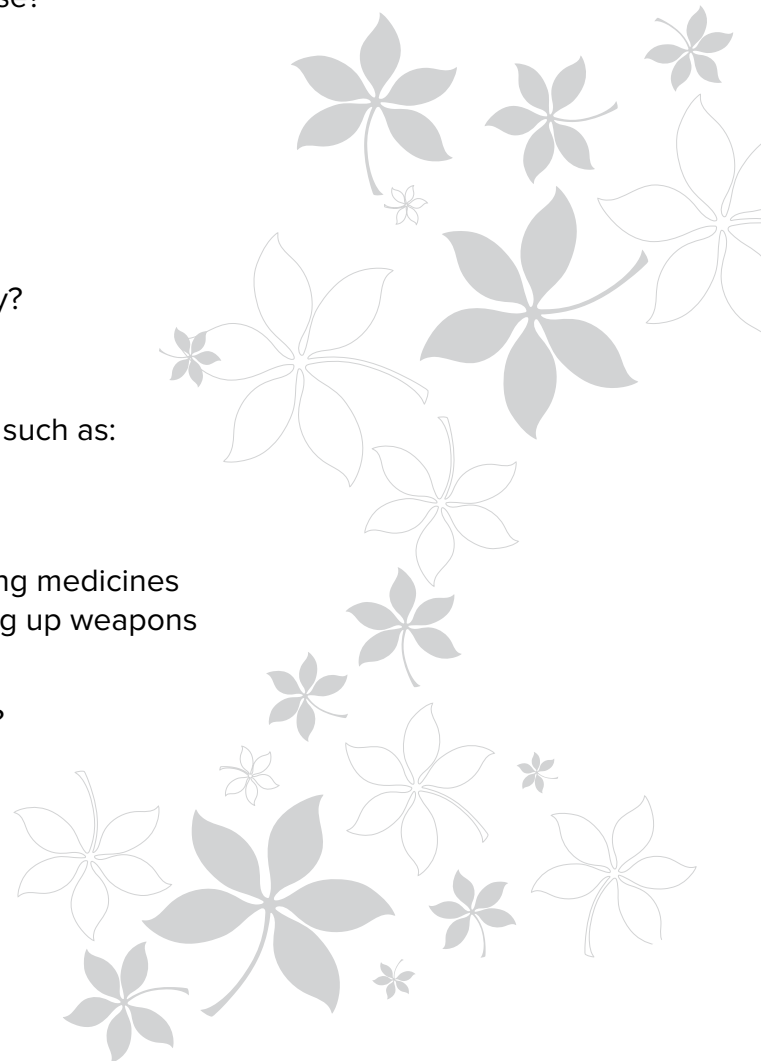
Share information with their care team

Suicide risk:

- Do they have access to a gun, lethal doses of medicines, ropes, or other possible means of hurting themselves?
- Have they left a suicide note?
- Have they recently made or changed their will?
- Have they been giving away their things recently?
- Do you know of any problems they have had with taking their medicines as prescribed?
- Do you know of any problems they have had with seeing mental health providers?
- Do you know of any relationship struggles or abuse?
- Do they have an upcoming anniversary of a loss?
- Do you know of any alcohol or drug use?
- Have they had a suicidal crisis in the past?
 - If yes, were they in the hospital?
 - How did they recover from that?
- Is there a history of suicide attempts in their family?

Your role and concerns:

- What support you are willing and able to provide, such as:
 - Money, housing, food, or transportation
 - Emotional support
 - Doing things to lower their risk, such as keeping medicines for them and giving them as needed, or locking up weapons
- What are your safety concerns?
- What else should we know about your loved one?



Safety planning

The safety plan is a joint effort among your loved one, the care team, and you. As a support person, you should know your loved one's safety plan and understand your role in it.

Your role may include:

- Knowing “triggers,” such as an anniversary of a loss, alcohol, or stress from relationships
- Building supports with mental health providers, family, friends, and community resources
- Working with their strengths to promote their safety
- Having honest and open communication with them

Take an active part in the planning process during your loved one's hospitalization. To help you better understand your loved one's feelings about things and about your part in the plan, ask questions during the process.

Questions to ask your loved one:

- Do you feel safe to leave the hospital?
- Are you comfortable with the plan for leaving the hospital?
- What has changed while you have been in the hospital?
- What can I do to help you after you go home (discharge)?
- Will you agree to talk to me if suicidal thoughts return? If not, who will you talk to?

Questions to ask the treatment team:

- Do you think my loved one is ready to leave the hospital?
- Why did you make medicine changes or other recommendations?
- What is the follow up plan?
- What is my role going forward?
- What warning signs should I look for?



Providing Support at Home

Communication and Safety

After your loved one has returned home, you can play an important part in giving support and keeping them safe.

