Welcome to National Suicide Prevention Month 2019. I dream of a day where we won’t need such a month! Kern Behavioral Health and Recovery Services is working toward that goal by implementing the Zero Suicide Initiative. (The first county in the state to do so) After months of hard work by the Zero Suicide Team, the pilot programs start this month with ACT, WISE, and HAT.

In the last 20 years, the suicide rate has risen 33% in the United States. 52% of those who died by suicide had never been diagnosed with a mental illness or ever had mental health treatment. Suicide prevention isn’t just behavioral health’s business, suicide prevention is everyone’s business.

Many of us only get involved in suicide prevention because our work life demands it, but statistics show that in our lifetimes, about 50% of people in the United States will know someone who died by suicide. Do something different this year. Get involved, join a walk, get your church to trained in suicide awareness, ask that acquaintance who is struggling about suicide. Put a blue candle in your window on September 10, World Suicide Prevention Day at 8 pm in memory of those lost to suicide.

The state of California has a theme every year for Suicide Prevention Week and Month and this year it’s, Finding Purpose: “Taking Care of Ourselves and Others” I think Kern Behavioral Health and Recovery Services does a great job of taking care of others! Please don’t forget to take care of yourselves! - ellen eggert
How Do You Know?

How do you know if someone is having thoughts of suicide? It’s not always as obvious as someone telling you that they are having thoughts of suicide. There are warning signs that they may give to prompt the question and ask, “Are you having thoughts of suicide?”

Some of the warning signs are:
- Giving away prized possessions
- Acquiring a gun
- Stockpiling pills
- Putting personal affairs in order
- Sudden interest or disinterest in religion
- Drug or alcohol abuse or relapse after a period of recovery
- Loss of any major relationship
- Fear of becoming a burden to others

If you notice any of these warning signs in someone ask them if they are having thoughts of suicide. Make sure to be upfront in asking them. Asking if they have plans to hurt themselves can be too vague and mean different things. Role play asking someone, “Are you having thoughts of suicide?” It’s not an easy question to ask. Asking someone if they are having thoughts of suicide isn’t going to put the idea in their head. This is a myth that has been around for way too long and part of the stigma that we are trying break. Asking someone if they are having thoughts of suicide can actually be a huge relief to them because if can lower the anxiety that they are feeling and open up the line of communication letting them know that there is someone who cares.

~Esperanza Bravo
A new push aims to bring mental health and addiction into the 2020 campaign conversation

By MEGAN THIELKING

JUNE 10, 2019

Mental Health for US wants newly elected lawmakers on both sides of the aisle to have well-articulated policy approaches to address Mental health and substance use—before their terms even start. The group is planning to press candidates to go on the record by sending out a survey to every presidential candidate polling above a certain threshold to ask about their stances on a slew of mental health and addiction policy issues.

For the full article, see link below.

- reported by, Virginia Willey

There are now many apps/ websites to assist one with MH SXS, regulating their mood and safety planning. Considering the times in which we live, more and more people are utilizing apps/ websites for assistance - here is a list of several BHRS Hotline uses regularly for Caller resources:

**MY3** – a six-part safety plan app that you can update as needed and even email to a person of support, it includes warning signs, coping strategies, distractions, network (social/ familial support); keeping safe and reason(s) to live. [https://my3app.org/](https://my3app.org/)

**Nowmattersnow** – is a website offering linkage to crisis lines, teaching videos based on DBT such as Mindfulness of current emotions and opposite action & paced-breathing as well as videos of peoples’ journeys using different strategies to reduce suffering. [https://www.nowmattersnow.org/](https://www.nowmattersnow.org/)

**Koko** - developed by researchers at MIT, this app provides help for people in all states of distress from bullying and harassment to suicide and self-harm, provides evidence-based supportive interactions with users while referring users in crisis to international lifelines for immediate help. [http://robertrmorris.org/koko](http://robertrmorris.org/koko)

**TalkLife** - developed by folks at Harvard and MIT, is a peer support platform that engages an online community when people just someone who’s willing to listen. Posting can be done anonymously. [https://talklife.co/](https://talklife.co/)

**Virtual Hope Box** – an apple app with a fee (App designed for use by patients and their behavioral health providers as an accessory to treatment, contains simple tools to help with coping, relaxation, distraction, and positive thinking. Use the app to store a variety of rich multimedia content you find personally supportive in times of need i.e. family photos, videos and recorded messages from loved ones, inspirational quotes, music, reminders of previous successes, positive life experiences and future aspirations, and affirmations of your worth). [https://apps.apple.com/us/app/virtual-hope-box/id825099621](https://apps.apple.com/us/app/virtual-hope-box/id825099621)

