

PREVENTING SUICIDE DURING AND AFTER THE COVID-19 PANDEMIC

For the near-term, we are and will be living through a global pandemic. We have no firm estimate of how long it will last, whether or not we or our loved ones will be infected by this virus or worse potentially die from it, or how long our lives will be disrupted. These uncertainties can cause and/or heighten anxiety and fear. For those among us who live alone, it will severely increase our isolation from others. In short, both Covid-19 and the recommended strategies to “flatten the curve” or slow the spread of the disease, increase the risk of suicide among those already most vulnerable and, for others, it creates a risk that was low or did not exist prior to the pandemic.

The World Health Organization estimates there are 800,000 suicides every year across the globe. Suicide occurs among all populations, however those at greater risk live in 3rd world nations, rural and economically challenged regions, where access to lethal means is greater and access to good, quality physical and mental healthcare is less. Suicide is a leading cause of death, especially among the young, and is correlated with a prior (known or undiagnosed) mental illness and an external situation that creates an immediate crisis. It is important therefore to know a little about how a pandemic might affect those among us who live with one or more of the following mental illnesses that might be especially impacted by this pandemic.

Anxiety – A pandemic can significantly increase the severity of anxiety symptoms including: excessive fears of external threats, panic attacks and avoidance, restlessness, worrying, physical sensations (heart racing, sweating, etc.), irritability, difficulty concentrating.

Obsessive-Compulsive disorder (OCD) – People with OCD live with checking and repetitive types of behaviors to deal with their illogical fears of contamination that can become significantly worse during a pandemic. Already excessive hand washing or showering can increase leaving skin raw, cracked and bleeding.

Depression – During a pandemic for some the symptoms of depression: depressed mood, sleep or appetite changes, feelings of hopelessness and helplessness, inability to enjoy or find satisfaction in life and thoughts of suicide could worsen. For others with depression they may appear better during the pandemic (they become focused on the crisis and less on their illness), but then after the crisis ends their symptoms might re-emerge.

Mania – People with Bipolar disorder who have episodes of mania may engage in high-risk behaviors during a pandemic. For example they may have grandiose fantasies and believe that they can be around others or touch objects and be immune from catching or transmitting the virus or if they were they to get sick with the virus, not engage in necessary self-care.

Schizophrenia - People living with schizophrenia or other psychotic disorders have a heightened sensitivity to everything in their life, internally and externally. A pandemic can magnify their delusions (fixed, false beliefs) and/or hallucinations (altered perceptions of things in their environment) especially around a disease that they believe might be attacking them personally, leaving them paranoid/fearful, isolating or with increased agitation and distorted thinking.

SAVE's Helpful Tips: <https://save.org/wp-content/uploads/2020/03/COVID-19-Helpful-Tips.pdf>

World Health Organization's Mental Health Tips: https://www.who.int/docs/default-source/coronaviruse/mental-health-considerations.pdf?sfvrsn=6d3578af_2

International Assoc. of Suicide Prevention Briefing Statement: https://www.iasp.info/pdf/2020_briefing_statement_covid19.pdf

International Crisis Centers: https://www.iasp.info/resources/Crisis_Centres/

Facebook Coronavirus Information Center: https://www.facebook.com/coronavirus_info/?page_source=search

WhatsApp connector: <https://www.whatsapp.com/coronavirus>



Tips for Dealing with a Pandemic Now

1. Limit exposure to the news and only rely on credible sources for information and updates such as the World Health Organization, the Centers for Disease Control and Prevention, local or regional Public Health Departments.
2. Check-in more frequently with those living with a mental health issue. They are likely not able to see their regular doctors or therapists, so checking in with them is helpful.
 - a. Know the warning signs of suicide: talking about death and dying, looking for a way to die, expressing feeling hopeless, helpless, having no reason to live any longer, no purpose to life, feeling like they are a burden or that they are trapped.
 - b. Some places are using telemedicine and online assistance programs as well as retired and other volunteer mental health professionals that can be a good resource.
 - c. Help support them to follow any existing safety plans that they have and ensure that they are taking their medications as prescribed.
 - d. Pets are great companions and a source of support, but if they do not have a pet, suggest they look online and through social media for pet groups and videos.
3. Offer to help with their basic needs when possible. If possible, do their shopping for them so that they do not over- or under-buy products, ensure they have what they need that they might not know or think about.
4. Give them ideas on how to get through the days and nights when they might be more alone than typically. Staying connected is very important so suggesting telephone calls and texting can be helpful. Using social media platforms to stay connected during a pandemic is also helpful and easy, but ensure that a) this is moderated and not excessive, b) they are using it to stay connected and not to compare themselves to how others are living and dealing with the crisis and c) the things they are looking at online are credible and safe.
5. Monitor them for increased symptoms or a change in their behaviors. Ask them how they are doing and create a 1-10 rating system for them to give you a sense of how they are. 1-5 would be ok, 6-7 would indicate a need to increase support, and 8+ might suggest the need for intervention.
6. Suggest that they stay active. Taking walks, exercising, stretching, etc. helps just as does cleaning, organizing and connecting with others.
7. Restrict access to lethal means of suicide. Safely store medications, ensure firearms are safely stored or removed and keep ropes/cords safely stored.
8. Help them by setting boundaries on how much you will talk about the pandemic and their symptoms. It is ok to do this briefly and occasionally, but let them know there are other things to talk about and when you do talk with them correct erroneous or illogical information.
9. Suggest they create new routines to get through the pandemic that has altered their normal routines and patterns. Getting up at the same time, eating regularly, going to sleep at the same time all help keep them on a schedule for wellness. Have them let you know if any of this is not working for them or when changes occur.
10. Talk with them about learning a new skill (e.g. online courses, videos, tutorials, etc.), practicing something they want to get better at or starting a new hobby.

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Tips for After the Pandemic

1. Support them in limiting how much time they watch television and the news and talk with them about slowly increasing the amount of time on this.
2. Stay checked in with them, but help them by modeling more and more of their time can be done on their own and without the same level of need as during the pandemic. During the pandemic you may have initiated check-ins more, after the pandemic encourage them to initiate the check-ins with you.
3. Support their rebuilding contacts and relationships as well as encourage them to create new support systems.
4. Help them create new routines and daily practices that build on what they did during the pandemic but can be modified after to match their daily schedule, appointments, treatment, etc.
5. Support them and ensure that they return to their normal treatment plans and regimen of seeing their healthcare and mental health providers.
6. Monitor their symptoms (regardless of their diagnosis) to ensure it does not seem worse (e.g. manic behaviors, paranoia, checking behaviors).
7. Watch for signs of depression (returning or worsening) as they go back to what their life was prior to the external crisis and watch for warning signs of suicide (talking about death and dying, looking for a way to die, expressing feeling hopeless, helpless, having no reason to live any longer, no purpose to life, feeling like they are a burden or that they are trapped).
8. Assist them with connections to economic support systems (e.g. unemployment assistance) and/or support them with reintegrating to school, work or family activities.
9. Support and engage with them in their new hobbies and interests.
10. Ensure that they know local and national crisis contact numbers.

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