

Suicide Prevention in the Workplace: Whose Responsibility is it? A Call to Action for Business Leaders

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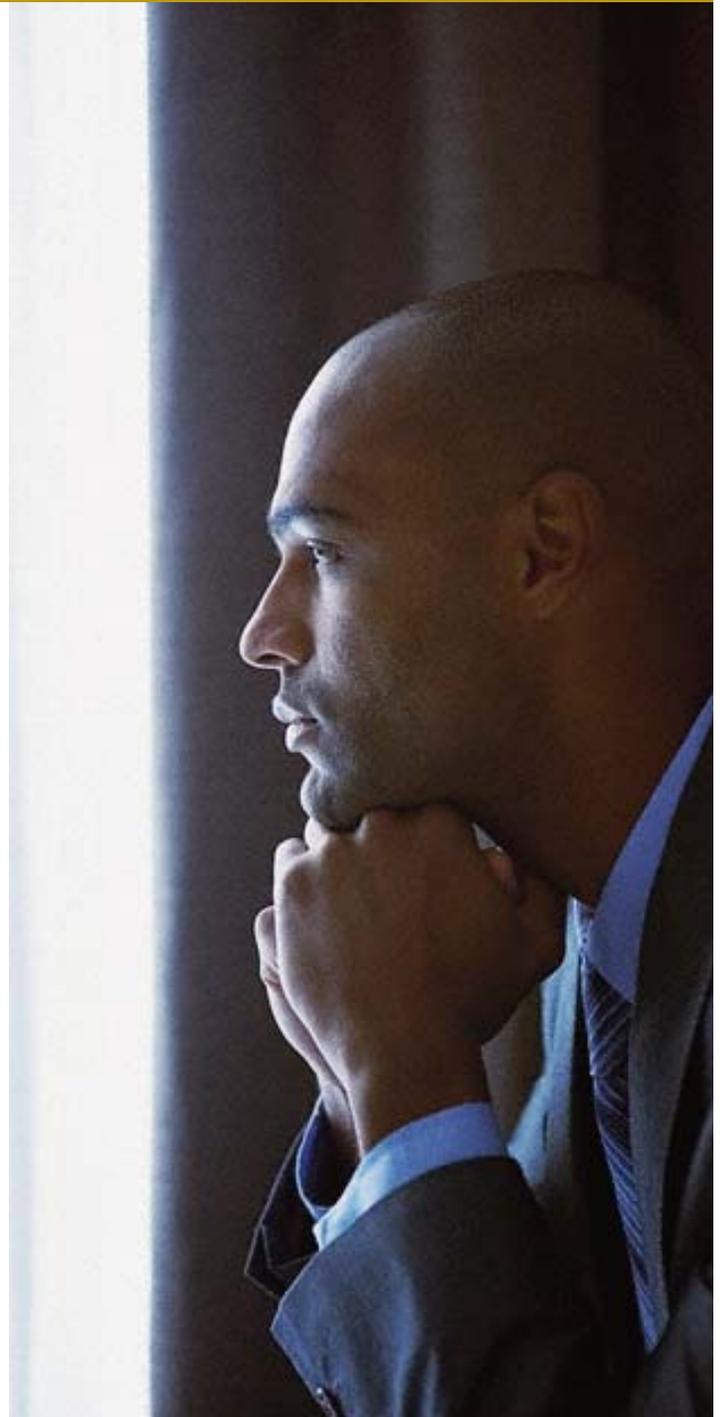
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“In the night of death, hope sees a star, and listening love can hear the rustle of a wing.” –Robert Ingersoll

In the United States a suicide occurs about every 16 minutes¹, and yet at almost every level of our society, people are reluctant to deal with suicide directly. Some of this avoidance has to do with stigma; stigma that is rooted in the fear of the unknown. Mental health is still largely a mystery to many, and because many don't know better, they place all the blame on the sufferer, and unknowingly become a big part of the problem. Another reason for the avoidance is that people are unclear who is responsible for what; that is, even if they do want to help, they don't know how to get involved or what to do. Many compassionate business leaders today struggle with the question: whose responsibility is it? This white paper will explore the logic behind why suicide is public health issue that requires all communities to be involved.