**Mymoodpath.com** – this app tests your mood, assesses your mood and can link you to an electronic physician at a later date and provide more than 150 psychological exercises & videos to help you strengthen your mental health. [https://mymoodpath.com/en/](https://mymoodpath.com/en/)

**thinkpacificanow (now Pacifica-Sanvello)** – is a website that has a fee/ account and can be utilized by both individual or a clinician. This site has categories of mood, health, meditation, guided journeys, hope board, thought, goals, chat groups & communities and progress tracking. [https://www.sanvello.com/](https://www.sanvello.com/)

**DBT Diary Card and Skills Coach** - through this app, users can master the skills of Dialectical Behavior Therapy (DBT), known for its effectiveness in regulating emotions and interpersonal relationships. Users remind themselves of skills they are trying to develop and track skill use. [https://www.diarycard.net/](https://www.diarycard.net/)

**Calm** - is designed for people new to meditation – starting with guided practices from 3 to 25 minutes in length and focused on a variety of topics from sleep to gratitude. [https://www.calm.com/](https://www.calm.com/)

**MyVAApps** – Safety Plan for Veterans - Part of the MyVAApps suite of apps, the Safety Plan app helps users create or co-create with their therapist a safety plan that outlines specific steps to take when they face crises including connecting to Veterans Crisis Line. [http://www.myvaapps.com/](http://www.myvaapps.com/)

-Delisa Noebel
SALT-Save A Life Today is having it’s fifth annual “Stomp Out Suicide” Walk Fundraiser September 8, 2018 at Beach Park, 3526 21st Street, Bakersfield CA. SALT is the only local non-profit dedicated to reducing the rate of suicide in Kern County and assisting those bereaved by suicide. SALT sponsors education and advocacy events, promotes awareness at health fairs and community events, and has assisted those unable to pay for funerals of a loved one lost to suicide.

The SALT Board is made up of all suicide loss survivors and they are passionate about preventing other families from losing loved ones to suicide. Registration begins at 7:30AM, Walk starts at 9:00AM. No fee to register!!!! For more information, please call:661-412-2721 or email savealifetodaykc@gmail.com

Link to sign up: https://secure.ministrysync.com/ministrysync/event/?e=16342

Buzz Feed Article: Individuals Left Behind After Suicide
Farah Hasta

In 2017, the Centers for Disease Control and Prevention reported that about 1.5 million people lost individuals to suicide (Dastagir, 2018). One study suggests that about 425 people are exposed to suicide death through a wider community of individuals such as a church or school setting. These individuals are forced to deal with their loved ones’ loss in imaginable ways. Not only do they have to deal with the grief that comes with death, but the dilemma of understanding “why” an individual chooses to end their life. In addition, in 2015, the Action for Suicide Prevention reported that individuals left behind suicide experience unique, long-lasting casualties (Dastagir, 2018). Some of these include the general population being three times higher at risk for suicide, suicide “suicide clusters or contagion” amongst adolescents, and a 46-fold of completing suicide by men if they lose a spouse. In contrast, women experience about a 16-fold increase.

The American Psychological Association recommends suicide loss survivors talk to a professional, slowly work towards dismantling stigma around “suicide”, utilize support systems, and practice constant self-care (Dastagir, 2018). Loss survivors endure a variety of emotions from anger, fear, melancholia, etc. Bereavement around suicide is particularly downplayed and the stigma of suicide only adds more complications. The National Suicide Prevention Lifeline encourage individuals to help loss survivors by listening reflectively and without judgment, avoiding phrases such as “I know how you feel”, and continuing to use the lost loved one’s name to demonstrate the person is not forgotten. The biggest problem is the lack of education when addressing this phenomenon (Dastagir, 2018).

California Passes Bill 972

Requiring Suicide prevention Lifeline Number to be Printed on School IDs

Suicide is the leading cause of death among young people ages 15 to 24. As suicide rates among youth continue to climb, California passed a bill in July 2019 which would require all public middle schools and high schools to print the Suicide Prevention Lifeline (1-800-273-8255) on school ID cards issued to students. The National Suicide Prevention Lifeline Text-line (text “HOME” to 741741) will also appear on all student IDs, as well as other preventative resources including numbers to local law enforcement. State Sen. Anthony Portantino is hopeful that this bill will shine light on mental health to help prevent horrific tragedies, stating “If one life can be saved through this bill then all of our efforts will have been worth it.”