Be open and honest

- Engage your loved one in honest talks. Ask what they are feeling, what they are struggling with, and what they would like from you. Do not avoid, ignore, or try to forget the reasons they were in the hospital.
- Remind them that your feelings for them have not changed because of what has happened.
- Encourage your loved one to use the resources offered, such as:
 - Peer support groups
 - Individual, family, or group therapy
 - Training for social skills
- Support your loved one in taking responsibility for themselves. Someone with a serious mental illness is more likely to thrive when they are allowed to be responsible for their own life, as appropriate. Examples include:
 - Instead of driving your loved one to every appointment or errand, help them get a bus pass and learn the routes.
 - Instead of preparing every meal for them, teach them to cook some simple, healthy meals.
- Recognize and praise your loved one's strengths and progress.



Factors that help prevent suicide

- Identifying reasons for living
- Feeling responsibility to family and others
- Having a supportive social network or family
- Going to school or working
- Taking part in psychiatric treatment

Safety is a priority

Research has shown that a person who has attempted to end their life has a much higher risk of later dying by suicide and that the highest risk time is a week after leaving the hospital. Although safety is ultimately your loved one's responsibility, you can help your loved one make the choice to stay safe by reducing the risks.

Remember that safety cannot be guaranteed by anyone—the goal is to reduce the risks and build supports for everyone in the family.

How to Deal with Suicide Risk Factors

Things you can change	Things you can't change
<p>Drug use: Drug use can create mental highs and lows that make suicidal thoughts worse.</p> <ul style="list-style-type: none"> Encourage no drug use and getting treatment, if appropriate. 	<ul style="list-style-type: none"> Past suicide attempt Family history of suicide
<p>Alcohol use or abuse: Alcohol can make people act more freely on their feelings. According to the Centers for Disease Control and Prevention, 1 in 5 people who die by suicide had alcohol in their system.</p> <ul style="list-style-type: none"> Keep only small amounts of alcohol in the home, or none at all. Encourage no alcohol use and getting treatment, if appropriate. 	<ul style="list-style-type: none"> Gender: Although more women than men attempt suicide, men are 4 times more likely to die by suicide LGBTQ people are at higher risk
<p>Guns: Guns are high risk and the leading means of death for suicidal people.</p> <ul style="list-style-type: none"> Guns should be taken out of the home and locked away (even antique ones that you think don't work). 	<ul style="list-style-type: none"> Having a serious or chronic medical illness
<p>Access to large amounts of medicine: Overdoses are common and can be lethal.</p> <ul style="list-style-type: none"> Lock away ALL medicines, including over the counter ones. Monitor all medicines that are prescribed for people in the home and must be taken. Remove unused or expired medicine from the home. Keep your loved one's medicines for them and give them each dose when needed for at least a week after leaving the hospital. 	<ul style="list-style-type: none"> A history of trauma or abuse A recent tragedy or loss
<ul style="list-style-type: none"> Remove or lock up any toxic materials. 	

Watch for warning signs of worse mood and suicidal thoughts:

- Feeling very sad or withdrawn for more than two weeks
- Changes in sleeping, eating, and hygiene habits
- Giving away their things
- Seriously trying to harm themselves, or making plans, such as saving pills or buying weapons
- Sudden, overwhelming fear for no reason, sometimes with a racing heart or fast breathing
- Feeling disconnected from reality
- Showing severe out of control behavior that can hurt oneself or others
- Having intense worries or fears that get in the way of daily activities
- Having trouble controlling their behavior, putting themselves in physical danger, or having problems at school or work
- Using drugs or alcohol
- Having severe mood swings that cause problems in relationships
- Showing drastic changes in behavior or personality

If There Is a Threat of Suicide

A Guide to Talking About It and Next Steps

After your loved one has returned home, you can play an important part in supporting them and keeping them safe. Check in with them often and watch for warning signs of their mood getting worse or that they may be having suicidal thoughts (see warning signs on page 6).

Talking about this with your loved one can be hard and scary. Here are some things to ask and what you can say:

- Assume that any suicide threat is serious.
- Express concern and desire to help.
 - “I’m worried because I noticed you [insert things you’ve noticed]. How can I help you through this?”
 - “It seems like you have been up and down lately. I’ve been there myself. Talking about it really helps.”
- Don’t promise to keep what they tell you a secret.
- Ask the person in a calm, quiet, and private setting whether they are thinking about suicide. You may worry that using the word “suicide” could put the idea in their head, but research shows the opposite is true. Asking someone if they are feeling suicidal can bring them relief, because someone finally sees how badly they are feeling.
 - Indirect questions to ask: “Do you ever think you should never have been born?” “Do you feel like you’d be better off dead?” “Do you feel that people would be better off if you were dead?”
 - Direct questions to ask: “Do you want to die?” “Are you thinking about suicide?” “Have you had thoughts about suicide?”
- If the answer is “yes,” stay calm. Having these thoughts does not always mean they are at risk of suicide right now. Keep the discussion going.
 - What to say:
 - “What you’re feeling sounds painful and hard. I don’t have all the answers, but I am here to listen.”
 - “I’m so glad you told me this. Let’s keep talking.”
 - “I understand you are really struggling, and I am here to listen.”
 - Avoid statements like:
 - “How could you do this to me?”
 - “But you’ve got so much going for you!”
 - “What would I do without you?”
 - “Think of what this would do to person X, Y, or Z.”



