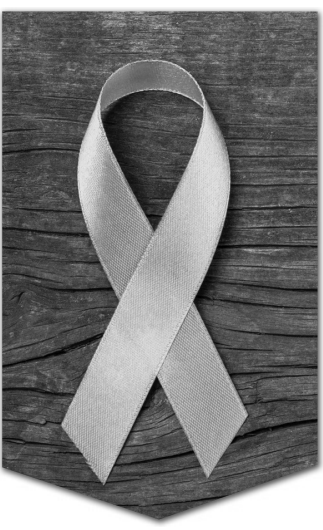


National SUICIDE Prevention Awareness

Warning signs of suicide



In June of 2018, the deaths by suicide of two high-profile celebrities garnered substantial attention. Within days of one another, fashion designer Kate Spade and television host and author Anthony Bourdain took their own lives.

The deaths of Spade and Bourdain prompted many to inquire about suicide, its causes and if there are any signs that might help them identify if a loved one is having suicidal thoughts. According to the American Foundation for Suicide Prevention, no single thing causes suicide. The AFSP notes that suicide is most often a byproduct of the convergence of stressors and health issues that, when coupled, create a sense of hopelessness and despair.

Depression and anxiety are two conditions most commonly associated with suicide. But the AFSP notes that most people who have been diagnosed with these conditions and actively manage them go on to engage in life. Undiagnosed depression and anxiety, as well as undiagnosed or unaddressed substance abuse, increase a person's risk for suicide. That's why it's so important for men, women and young people to learn to recognize warning signs for suicide and put themselves in position to promptly address their own issues or those of a loved one.

Speech

The AFSP notes that people who take their own lives may speak about doing so prior to committing suicide. People should seek help if they or a loved one talks about feeling hopeless, having no reason to live or being a burden to others. People who speak of feeling trapped or feeling unbearable pain also may be exhibiting warning signs of suicide.

Behavior

Behavior, especially behavior that can be linked to a painful event, loss or change, is another potential indicator that a person is having suicidal thoughts. Such behaviors include:

- Increased use of alcohol or drugs
- Looking for a way to end their lives, such as searching online for methods
- Withdrawing from activities
- Isolating from family and friends
- Sleeping too much or too little
- Visiting or calling people to say goodbye
- Giving away prized possessions
- Aggression
- Fatigue

Mood

Mood also is a potential indicator that a person might be having suicidal thoughts. In addition to depression and anxiety, people who are considering taking their own lives may exhibit a loss of interest in things they once enjoyed. Irritability, humiliation, agitation/anger, and relief/sudden improvement are other moods the AFSP notes may be warning signs for suicide.

The deaths of two highly regarded celebrities brought suicide to the forefront in 2018. Taking time to understand suicide and its warning signs can help people prevent tragedies. **More information is available at www.afsp.org. People who are in crisis or suspect a loved one may be in crisis are**

COTTAGE GROVE POLICE

400 E. Main Street

Cottage Grove

Emergencies Only: 9-1-1

Non Emergencies: (541) 942-9145

NORTH DOUGLAS COUNTY FIRE EMS

531 S. Cedar St

Drain, OR

541-836-2282

OAK TREE COUNSELING

Child Therapist 12 +under

(541) 623-0535

24-hour youth helpline
CALL or TEXT
(541) 689-3111



Looking Glass
Community Services



CRISIS HELP National Suicide Prevention Lifeline 800.273.8255
To contact the Crisis Text Line, text TALK to 741741.

Suicide *from AI*

Cottage Grove, a city with double the suicide rate of Lane County.

"We see a higher correlation of suicidal rates between people who feel social isolation versus people who feel community connection," said South Lane Mental Health Executive Director Damien Sands. "Community connection is that place in which a person feels engaged, supported and nurtured within their community."

A strong network can go a long way for people in need of mental health care services and in turn reduce the risk factors which may lead to suicide. Much can be done therapeutically at the crossroads of suicide ideation and mental health services, however finding solutions to each challenge is not necessarily weighted upon a singular organization or service.

"Access to good therapy is a cornerstone of being able to get support," Sands said, "but it's also these other critical areas — employment, housing, faith-based support — it's just community connection. It's finding something within the community that binds you."

Considering the range of factors which play into suicide risk and mental health, a robust system of care is one which can cast a wide net and have the tools to address a variety of problems from depression to drug abuse to post-traumatic stress.

A Network of Care

South Lane Mental Health serves what Sands estimates to be between 15 to 20 percent of the regional population. The nonprofit offers a broad variety of services, particularly for people who are facing resource challenges such as income or housing.