~ Brie Anthony

Getting connected on the Crisis Hotline

When I first started working at the crisis hotline, I really didn’t know what to expect. I figured there would be good days and bad, rewarding and draining days, but I didn’t understand the sense of belonging, connection, I guess, that an anonymous person could have on the phone with someone across the world with a completely different culture and way of life. One of many callers suffering from suicidal thoughts that touched my heart was from China. She was having serious issues with her son. As a mother of sons myself, I could not fight back the tears. We cried together, confided in each other, and just had a real moment, a human connection that had been lacking in her life. She agreed to stay safe for now and agreed to continue to utilize the crisis hotline as needed. She thought the people around her didn’t care and was amazed that someone that didn’t even know her cared and could relate. I don’t think that is the case at all though. I think that people do care, but we are just so afraid of saying the wrong thing, that we don’t say anything at all. That’s definitely something we can all work on, just being there for people, even when we are scared. We all need that basic human connection to continue living, to continue fighting, to continue striving.

- Maureen Koons
Everyone has a part to play in Suicide Prevention

According to the Time Magazine, the rate in which individuals die by suicide are at its highest since World War II. Recent analysis released by the Centers for Disease Control and Prevention’s (CDC) National Center for health Statistics, 14 out of every 100,000 Americans died by suicide. It is one thing to hear that America suffers from a high rate of suicide and suicide attempts. But what if someone that we love, know or acquainted with ends their life by suicide? What could we possibly do to stop someone from taking his or her own life? What can we do to address the high rate of suicide among the veterans? How can we fail to see a loved one or a neighbor struggling?

According to Price (2017), the tragedy of suicide demands a proactive and coordinated response from everyone in the community. As caring individuals, we need to remind ourselves that working together with compassion and commitment we can make a great difference in the lives of those who are contemplating suicide and reduce the number of our veterans, youth, older adults dying by suicide. The statistics on the problem of suicide are alarming:

- Suicide is the 10th leading cause of death for Americans
- Every day, approximately 125 Americans die by suicide
- There is one death by suicide in the US every 11.1 minutes
- Suicide takes the lives of over 47,000 Americans every year
- Suicide among males is 4 times higher than among females.
- About 21 veteran/active duty members die by suicide every
- There is one suicide for every estimated 25 suicide attempts, and
- There is one suicide for every estimated 4 suicide attempts in the elderly

(CDC)

These statistics are not only alarming, it also elicits immediate action on our part. Each of us has an individual role to play in the fight against suicide. There is evidence that bolstering our personal and community interconnectedness can make a significant difference. According to the Suicide Prevention Resource Center, increasing the connections among individuals, family, community and social institutions can be a major protective factor for preventing suicide. A strong support system is vital in our effort to prevent deaths by suicide. Also, there are numerous governmental and non-profit organizations that work tirelessly to educate the society about suicide prevention awareness. For example, The Suicide Prevention Resource Center provides staffing and other support to the Action Alliance and for Zero Suicide, an initiative based on the belief that suicide deaths for individuals receiving the right care are preventable.

Locally, KernBHRS’ crisis hotline (1-800-991-5272) serves the community 24-hrs as a valuable resource in crisis intervention and suicide prevention. Non-profit organizations such as Save a Life Today (SALT), among others works tirelessly to promote suicide prevention awareness and assists those bereaved by suicide. If you or someone you know is struggling with suicidal thoughts or you think is at risk of suicide, call the National Suicide Prevention Lifeline, 1-800-273-TALK (8255), a 24-hour toll-free confidential hotline. This hotline has helped more than 6 million since its inception in 2005, routing calls within its network of more than 160 crisis centers, including KernBHRS Crisis hotline. Also, thanks to collaboration between SAMHSA and the Department of Veterans Affairs, military service members, veterans, and their families can call the Lifeline number, press “1” at the prompt and be connected to VA counselors.

Being a caring friend, family member, and neighbor can go a long way in preventing our fellow Americans from getting to the point of suicidal thoughts. It all begins with asking the question, “Do you have thoughts of suicide?” Will you play your part?  

-Jerrickson Ajax Palvannan

References


TED conferences are held every year and every TedTalk has a message worth spreading. There are a number of TedTalks that have been released that focus on mental health. They offer an informative different perspective. There are also TedTalks that focus on suicide.

Casually Suicidal is a TedTalk by Sarah Liberti where she discusses in fact being casually suicidal. Liberti brings up interesting points such as when we as people think about suicide we expect to see the person who is crying, in an obvious crisis such as screaming or not very coherent. What about the person who gets up every morning goes to work, goes to school, performs routine acts of life and is suicidal? Mental health is not something that we can see but it is something that we can ask about. https://www.youtube.com/watch?v=S8bJ3YlgL1Q

Why We Choose Suicide is another TedTalk by Mark Henick. He describes his suicide attempt and the thoughts he felt during it, asking himself “should I hang on for just one more day? He discusses what it is like living with a mental illness. He compares living with a mental illness as being in a dark tunnel you cannot escape from it is a constant dark tunnel with words like “you are not good enough” “you’re not smart enough” lingering in your head at all times. He then asks the audience to think about that for a moment, being in so much constant mental pain. The TedTalk offers a different perspective in regards to suicide it is about prevention but it also provides empathy for the people on the other side not suffering from a mental illness. https://www.youtube.com/watch?v=D1QoyTmeAYw