- ▶ Follow up with questions about specific plans.
 - When does the person plan to commit suicide? How?
 - Does the person already have the means (pills, gun, or other)?
 - Have they prepared in other ways? Suicide notes? Giving away belongings?
- If the threat does not seem like it is about to happen and they seem safe now, offer to connect them to help (such as a suicide hot line, therapist, psychiatrist, or emergency department). If you contact medical providers, repeat exactly what the person has told you.
- If they seem to be at risk right now and you think they are not safe:
 - ▶ Do your best to persuade the person to get help voluntarily. Dial the hot line number, drive to the clinic, or take a taxi to the emergency department.
 - ▶ Call 911 if there is an immediate risk of harm.
 - ▶ Limit access to car keys and any means that could be used for self harm. This includes things like medicines (including over-the-counter drugs), knives (including kitchen knives), guns, or ropes.
 - ▶ Avoid alcohol and drug use. Intoxicated people are more likely to attempt suicide using more lethal methods.
- If your loved one has attempted suicide:
 - ▶ Call 911.
 - ▶ Stay with them until help arrives.

Resources

As part of their care your loved one will be given after care suggestions and appointments for follow up after they leave the hospital.

Patient and family education offered:

NAMI Franklin County (Ohio), or National Alliance for Mental Illness

1225 Dublin Road, Suite 110, Columbus, OH 43215

Phone: 614-501-6264

Email: mail@namifc.org

Website: namifranklincounty.org

Crisis Lines

- ▶ Free Crisis Hotline: 988
- ▶ Suicide Hotline: 614-221-5445
- ▶ Seniors Suicide Hotline: 614-294-3309
- ▶ Franklin County Youth Psychiatric Crisis Line: 614-294-3300
- ▶ Mental Health of America: 614-221-1441 (free counseling)
- ▶ Netcare Access Hotline: 614-276-CARE (614-276-2273)
- ▶ 24 hour crisis text hotline: Text the word “start” to 741-741 for crisis support (texting this number is free if you have Verizon, T-Mobile, AT&T, or Sprint)

If you feel unsafe at any time, call 911 or go to the nearest emergency department.

Taking Care of Yourself

Attempted suicide or threat of suicide can bring up a variety of emotions for you. Feelings such as anger, fear, confusion, shock, and disbelief are all normal. Managing them and caring for yourself are important for your well being and your ability to support your loved one.

Emotions you may be having

- **Anger:** Try to admit your anger and release it as quickly as you can. Try talking to a trusted family member or friend about your angry feelings instead of your loved one.
- **Guilt:** You may be thinking that you should have known or should have done something in a different way. Remember that you are not responsible for your loved one's choices and you did not cause those feelings and behaviors.
- **Shame:** You may feel shame related to the stigma of mental illness.
- **Anxiety:** You may be anxious or insecure about the future and what will happen to them.
- **Sadness:** Your empathy is in full force. You may feel sad, on top of all the other emotions you are having about your loved one being hospitalized.
- **Powerless or failure:** You may feel like you have failed to protect your loved one.
- **Betrayal:** You may feel betrayed that your loved one wasn't able to tell you how they felt.

Taking care of yourself while supporting your loved one

- Rest and get a good night's sleep. Aim to get 8 hours of sleep each night.
- Eat a healthy diet that includes fruits, vegetables, protein, and whole grains. Limit caffeine and sugar. Drink plenty of fluids.
- Be active. Exercise can help relax tense muscles, improve your mood, and help you sleep better. Try to exercise for 30 minutes, 5 days a week. If it is hard to find the time to exercise, walk or stretch for 10 minutes inside the house.
- Make time for rest and relaxation. Do something for yourself each day, even for a few minutes.
- Learn new ways to deal with stress. Try relaxation techniques to see what works best for you.
 - Listen to music.
 - Focus on your breathing.
 - Progressive muscle relaxation: Focus on 1 part of the body and mentally release any physical tension you have there, working your way down your body from your head to your toes.
 - Guided imagery: Think of a time and place when you felt safe and comfortable. Bring those smells, sounds, and feelings back with you to the here and now.



- **Mindfulness:** While sitting comfortably and focusing on your breathing, bring your attention to the present moment (notice things with your 5 senses).
- **Movement:** Almost any type of movement can reduce your stress. The most important thing is to pick an activity that you enjoy. Try yoga, tai chi, or qigong.