Is suicide an issue of personal responsibility? While people would never choose to be afflicted with depression or other mental disorders, they can make choices every day to manage their illness and improve their mental health. Most people who die by suicide (some estimate as many as 90%) have mental disorder²so the problem of suicide on one level has to do with taking care of mental health. Just like we exercise and eat well to keep our bodies healthy and to avoid the heart disease, cancer and death that comes from neglected fitness, we also need to be personally responsible for taking care of another bodily organ: our brain. All of us have mental health issues, whether it is because of stress, family disruption, grief, or trauma or because of a biological predisposition of our brain leading to depression, bipolar disorder, anxiety, or other mental disorders. As such, we are responsible for taking care of our brains so that we can function to the best of our abilities. So, as a business leader, what can you do on a personal level to promote mental health?:

- **Be a role model for wellness.** Sleep 7-10 hours per night. According to the Surgeon General, sleep deprivation



can exacerbate cognitive difficulties leading to bigger mental health problems.³ Monitor your own tendency to self-medicate – we all do it to some extent but our “choice of drug” might be different: alcohol, caffeine, cigarettes, work, shopping, achievement, food and others. Examine your life choices – do they represent balance, moderation and variety? If you want your workforce to be mentally resilient, you need to set the bar by being mentally healthy yourself.

- **Model help-seeking.** While leaders are expected to be superheroes, you are human just like everyone else, and sometimes us humans experience dark times. Depending on your status, you might find yourself all alone on the tightrope when depressed, anxious or just off. Get support when you need it. Whether it is from friends, support groups, faith communities, or families, reach out when you are troubled, and if the first person you find isn't meeting your needs be persistent in your search. Human beings are hard-wired to connect to others, and isolation is a significant risk factor in an escalating mental health problem, so ask for help. When times become difficult, get treatment and stay with it. If you have a mental disorder or if your issue is not being resolved through the support of loved ones, you may need extra help. One in five people⁴ at any given time have a diagnosable mental disorder, so you are not alone; however, it is up to you to seek treatment and fully engage in the process. Treatment works⁵ – when followed appropriately 80% of those treated for depression get better – and usually involves some combination of medication and talk therapy.
- **But...**Sometimes individuals are not aware of what a mental disorder is; sometimes the symptoms of their disorder (e.g., grandiosity in bipolar disorder or fatigue in depression) prevents them from seeking appropriate help; sometimes there are significant barriers (e.g., financial, transportation, waitlists) that get in the way; and sometimes the shame is too great to take that first step. Just as you would not expect someone suffering from cancer to recover on their own, individuals in mental distress need a circle of care.
- **So...**in order to become a successful mental health advocate, you not only need to model wellness and, when appropriate, share your stories of recovery, you must also be the one to engage these larger spheres of influence. The change starts with you.

Should suicide prevention be a family responsibility? Because there is often a strong genetic factor⁶ in several forms of mental disorder and attempted suicide, families have a responsibility to look out for one another and notice early signs and symptoms. Family members can help someone who is suffering in several ways:

- **Give accurate history:** Because family members know their loved one over an extended period of time, they are sometimes better able to identify fluctuations in behavior and are able to track the history of life changes that might trigger a debilitating episode of mental distress.



- **Allies in recovery:** Often they can be considered important allies in a person's recovery; they can sometimes provide the resources and a safe haven needed when no one else can. In the suicide prevention field, family survivors of another's suicide are often the most passionate and outspoken leaders.
- **But...**Sometimes family members are part of the problem. Sometimes family members have caused the trauma or neglect that fuels a person's mental distress. Sometimes family members deny that problems are emerging and do not support the help-seeking process. Sometimes family members hold unrealistic expectations, causing undue stress that triggers suicidal thinking.
- **So...**When appropriate caring business communities might need to engage family members in the circle of

care when concern arises. But sometimes the workplace is the only family a person has – what is your duty to care? What are your limits?

Is suicide prevention the responsibility of our workplaces and communities? As a public health and social justice issue, suicide prevention should be treated just as any other problem facing our community. Suicide prevention today is where cancer prevention was in the 1950s. Because people do not understand it, they do not know how to handle it. Our workplaces are ideal venues to disseminate knowledge and skills and to change culture through social marketing. Business leaders can become involved on this level in a number of ways:



- **Become trained as a suicide prevention gatekeeper and train your workforce.** Suicide prevention gatekeeper training is like the CPR for mental health crises. People who are trained are not expected to be experts or to have the professional skills needed to help a person to recovery; they are just trained in simple behaviors to keep another alive and link them to help. There are several national programs that offer such training for those people who are likely to come into contact with someone who is suicidal. Gatekeeper programs such as QPR (Question, Persuade, Refer), Yellow Ribbon “Be a Link,” and ASIST (Applied Suicide Intervention Skills Training) cover the basics of warning signs and risk factors and what gatekeepers can do to get a suicidal person to appropriate care. This training is appropriate for all levels of staff. For more information on the different programs go to: www.sprc.org/library/SPRC_Gatekeeper_Matrix.pdf.
- **Develop suicide awareness programs and campaigns.** There are several times during the year when suicide prevention programs might be highlighted. Consider the following:
 - During new employee orientation put Suicide Prevention Lifeline (www.suicidepreventionlifeline.org)

or Yellow Ribbon “Be a Link” (www.yellowribbon.org) wallet cards or magnets with other resource materials. Both of these unobtrusive tools give employees the means to reach out to a help line (1-800-273-TALK) during a crisis.

- Recognize World Suicide Prevention Day (September 10th) or National Suicide Awareness and Prevention Week (the second week in September) with an internal message campaign or healing ceremony for those who have survived of another’s suicide.
- Sponsor a table at a mental health benefit event
- Conduct activities on Depression Screening Day (October)
- Bring in speakers during Mental Health Awareness Month (May)
- Connect with a faith community to observe a Blue Holiday Service – for those who might be experiencing grief or loneliness during the holidays because of a suicide loss.



- **But...** A workplace might be reluctant to support such a cause given the stigma related to the issue of suicide. Or worse, what if suicide awareness was raised with the goal was to direct people in crisis to help, and the mental health services they are being directed to are not adequate due to being under funded?
- **So...** truly inspired business leaders must look beyond their workplaces to address these larger scale issues at government and cultural levels.

Is suicide prevention the responsibility of our systems of government or broader systems of cultural influence?

Because of the great unknowns and misinformation, stigma exists that causes discrimination and prejudice both for those who struggle with suicidal thoughts and for those who have lost loved ones to suicide. The result: a double standard for resources directed to mental health versus other physical disorders. This disparity is transmitted into underfunded treatment centers, creating obstacles to care. Mental health parity is a cause that seeks to ensure that mental health treatment is covered at the same rate as other physical disorders. Business leaders play an important role in this legislation because their voices of why it makes good business sense are particularly powerful. So, how can business leaders create change on this broader level?

“The world is full of suffering. It is also full of overcoming it.” – Helen Keller

Suicide is such a complex and frightening phenomenon, it often overwhelms people into immobilization. But there are many ways to make a difference, and everyone can share the load of overcoming the suffering. As a leader with significant influence, you can remind people that suicide affects everyone, and we have a shared responsibility to prevent it. Let them know that getting help is good thing and that treatment works. And finally, tell them they are not alone and many resources exist to help. **You can be a shining light of hope to help those in darkness see their way to a better day.**

- **Start a letter writing campaign or testify in support of mental health parity.** Learn about grassroots advocacy⁷ and how to influence legislative decision makers. Become educated on legislation in your state and work with other mental health advocates from NAMI (National Alliance of the Mentally Ill) or Mental Health America to become a collective voice in government.
- **Get the larger community involved.** Organize a community walk in solidarity for hope by networking with local mental health and suicide prevention organizations. Invite faith communities, business leaders, high schools, and government officials.

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University and the Executive Director of the Carson J Spencer Foundation. Together with BACCHUS, Regis and the Carson J Spencer Foundation are recipients of the Garrett Lee Smith Suicide Prevention Grant. Dr. Spencer-Thomas would love your comments on this article. Please contact her at 720-244-6535 or Sally@CarsonJSpencer.org

1 American Foundation for Suicide Prevention (www.afsp.org)

2 National Institute of Mental Health 2007

3 *Mental Health: A Report of the Surgeon General* from <http://www.surgeongeneral.gov/library/mentalhealth>

4 Surgeon General, 1999 from <http://www.surgeongeneral.gov/library/mentalhealth/toc.html>

5 National Institute of Mental Health; Mental Health America Colorado

6 Vohr, E. (2007, March 19). Hopkins-led study links attempted suicide with genetic evidence. The Newspaper of the Johns Hopkins University, 36(26) Retrieved from <http://www.jhu.edu/~gazette/2007/19mar07/19suicid.html> on September 17, 2007.

7 SPAN (Suicide Prevention Action Network) has grassroots advocacy tools: www.SPANusa.org