# Suicide Prevention

## Changing the narrative on suicide – start the conversation

**Close-up of several paper people holding hands

Description automatically generated**

## Introduction

When someone takes their own life, the impact on family and friends is devastating and widespread, with many people throughout the community feeling the aftershocks. In my role as Safeguarding Manager and in both my past professional work and personal life I have all too often seen these impacts first hand.

The Diocese of Bath and Wells, in acknowledging its role in often being there for people at times of both great distress and bereavement, is committed to playing its part in trying to reduce the prevalence of suicide and to support those bereaved by it.

The information contained in this document have been compiled to offer helpful sources of support and not is an alternative/replacement for aiding a sufferer to be safe or seeking urgent help. Our aim as a diocese is for our staff, clergy, officers and volunteers to have some understanding of how to respond to colleagues or individuals experiencing a decline in their mental health, including suicidal thoughts or behaviour. Information and helpline numbers provided in this paper

**Ben Goodhind**  
Safeguarding Manager

## Considerations

Confidentiality

A helper should not make decisions on their own regarding the measure of a sufferer’s suicidal state, or acute distress. It is also important that those supporting are aware of the boundaries of confidentiality and that confidentiality must not be promised where disclosure identifies someone as being at risk of serious harm.

## Suicidal thoughts and behaviour

Suicidal thoughts can be very intrusive. They can range in intensity from wondering what it would be like to not be alive, to making an action and a plan to take their life. Anyone can have suicidal thoughts in a period of stress. Distressing events may bring about significant challenges, struggle with addiction, loss or grief, confusion around identity, sudden trauma, experiencing isolation, conflict and other experiences where feelings of anger or acute sadness are felt. Some people suffer suicidal thoughts particularly with high levels of anxiety or depression where they think they cannot easily change their situation. Thoughts of this kind can come from a sufferer wanting an escape from a situation and can be immensely distressing and the sufferer will need medical help.

**Intentional thoughts by a sufferer to take their life, where a change in a person’s behaviour is observed, or where an individual has made plans for suicide are always to be taken seriously.**

## Signs and symptoms of suicidal thoughts and behaviour

* Expressing the intent to hurt or kill themselves.
* Talking or writing about it.
* Looking for ways to kill themselves.
* Hopelessness or thoughts of having no purpose to live.
* Feelings of rage, anger or revenge.
* Withdrawing from friends and family.
* Anxiety, agitation, struggling to sleep or sleeping all the time.
* Saying goodbye or putting their affairs in order.
* Sudden dramatic improvement in mood. People don’t suddenly improve from depression, and it may symbolise a decision has been taken to end their life.

Suddenly giving away possessions or sentimental things.

## Assessing the risk

Many helpers are hesitant at asking questions about suicidal intention for fear of making the situation worse. Starting the conversation can save lives.

Ask the individual clearly and directly:

* Are you having thoughts of ending your life?
* Do you have a plan to? How specific is it? Do you have what you need to carry it out?
* Have you been drinking alcohol or taking drugs?
* Have you attempted suicide before?
* Is there anyone you think you can turn to for help? Have you told anyone else?

## Assist

If the person requires immediate help dial 999. (pass relevant information onto the professionals)

In non-urgent situations you could offer to accompany them to their doctor’s surgery or hospital, ask if you can ring a family member or friend to come and be with them and work with the individual to develop a plan to keep them safe.

You can also draw on additional help from:

* The Samaritans - call 116 123 or text the word ‘SHOUT’ to 85258 for free and confidential support, 24-hours a day)
* Somerset Mindline - call 0800 1381692
* CALM (for men) – call 0800 58 58 58
* Papyrus (suicide prevention support for under 35s – call 0800 068 4141 (9am to midnight, seven days a week)
* YoungMinds (supporting young people and parents) – Crisis messenger text the letters ‘YM’ to 85258 (support is available 24 hours a day, seven days a week)
* Parents’ Helpline - call 0808 802 5544 (Monday to Friday, 09.30 – 16:00)

## Debrief and bereavement support

It is important when experiencing a distressing situation to access some space to talk through what you have experienced. Likewise, if you have suffered a bereavement to suicide, we want to ensure that support is there for you.

[Visit the website of Mind,](https://www.mindinsomerset.org.uk/our-services/somerset-suicide-bereavement-support-service/somerset-suicide-bereavement-peer-support-groups/) the mental health charity, to find out more about the Suicide Bereavement Groups they host across Somerset or please get in touch with your line manager or a member of the safeguarding team.