

Talking openly shows no one is alone

By Tom Kertes
Haida Gwaii Observer

Last week over 30 community members from all over Haida Gwaii attended a two-day workshop in Port Clements on suicide first aid. This workshop, sponsored by two local collaboratives for child and youth mental health, provided participants with practical ways for helping a person with suicidal thoughts. The workshop was attended by mental health care providers, elders, teens, teachers, youth workers and other community members.

Participants started by reflecting on how suicide has affected our own lives and on how differing beliefs and attitudes about suicide inform our responses. Like any community, many of the participants at the workshop had been directly touched by suicide. Having time to openly share with each other about suicide helps remove stigma.

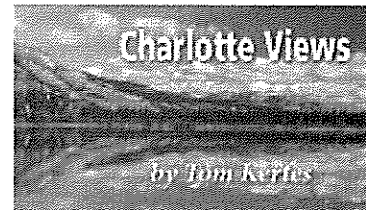
Suicide has been part of my family for many years, even generations. Far from being stigmatized, my family has always acknowledged the fact that my great-grandfather committed suicide. Another relative, a great uncle, also committed suicide. A close cousin, Aaron, attempted suicide several times as well, when he and I were both in our mid-twenties.

I vividly remember the first time I heard news of Aaron's suicidal state. My mother had left an urgent message on my phone, and when I heard the recording I fell to the floor in

tears. At the time, I did not understand that many people think about suicide, and even plan it, without actual harm to one's self. I fell to the floor in tears because I incorrectly believed that "thinking about suicide" meant "already dead." But this was not true at all. When Aaron told us about his thoughts, what he actually did was turn away from death. This turning point helped bring him the supports he needed.

Aaron, like each of us, is unique, and his journey through a suicidal state reflects just one aspect of what makes him who he is today. Aaron's life has included mental illness and recovery, with the health care system working in the way that it's meant to work. Over a period of many years, including several trips to a mental hospital, Aaron faced thoughts of suicide while receiving the health care and support he needed to help him manage bipolar disorder. Now he is stable and independent. He has moved beyond persistent thoughts of suicide.

People face suicidal thoughts for many reasons, not always due to mental illness. What we do know is that suicidal thoughts and actions are more common than we often think and that suicide is different for everyone who faces it. According to CTV News, more than 3,000 people commit suicide in Canada each year, with an estimated 20 to 25 attempts for every death. Youth are particularly at risk for suicide, with suicide accounting for 24 per cent of



all deaths among 15- to 24-year-old Canadians.

When it comes to suicide first aid, it's essential to ask directly if someone is thinking of taking their own life. If the signs are there, ask directly about suicide. At the workshop we were invited to practice asking this essential question. We'd imagine a person who is telling us, through words and actions, that they may be at risk of suicide. Then we'd practice saying, "Are you considering or thinking about committing suicide?"

This direct question provides a doorway to a larger conversation, which we also practiced as part of the training. Without going into all of the details (I highly recommend the workshop whenever it's offered), the key is to ask, listen and then connect to help. Being comfortable with the fact that lots of people face suicide shows that hope is possible, even at times when thoughts of suicide are front and centre. Asking about suicide directly says to the person at risk: You are not alone. With suicide in the open, you can refer your loved one or friend to counselling, a crisis line or another health care professional. And you can continue listening.