


Suicide Presentation

Marian Goldstone, B.A., M.A Ed, B.Ed.,
M.Ed (Special Ed), M.Ed (Counselling)





The Legal Profession: Risks and Preventative Factors:

- ▶ There is stigma surrounding the subject of suicide and issues of mental health
- ▶ There is stigma surrounding the nature of the legal profession as well.
- ▶ Certain lawyers may face stigma for mental illness because of an unrealistic depiction of perfection within the legal profession (Muca, McGill Journal of Law and Health, 2019).



The Legal Profession: Risks and Preventative Factors:

- ▶ Given the disparity of stigma and expectations between issues of suicide and mental health and expectations regarding the nature of the legal profession, it is very challenging for members of this profession to accept the possibility they may encounter times in their lives in which they may potentially be in both camps at the same time....being both lawyer and person experiencing mental health issues and/or being at risk for suicide.
- ▶ Rate of depression for lawyers is 3.6 times higher than the general population and their rate is the highest of all professions. Suicide is the 9th leading casue of death for the general population and the 3rd leading casue of death amongst lawyers. (Canadian Lawyer, 2019)



The Legal Profession: Risks and Preventative Factors:

- The legal system is traditionally adversarial in nature. It is one of the most powerful institutions in our society, defending the laws of our society and permeating every aspect of our living in some way or another.
- The adversarial, high -pressure, competitive climate makes it difficult to seek "help" for fear of seeming weak or inadequate.



The Legal Profession: Risks and Preventative Factors:

- ▶ The statistic that MDAM cites in its standard Mood Disorders Presentation is that 1 in 4 Manitobans will be affected by a mood disorder in their lifetime. CMHA estimates this at 1 in 5.
- ▶ Most of the individuals in this room today are lawyers, but they are also Manitobans....and we can all count to 4 or 5.
- ▶ Mental illness costs the Canadian economy 51 billion annually. Each week, approximately 500,000 employed Canadians cannot work due to mental health problems. (CAMH,2019)
- ▶ Admitted or not, it is exacting its toll.



The Legal Profession: Risks and Preventative Factors:

- ▶ We all experience various stressors in daily living: finances, aging parents, concerns about retirement, relationship issues, divorce, child rearing, teenagers, bullying, shaming, concerns about the world around us and our safety in it...and what it might be like for future generations.
- ▶ Why do some of us experience mental health issues while others do not?



Mood Disorders
ASSOCIATION OF MANITOBA

Helping people
help themselves

What Are Mood Disorders?



A category of Mental Health Concerns that includes Depression and Bi-Polar Disorder.



Things that factor into Mood Disorders:

Family History, Age, Trauma, Drug Use,
Lifestyle choices, Stress.

1 in 4 Manitobans will experience a
Mental Health Concern in their
lifetime. (Fransoo, et al., 2013)

The Legal Profession: Risks and Preventative Factors:

- ▶ Trauma
- ▶ Genetic predisposition
- ▶ Daily stressors
- ▶ Stressors related to profession
- ▶ Physical sickness
- ▶ Addictions
- ▶ Isolation
- ▶ Loss of satisfaction with life
- ▶ Shame, guilt,
- ▶ Eventually it will spill over!!!!...Lawyers are no exception!







The Legal Profession: Risks and Preventative Factors

- ▶ The situation:
- ▶ 58% of lawyers, judges, and law students experienced significant stress/burnout, 48% experienced anxiety, 25 % depression (Canadian bar Assoc. 2012).
- ▶ Excessive working hours particularly in larger private firms leads to sleep deprivation, feelings of isolation, family stressors, negative impact on work/life balance...they are often “failing” in more than one aspect of their life. (Muca, McGill Journal of Law and Health, 2019)



The Legal Profession: Risks and Preventative Factors:

- ▶ The legal profession presents some unique stressors.
- ▶ Lawyers experience depression, anxiety and substance abuse far more than the general population, they do more than those in other stressful professions (B. Greenberg, Canadian Lawyer, Dec. 2019).
- ▶ Why? Workload, billable hour targets etc.?????
- ▶ This in turn results in internal pressures: self-doubt, perfectionism, self-criticism, impostor syndrome are particularly noted in the legal profession. Self-doubting is often experienced.
- ▶ (B. Greenberg, Canadian Lawyer, Dec. 2019).



