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Preventing Suicide is Possible

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“The moment I pulled the trigger I immediately thought, ‘Oh my God, what did I just do?’ The first thing I thought was that I didn’t want to die,” 17-year-old Emma Benoit shares. Last summer, in the depths of hopelessness, Benoit tried to take her own life. Today, she smiles at the future and finds joy in the present. Like Benoit, the majority of survivors of suicide attempts are happy to be alive, and often go on to have successful lives once they learn how to maintain mental health for themselves.

Suicide is a health crisis in America. Danita LeBlanc, Louisiana Department of Health Suicide Prevention Coordinator, provides this analogy, “A Boeing 737 has 120 passengers, and 121 people die by suicide a day in the U.S. If a Boeing 737 fell out of the sky every day, we would devote some resources to preventing that. Suicide needs to be addressed as a public health issue.” An American dies by suicide every 12 minutes. Suicide does not discriminate by age, race, gender, or class. It is a threat that must be reckoned with, but it can be prevented. There is hope.

What Is the Cause?

It is critical to understand that not one singular thing causes suicide. It is complex with psychological, social, biological, cultural and environmental factors involved. Each person is different, but overwhelming feelings play a role in each situation. Leblanc explains, “People often have had some kind of a loss that’s significant to them, and they’re in pain. They’re also feeling alone, which may have no basis in reality to how alone they actually are.” Loss, pain, and feeling alone are common factors. Stephen Aguillard, LCSW and Clinical Services Director at Capital Area Human Services contributes, “The public has the misconception that people who die by suicide are weak and their choice is a copout. It’s easy for someone who has never experienced those feelings or worked with individuals who go through these

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thoughts to think that.” He goes on to share that individuals who take their lives are in a place of total despair and feel like there is no possible way out.

Suicide often contains an element of impulsivity. Seventy-one percent of suicide survivors reveal that less than an hour passed between making the decision to act and making the attempt to take their lives. For Emma Benoit, less than 15 minutes elapsed between her decision and pulling the trigger. Lacy Dicharry, survivor and advocate for mental health, emphasizes the acute feeling of despair during that time frame, “Suicide happens because in that moment, the pain outweighs the person's perceived ability to cope with that pain.”

Although the impulsivity is frightening, it can also be encouraging. LeBlanc elaborates, “Although people can feel bad for a while, the intense ‘I want to die right now’ urge often passes. If you can get them through that short period of time where it is very intense, you have the chance to get them help.” She is an advocate for making environments safer if you know someone is suicidal: “One of the things people can do is remove the way they are planning to kill themselves. Taking the guns out of the home temporarily and making pills harder to get to can make a huge difference.”

What Is the Impact?

If you are reading this, there’s a good chance you have been affected by suicide. One in 63 Americans are suicide loss survivors, which means they have lost a loved one to suicide. But the ripple effect is far greater. For every suicide, 147 people are exposed, and 6 have significant life disruption. The perception of being alone for the suicidal individual is exactly that, a perception. Kevin Hines, a survivor who jumped from the Golden Gate Bridge and founder of mental health organization CNQR, shares passionately, “Depression is the greatest liar that we have ever known. Depression will lie through its teeth to get you to hurt yourself or someone else.”

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Benoit experienced her impact firsthand while she was in the hospital during recovery. “The thing that was so overwhelming was everyone there supporting me and praying for me. In my mind, I thought that I wasn’t really important to others because I wasn’t important to myself. Everyone really opened my eyes to see how important and loved I was,” she recalls.

Many people wonder what they could have done to stop someone from taking his life, which is why we all need to pay attention to the signals people in our lives may be sending us.

How Can You Prevent Suicide?

1. Identify. “Suicide can be prevented but it has to be identified first,” Aguillard instructs. Identifying factors to look for are behaviors, language, feelings, and personal history. “I do the work in suicide prevention because it can be prevented many times if we know what we are looking at and know what to do with what we are seeing,” says LeBlanc. She shares that identifying can be done by changing the way we think about the signs. “I teach people in suicide prevention trainings that people give us invitations. They invite us to help with their distress.” Instead of seeing the signs as symptoms of an illness, think of it as an invitation for you to accept in helping them.

2. Talk About It. “One of the main reasons I didn’t speak about it was because I thought people would think it was for attention or I was being a victim,” Benoit confesses. Dicharry confirms the stigma attached to discussing depression or suicide, “Before people feel comfortable talking, people have to be willing to listen.”

One of the largest myths about suicide is that asking a person if they are thinking of killing themselves will give them the idea. Aguillard, Dicharry, and LeBlanc disagree. LeBlanc shares that when she has asked that important question, “Almost always what I get is a sigh and gladness that someone noticed.” Instead of giving them the idea, you are opening the door for them to talk about it, says Dicharry.

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“I find when you connect the behavior you’re noticing with suicide, it’s an easier way to ask about it,” LeBlanc adds. After acknowledging what you’ve seen, then ask, “Are you thinking of killing yourself” or “Are you planning to take your life?” Ask directly instead of asking about harming themselves. LeBlanc clarifies, “They are thinking suicide will fix the pain. You have to ask a direct question to get a direct answer. Harming yourself can mean something different.”

Hines adds, “Put yourself in their shoes and recognize that brain dysfunction and brain instability comes from misfiring chemistry in one’s brain. Look at them with understanding and empathy and say, ‘I’ve got your back, and whatever you need from me, I’ll be there without judgment. I will walk with you to services or help.’”

Aguillard says, “Ask the hard questions. The key is you can’t be afraid to ask the question. Don’t be afraid to get your child or family member help. Experts in our community are here.”

3. Get Help. Once you have identified the signs and talked about it, get help. Reach out to resources, and call the National Suicide Prevention Lifeline or text the Crisis Text Line. The lifeline is both for people who are suicidal or for those who are concerned about someone who is suicidal. The next step is contacting local resources that can provide counseling and further care. Aguillard challenges, “Think about it like this, if your kid ends up in the hospital because of a heart condition, you would have no problem telling anyone. But if it’s a suicide attempt, you don’t want anyone to know. The message that is sent is shame.” Treatment should be a priority whether it’s physical, emotional, or mental health.

4. Stay Healthy. Mental wellness is the key to long term prevention. Dicharry shares from her own experience, “There is hope. I got proper medical assistance, made some lifestyle changes, and built my social community. Recovery is possible.” We have to change the conversation from “mental illness” to “mental health.” Dicharry and Hines both proclaim that individuals need to take care of their brain health just like heart health.

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“There are millions of people who have survived. They have found ways to cope and heal and build a happy life,” Dicharry says. Benoit, Dicharry, and Hines are evidence of those who are living their best lives after surviving attempts. Together, we can prevent lives being lost to suicide and welcome more people into healthy conversations about their mental health and wellness.

- <https://suicidepreventionlifeline.org>
- 1-800-273-5288
- <https://cicla.org>

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