Kevin Briggs is a former Sergeant that patrolled Marin County, the south end of the Golden Gate Bridge, he describes the law enforcement perspective of working the Bridge. Briggs describes seeing people jump and speaking to one person before the person completing suicide. Jason Garber the man he spoke to described feeling as if there was an opened pandora’s box around him but there was no hope. Kevin Briggs continues with his TedTalk describing a time when he helped save someone as well; showing the hope that there is left in the world. https://www.youtube.com/watch?v=7Clq4mtiamY

-Brenda Barrera
The political power of being a good neighbor
Tedtalk.com by Michael Tubbs

Mayor Michael Tubbs, historically the youngest mayor of a city of at least 100,000 people speaks from a personal perspective, from past trauma and a product of "concentrated poverty." He also speaks from the perspective of "exceptionalism" a person who attended Stanford University and who worked in the white House in Washington, D.C. In this Ted-talk he recalls the hurtful day of hearing about the death of his cousin. After experiencing the anger and rage of this injustice. His journey of grief took him to purpose. He remembered the stories of his grandmother, the bible story of the Good Samaritan. He took the basic premise of this story to create a "restructuring of the road" to change the political structure, by running for City Council and then running for Mayor in the city of Stockton, California. He talks about the common humanity of fighting for justice and peace for all people. Many of the tasks at hand have included creating a community clinic for the undocumented citizens of the south area of town.

He states that in 2010, as he ran for Mayor the city of Stockton filed for bankruptcy. The city had a 23% poverty rate and the unemployment rate was up to 30%. Since being in office he says that his office has worked to reduce the homicide rate by 40% and has seen a 30% reduction in violent crimes. Working in the restructuring of community development has brought about a good work. This same attitude, of seeing the humanity of all people, and helping those that are disadvantaged, left behind, or found for dead or decaying on the side of the road. The decaying and the hurting or those individuals that call the crisis hotline. We have the opportunity to help all those that call us, by finding their humanity; which means relating to them as people and removing our own biases, anxieties and taught-belief systems. In this, we have an opportunity to restructure the road.

How we become good neighbors
As a Crisis Worker, it is important to have compassion and empathy for those that are struggling through emotional pain. We can lend a hand in community restructuring by providing much needed referrals and resources to individuals that may be suffering from chronic homelessness and a related mental illness. Oftentimes personal trauma may have been a factor to causing their current living dilemma. The homelessness epidemic creates many social perils such as unemployment disparities, loitering and an increase in crime. As an agency we are in a unique position to offer hope to those who are homeless. We are good neighbors, because we are on the frontline providing the much needed friendly ear to those who are hurting and to those who are in need of social services.

- Yvonne Kendrick

Link:
https://www.ted.com/talks/michael_tubbs_the_political_power_of_being_a_good_neighbor#t-16223
“The Ripple Effect of Suicide”

Suicide not only affects the life of the person who passes, but also the lives of everyone who surrounds them (Sandler, 2018). The ripple starts out small, but ultimately gets larger and spans out across a distance. This is comparable to suicide due to the fact that suicide affects so many other people in the community. Although the family and people closest to the individual who died by suicide are impacted the most, people in the community can also be affected by the loss (Sandler, 2018). Thus, an entire community can be changed by suicide. By increasing support, helping inform people about mental health resources, and decreasing stigma, we can work towards suicide prevention.


-Anxiety Disorder in College Students –Diana Mendoza

There has been a reported 60 percent of today’s college students suffering from anxiety disorders and psychological distress. What is giving our students anxiety? Distress? College students have many things to worry about and become overwhelmed and stressed. Diane Dreher article “Why Do So Many College Students Have Anxiety Disorder?” points out that there have been three major changes in our cultures that correlate with anxiety disorder within college students.

The first cultural change is an increase in materialistic values known as “consumerism” and being financially successful. Today college students’ “main goal is to be financially well” according to UCLA Cooperative Institutional Research Program, and they compared this finding back to the 1960s, when students main goal was “devolving a meaningful life.” The second change is the rising cost of college throughout the year’s college tuition have been increasing, in the 1980 college tuition was 86 dollars per semester. Today college tuition is about 13,000 per year or 50,000. The third change, delayed adulthood and external locus of control, earlier generation younger adults had the chance to make their own decision and had control of their own life, but today we see that young adults relay on their parents to pay bills, some choose their major. The three cultural change that were mention in the article can play a big factor