The Legal Profession: Risks and Preventative Factors:

- ▶ Lawyers' work is often judged by outcomes beyond their control.
- ▶ Sometimes financial rewards are in relationship to the amount of work done rather than the quality of the work or the satisfaction that comes from doing a job thoroughly.
- ▶ Lawyers are rewarded for being pessimistic perfectionists...foreseeing the "worst case scenario" and being prepared to handle it. This type of thinking can contribute to depressive thinking patterns.



The Legal Profession: Risks and Preventative Factors:

- ▶ “Legal work combines all the elements that contributes to substance abuse and other disorders into one toxic pot.” (Muca, Mc Gill Journal of Law and Health, 2019)
- ▶ Koltai, (Journal of Health and Social Behavior, 2017) notes that within the general population of society that those with higher incomes usually enjoy a better standard of mental but also observes that lawyers working in larger firms and in more lucrative positions were more likely to experience depressive symptoms.



The Legal Profession: Risks and Preventative Factors:

- ▶ Creating Change:
 - ▶ Increase awareness and understanding of severity and prevalence of mental health and substance abuse.
 - ▶ Make it as acceptable to ask for help for mental health issues and substance abuse as it is for physical illness.
 - ▶ Create safe work environments in which it is okay to speak openly and honestly about such issues.
 - ▶ Include information in professional development and ongoing training.
 - ▶ Create a climate of support....Demonstrate corporate permission "Start the Conversation"!



The Legal Profession: Risks and Preventative Factors

- ▶ Have crisis support numbers readily available and visible....put them in your phones for yourself or others.
- ▶ Encourage as many individuals as possible to take suicide prevention and intervention programs such as SAFE TALK, ASIST, Mental Health First Aid.
- ▶ Encourage work place peer support groups or individuals who are willing to be identified as supports....consider a logo in the workplace as identification.
- ▶ Each time we tell our story...we open a door for someone else.



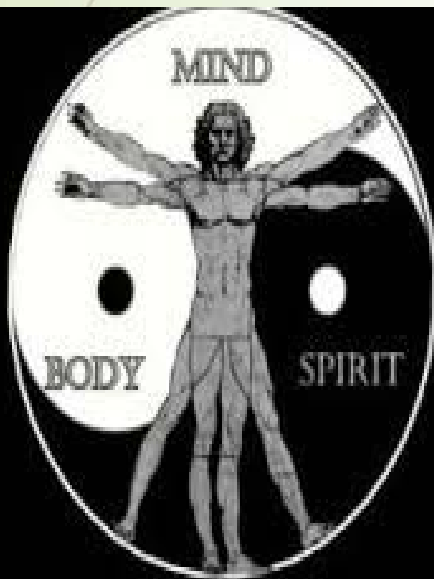
The Legal Profession: Risks and Preventative Factors:


- ▶ It is important to note that male depression may display differently than female depression....although females working in male dominated professions may show some of these signs as well:

(Men often show more physical symptoms and may not even suspect depression. Men are more likely to complete suicide, Older men at very high risk.)

- | | | |
|----------------------|---|-----------------------|
| ▶ Sadness | Tiredness | Trouble Concentrating |
| ▶ Unhappiness | Anger | Irritability |
| ▶ Frustration | Inability to Focus | Substance Abuse |
| ▶ Sleep Issues | No energy | Eating Issues |
| ▶ Anxiety | Isolation | Physical symptoms |
| ▶ Sexual Dysfunction | Loss of interest in things formerly enjoyed | |

The Legal Profession: Risks and Preventative Factors:





Often there is a sometimes a difference
between how we define success and how
we experience satisfaction

No, you can't always get what you want

You can't always get what you want

You can't always get what you want

But if you try sometimes, you find!

You get what you need



Dr. Glasser Choice Theory: Five **Basic** Needs:

▶ A. Physiological Needs:

- ▶ **1. Survival:** Food, Shelter, Safety, Reproduction/Sex

▶ B. Psychological Needs:

- ▶ **2. Love and Belonging:** Relationships, social connectiveness, give and
- ▶ **3. Power:** To be recognized for our achievements, To be listened to, to have a sense of self-worth.
- ▶ **4. Freedom:** Independence and autonomy, To have choices, To be able to control the direction of one's life.
- ▶ **5. Fun:** To laugh and to play, Glasser also links the need for fun to learning.

It Starts Here!

- ▶ Developing an awareness of what you want/need.
- ▶ We all need those basic needs.
- ▶ Believing that you have the right to ask for what you want/need.
- ▶ Taking responsibility for ourselves to fulfill those needs in a healthy way.