Visit Integrative Health for free recordings: wexnermedical.osu.edu/integrative-health/resources.

Understanding your feelings

- › Talk openly with family and friends about your feelings.
- › Try to improve your self-care and ask others to help you.
- › You may find it helpful to talk with a counselor about your feelings and learn ways to deal with difficult situations. The counselor can also provide information on resources in the community or support groups. There are many types of counseling, such as individual, couples, family, or group counseling. For help to find a counselor, you can try contacting:
 - › Your health insurance company for a list of counselors or companies that are covered under your insurance plan
 - › Your doctor, nurse, social worker, clergy, family, and friends
 - › A community mental health center
 - › The employee assistance program at your work

Support for children

Children are also affected by what is going on in the household. Young children may become anxious while teenagers might be angry about their lives being disrupted. Let them talk or show their feelings. If they are in school, talk with their teachers about the situation and seek help from school counselors.

Stay hopeful and keep up your self care

- Support people commonly provide a safety net and a vision of hope for their suicidal loved one, and that can be emotionally exhausting.
- Never try to handle this situation alone—get support from friends, relatives, and organizations, such as the National Alliance on Mental Illness (NAMI at namifranklincounty.org).
- Get professional input whenever possible.
- Learn more about ways to lower your stress at go.osu.edu/stress_help.

Care Team

Learn about the role of each care team member

Staff member	What they do
Attending Doctor	This is a psychiatrist who oversees your treatment and coordinates your care with other doctors and staff on the treatment team. This doctor also leads your discharge planning.
Resident Doctor	This doctor is doing special psychiatric training and is supervised by your attending doctor. A resident doctor may lead interviews, do physical exams, and help you make decisions about your care.
Social Worker	The social worker provides family support, discharge planning, referrals, and information about community services.
Registered Nurse (RN)	The RN plans and oversees your nursing care. Nurses carry out the doctor's orders and teach you how to care for yourself. Nurses give medicines and teach you about your diagnosis and treatment.
Nurse Practitioner (NP)	The NP is a nurse with advanced training who writes orders, assesses patients, participates in treatment team meetings, and speaks with family members and community providers about your care and treatment.
Psychiatric Care Technician (PCT)	The PCT assists the nurse in providing care. The PCT assists with meals and snacks, draws blood for lab work, and takes your vitals signs. They do regular safety rounds and check the unit.
Medical Student	Third year medical students from The Ohio State University College of Medicine are placed on the unit as a part of their training to learn about the diagnosis and treatment of patients with mental illness.
Patient Care Resource Manager (PCRM)	The PCRM works with your insurance provider to get authorization for treatment and with the treatment team to plan your discharge and after care.
Occupational Therapist (OT)	The OT checks your physical, emotional, and thinking skills to help the treatment team develop goals and interventions.
Recreational Therapist (RT)	The RT uses recreational activities to improve your emotional and spiritual wellness.
Patient Experience Coordinator	The Patient Experience Coordinator can help you understand and exercise patient rights. This advocate can also work with you if you have any concerns or questions you are not able to discuss with other members of your treatment team. You may request a Patient Experience Coordinator by asking any member of your treatment team. You can also call your advocate at 614-688-8941.

5 Action Steps for Helping Someone in Emotional Pain



ASK

“Are you thinking about killing yourself?”



KEEP THEM SAFE

Reduce access to lethal items or places.



BE THERE

Listen carefully and acknowledge their feelings.



HELP THEM CONNECT

Call or text the 988 Suicide & Crisis Lifeline number (988).



STAY CONNECTED

Follow up and stay in touch after a crisis.



nimh.nih.gov/suicideprevention

This guide is adapted from the following resources:

American Psychological Association (2019, August 27). Supporting a family member with serious mental illness. Retrieved from <https://www.apa.org/topics/mental-health/support-serious-mental-illness>.

Hurley, K (n.d.). How to Ask Someone If They Are Thinking About Suicide. Retrieved from <https://jedfoundation.org/resource/how-to-ask-someone-if-theyre-thinking-about-suicide/>.

NAMI (2022, August). Risk of Suicide. Retrieved from <http://www.nami.org/About-Mental-Illness/Common-with-Mental-Illness/Risk-of-Suicide>.

Substance Abuse and Mental Health Services Administration. A Guide for Taking Care of Your Family Member After Treatment in the Emergency Department. HHS Publication No. SMA18-4357ENG. Rockville, MD: Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services. Revised 2018. This publication may be downloaded at <http://store.samhsa.gov/product/SMA18-4357ENG>.

Treatment Advocacy Center (2018). Respond in a Crisis. Retrieved from <http://www.treatmentadvocacycenter.org/component/content/article/186-old-get-help/1613-get-help-crisis-response>.



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