The Legal Profession: Risks and Preventative Factors:





The Legal Profession: Risks and Preventative Factors

- We are ultimately responsible for our own recovery, but we do not have to do it alone. We create a support team around ourselves....that can and should include our workplace and professional culture.



The Legal Profession: Risks and Preventative Factors

- ▶ What are some of the signs someone may be considering suicide?
- ▶ People will usually communicate their thoughts in two ways: verbally or non verbally.
- ▶ Verbal communication may be indirect or direct....direct threats are less frequent than indirect threats....pay attention to those indirect, understated threats.



The Legal Profession: Risks and Preventative Factors

- ▶ Non Verbal Communication:
- ▶ Seeming down, *hopeless*, "pain" depressed, joyless
- ▶ Changes in basic functioning, hygiene, eating, sleeping
- ▶ Increased substance abuse
- ▶ Isolating self, discontinued employment socializing etc.
- ▶ Getting involved with crime, self harm,
- ▶ Giving things away, saying good bye, leaving a suicide note
- ▶ Disregard for personal safety, apathetic about life
- ▶ Sudden change from depressed to being calm "normal"
- ▶ There are usually an accumulation or stressors.



The Legal Profession: Risks and Preventative Factors

- In our assessment we consider risk factors, protective factors, level of suicide ideation
- We ask the questions we act calmly:
- Are you thinking about suicide?
- Do you have a plan in mind?
- Do you have a time line in mind?
- We often respond by “reflecting back” to acknowledge they have been heard...we listen for turning points in the conversation that might indicate points of hope...areas of strength.... These are moments when they feel their story is being heard and their “life side” starts to speak. We may be able to find ways to support them and allow them to be in control of the actions taken. We always agree on an emergency contact (eg crisis number) encourage an appointment with a professional, make use of informal supports. Offer comfort and engage people in their own safety plans if possible.



The Legal Profession: Risks and Preventative Factors

- ▶ If harm to self or others is about to occur or is occurring....activate an emergency response. Eliminate or block access to the means of suicide.
- ▶ If the person is able to participate in the intervention...activate 24 hour monitoring.
 - ▶ We can ask them how the plan can be disabled...eg...is there someone who can take charge of your medications and given them to you as prescribed?

Be safe for now, engage their participation

Risk factors:

Mental illness or physical illness, stressful life events, environmental factors...availability off means...substance abuse, history, more than one diagnosis

The Legal Profession: Risks and Preventative Factors

- ▶ Suicidal ideation is very serious but sometimes people do not so much want to die as they do not, in that moment, want to live.

	Connecting with Suicide	Uncertainty	Life
Life	Death	Uncertainty	Life
Time	Past	Present	Future
Relationship	Alone	Engaged	Supported



The Legal Profession: Risks and Preventative Factors

- ▶ Don't :
- ▶ Panic
- ▶ Ignore signals
- ▶ Wait
- ▶ Promise secrecy
- ▶ Leave the person alone
- ▶ Debate the morality of suicide
- ▶ Tell them to be grateful for what they have
- ▶ Tell them everything will be alright
- ▶ Call their bluff
- ▶ Do nothing (Fiske, Guidelines for Legal Practitioners With suicidal Colleagues, 2000)
- ▶ Keep them safe for now and do something...respond!



The Legal Profession: Risks and Preventative Factors

- ▶ Going forward...**Advocate** for treatment and recovery needs
- ▶ **Notice signs of progress:**
 - ▶ These are highly individual as are the warning signs
 - ▶ Being able to name emotions
 - ▶ Being able to show emotions...even difficult ones

Model Self Care ...practitioners need to also acknowledge their own response to suicide related situations, debrief with colleagues and professionals

Make life style Changes to reduce stress, learn to live more “in the moment”

Be an advocate for change....open the conversation!




The Legal Profession: Risks and Preventative Factors


- ▶ Individual therapy is recommended
- ▶ Medication is often very useful
- ▶ Building a support team, enlisting allies




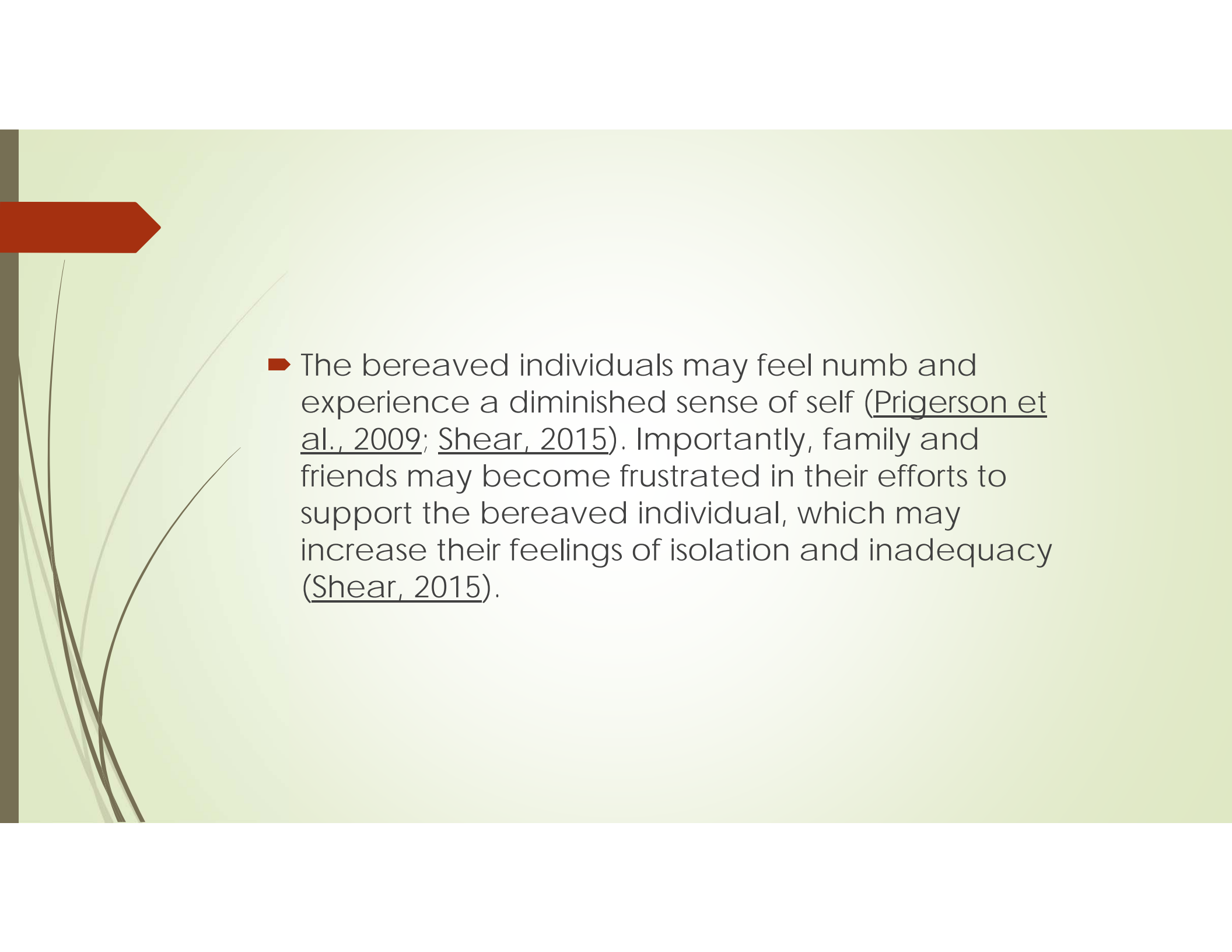
The Legal Profession: Risks and Preventative Factors


- ▶ Surviving the loss of someone who has died by suicide:
- ▶ It is estimated that for every suicide there are 6–10 people bereaved by the death ([Cerel et al., 2008](#); [Andriessen and Krysinaka, 2012](#)).
- ▶ Hence, the population of suicide survivors, that is, the family members, friends, and others (e.g., colleagues, classmates, clinicians) who have lost someone by suicide, is the largest community of victims in the area of mental health related to suicide ([Shneidman, 1969](#); [Andriessen et al., 2017a](#)


- 
- Complicated Grief" ([Stroebe et al., 2013](#); [Zisook et al., 2014](#); [Shear, 2015](#)). It is also referred to as Prolonged Grief Disorder ([Prigerson et al., 2009](#)), and more recently as Persistent Complex Bereavement Disorder ([Robinaugh et al., 2014](#)), a condition for further study. Although there is not yet a consensus about the exact set of diagnostic criteria and the name of the syndrome, it is typical of people who may experience major difficulties accepting the death of a significant other and its consequences. It is expressed through chronic, persisting characteristics of acute grief, and is more likely to occur after a sudden or violent death such as homicide or suicide ([Lobb et al., 2010](#); [Shear, 2015](#))


- 
- Complicated grief may resemble symptoms of depression and post-traumatic stress disorder; however, there are a number of specific symptoms that allow reliable identification of complicated grief distinct from other disorders ([Boelen, 2013](#); [Stroebe et al., 2013](#); [Zisook et al., 2014](#)). Typical symptoms of complicated grief include intense yearning and longing for the deceased, intrusive thoughts or images about the deceased, rumination and intense feelings of anger and guilt (e.g., the feeling that they should have prevented the death), avoidance of situations, people and places that remind of the deceased, and difficulty finding meaning in life ([Prigerson et al., 2009](#); [Zisook et al., 2014](#); [Shear, 2015](#)).

- 
- The bereaved individuals may feel numb and experience a diminished sense of self ([Prigerson et al., 2009](#); [Shear, 2015](#)). Importantly, family and friends may become frustrated in their efforts to support the bereaved individual, which may increase their feelings of isolation and inadequacy ([Shear, 2015](#)).

- 
- The bereaved individuals may feel numb and experience a diminished sense of self (Prigerson et al., 2009; Shear, 2015). Importantly, family and friends may become frustrated in their efforts to support the bereaved individual, which may increase their feelings of isolation and inadequacy (Shear, 2015).

- 
- Complicated grief may be associated with considerable morbidity, such as risk of cancer, cardiac events, sleep disturbances, and alcohol and substance abuse ([Prigerson et al., 1996, 1997](#); [Chen et al., 1999](#); [Prigerson and Jacobs, 2001](#); [Zisook et al., 2014](#)). In addition, it is a risk factor for major depression, anxiety disorders, and suicidal ideation and behavior ([Mitchell et al., 2005](#); [Shear and Skritskaya, 2012](#); [Zisook et al., 2014](#)). Unlike the symptoms of reactive depression to bereavement, the symptoms of complicated grief can persist even after treatment with tricyclic antidepressants ([Pasternak et al., 1991](#)

- 
- Complicated grief may be associated with considerable morbidity, such as risk of cancer, cardiac events, sleep disturbances, and alcohol and substance abuse ([Prigerson et al., 1996, 1997](#); [Chen et al., 1999](#); [Prigerson and Jacobs, 2001](#); [Zisook et al., 2014](#)). In addition, it is a risk factor for major depression, anxiety disorders, and suicidal ideation and behavior ([Mitchell et al., 2005](#); [Shear and Skritskaya, 2012](#); [Zisook et al., 2014](#)). Unlike the symptoms of reactive depression to bereavement, the symptoms of complicated grief can persist even after treatment with tricyclic antidepressants ([Pasternak et al., 1991](#))

- 
- ▶ Research results which have found an increased risk of suicidal behavior among family members who have experienced the suicide of a significant other ([Pasternak et al., 1991](#))



Mood Disorders
ASSOCIATION OF MANITOBA

***Helping people
help themselves***

Our Vision

To build an understanding community in the awareness of mood disorders through providing support and recovery to those living with mood disorders.

We strive to be a centre of excellence for grassroots community mental health in an open yet confidential atmosphere.

Our Mission

Helping Ourselves, Helping Others.


The Mood Disorders Association of Manitoba is a self-help organization dedicated to providing support, education, and advocacy for those living with a mood disorder, co-occurring disorders, or other mental health illnesses. We increase public awareness about mood disorders and empower people to develop hope and recovery.

Help yourself or those you love in hope and recovery from mood disorders.

What MDAM Offers

365 Days/Year

PEER SUPPORT



Our peer support services are provided by caring and committed staff and volunteers. Each of them have personal experience with a mental illness/mood disorder (lived experience). These services are free of charge and are open to all ages.

We offer education, emotional and social support in various forms:

Drop-in sessions

One-on-one sessions

Peer support via phone

Peer support via email

Support group meetings

PEER SUPPORT GROUPS

ADHA 18+

Mixed

Young Adults (18-24)

Trauma

LGBTQ+

Teens (12-17)

Parents

Post Partum Support

Depression

Bipolar Disorder

Mental Health for Athletes

Borderline Personality Disorder

Friends and Family

Addictions & Mood Disorders

Leading Change: A peer support approach to Meth Recovery

Eating Disorders

Turning Pages: mental health program for adults 50-70

Women's Programming

Leisure Group

OTHER SERVICES & TRAINING

- ▶ Family Navigation
- ▶ SAD Lamps (rent or purchase)

MDAM's qualified staff and volunteers offer presentations/ workshops on a number of topics related to mental illness/mood disorders. These are offered to local businesses, corporations, schools, non-profit organizations, etc. at no charge. However, MDAM does welcome charitable donations/honorariums.

Topics (and others upon request)

- ▶ Care for the Caregiver
- ▶ General on Mood Disorders
- ▶ Mental Health and Seniors
- ▶ Mindfulness (Stress Management and Emotional Regulation)
- ▶ Trauma and PTSD
- ▶ Self-Care for Mental Health and Wellness
- ▶ Substance Use and Mood Disorders
- ▶ Suicide Alertness
- ▶ Youth Mental Health
- ▶ Wellness in the Workplace
- ▶ Meditation

COURSES/WORKSHOPS

➤ Cognitive Behavioral Therapy with Mindfulness

- 4 week program
- The objective of CBT is to teach individuals the building blocks of self-help recovery

➤ Mental Health First Aid Basic

- 2 day program
- Certificate provided at the end of training
- Focuses on the four most common mental health disorders including substance, mood, anxiety and trauma related, and psychotic disorders

➤ Mental Health Peer Support For Community Leaders

- this training will build your capacity to listen, reflect and support those who need it most. The goal of this training is to provide you with the concrete peer support skills you require to work with individuals and groups

➤ Peer Support Group Facilitation Training

- 5 hour session This training will build your capacity to engage, support and organize a group of your peers!

WORKPLACES AND MENTAL HEALTH

- ▶ With most adults spending more of their waking hours at work than anywhere else, addressing issues of mental health at work is vitally important for all people in Canada.
- ▶ Seventy per cent of Canadian employees are concerned about the psychological health and safety of their workplace, and 14 per cent don't think theirs is healthy or safe at all. Such workplaces can take a detrimental personal toll as well as contribute to staggering economic costs.
- ▶ The Mental Health Commission of Canada has a wealth of information regarding wellness in the workplace. You can find their website here:
<https://www.mentalhealthcommission.ca/English/what-we-do/workplace>
- ▶ **RETURN TO WORK after a LEAVE – Do's and Dont's**
 - Clarify the details (reduced work week, etc.)
 - Offer support and ask how might be the best way
 - Do not let them feel stigmatized
 - Offer understanding and ask what supports are needed.

RESOURCES

- Crisis Lines:
- Manitoba Suicide Prevention & Support Line (24/7)
Toll free: 1-877-435-7170
www.reasontolive.ca
- Klinik Crisis Line (24/7)
- Phone: (204) 786-8686
Toll free: 1-888-322-3019
- Sexual Assault Crisis Line (24/7)
- Phone: (204) 786-8631
Toll free: 1-888-292-7565
[more info on Sexual Assault services](#)
- Trafficking Hotline (24/7)
- "Call the Line"
Toll Free: 1-844-333-2211
[more info](#)
- Support & Distress Lines:
- Manitoba Farm, Rural & Northern Support Services
- 204-571-4180
Toll free: 1-866-367-3276
Monday to Friday: 10am – 9pm



RESOURCES

- ▶ Crisis Chat Line
- ▶ www.supportline.ca
Monday to Friday: 10am – 9pm
- ▶ Critical Incident Reporting and Support Line (24/7)
- ▶ Phone: (204) 788-8222
- ▶ Gambling Helpline (24/7)
- ▶ Toll free: 1-800-463-1554
- ▶ Worker's Compensation Board Distress Line (24/7)
- ▶ Toll free: 1-800-719-3809
Phone: (204) 786-8175
- ▶ Seniors Abuse Support Line (9am – 5pm)
- ▶ Toll free: 1-888-896-7183



RESOURCES

- ▶ MDAM – mooddisordersmanitoba.ca
- ▶ CMHA - <https://mbwpg.cmha.ca/wp-content/uploads/2020/02/2018-Agency-Brochure.pdf>
- ▶ MCDONALD YOUTH SERVICES –
 - 24-hour Crisis Line/Mobile Crisis Teams
 - 204.949.4777 or 1.888.383.2776