"I refer to it as more of a safety net provider," said Sands. "Where we are uniquely focused is helping those who are struggling with some kind of substance abuse, helping the person who's recently gone through some sort of tragic loss, being in a school setting to be able to give access to kids. ... So the idea is about creating those access points in different arenas."

Programs at the nonprofit run the gamut of general counseling, crisis services, case management, medication management, recovery services, supported housing and youth counseling.

With the understanding that not all who need help will willingly show up on the doorstep, the nonprofit is also proactive in its approach by employing efforts such as outreach on the street and staying engaged with other local entities.

One of those entities is the South Lane School District.

"It's a very unique thing," said Sands. "A lot of school districts don't have this, but we are embedded within the school system."

South Lane Mental Health counselors maintain a presence throughout the district, working with everyone from high school seniors down to kindergartners. Counseling may take the form of group therapy or one-on-one meetings, providing youths with easier accessibility to problem solving.

Though South Lane Mental Health appeals to a variety of needs, Sands emphasized that the broad scope of elements which play into one's stability

cannot be addressed by a single entity — it requires a combined effort.

"We are not a solution," he said. "We are part of the solution."

More such solutions may be on the way as an upcoming peer-led support program by the National Alliance on Mental Illness (NAMI) in Lane County seeks to provide group discussion-based services to the Cottage Grove area. NAMI has recently partnered with South Lane Mental Health to return services to Cottage Grove.

"NAMI is a great example of client-based advocacy," said Sands. "Folks who experience mental health conditions can then have a voice for themselves and sort of speak up and build peer-to-peer relationships."

NAMI's peer-led services are conducted by two facilitators who guide groups of between four to 15 members through a discussion of issues they choose to address. The facilitators of support groups are not mental health professionals, but individuals who have self-identified as living in recovery with mental illness.

"We're trying to get the word out that we're looking for individuals to facilitate our peer programming, whether that's a support group or an education class," said Jennifer MacLean, executive director of NAMI Lane County. "All the programs are peer-led and free and confidential."

NAMI's outreach into Cottage Grove will provide people with resources and referrals, but will not include diagnosing, medication or case management.

"We just had one individual trained, so now we're looking for a partner for her, so that way we can get, ideally, a weekly support group for Cottage Grove," said MacLean.

For youth in the community, a support group of peers already exists at Cottage Grove's Looking Glass branch as part of its rural program.

Looking Glass provides assistance for youths in the community who face challenges related to educational deficits, behavioral health issues, drug addiction and homelessness. The center aims to provide a space for youths to feel safe or just have someone to talk to.

Amanda Hampton, program supervisor of the Looking Glass rural program, acknowledges that the nonprofit sees its share of youth struggling with housing.

"The research shows that homeless youth are more likely to take their own life than their peers who are living at home with a roof over their heads," said Hampton. "On top of that, the LGBTQ+ is more likely to be homeless and that population of people experiencing homelessness are also more likely to take their own lives than peers who don't identify as LGBTQ+."

The process of parsing out which avenues of aid would best serve someone who walks through the door largely depends on the individual's stated needs.

"We are addressing mental health concerns in clients when it's something that they have identified as a goal," Hampton said.

The nonprofit offers service linkages to other programs in the community which address particular issues, serving as a guiding mechanism for the correct channel toward recovery while providing counseling of its own.

Two Looking Glass counselors from Eugene offer services in Cottage Grove, one a licensed clinical social worker and the other a licensed marriage and family therapist.

Looking Glass also tries to measure risk by identifying adverse childhood experiences such as poverty or domestic abuse.

"I think a lot of the youth we work with at the Looking Glass rural program are just trying to get their basic needs met," Hampton said. "They're in that survival mode."

Meeting these basic needs can be a significant hindrance toward seeking mental health services.

"If we can provide food, provide a warm place, provide warm clothes, provide a place of acceptance and belonging ... then we can focus on getting back to school," Hampton said. "We can then focus on seeking mental health counseling or whatever that looks like to help with PTSD or some of those adverse childhood experiences."

For some, basic needs include getting an ID or signing up for health insurance. Looking Glass helps with those processes as well.

"We're really just trying to help break down and eliminate — or at least decrease — the amount of barriers that people are experiencing," said Hampton.

There are limitations to the organization's services, however.

"We are not diagnosing people," Hampton said. "But we have protocols if someone came to us and said, 'I am suicidal.'"

The nonprofit is not equipped, though, to deal with more severe mental health cases, such as a client mentioning that they hear voices.

For such cases, Cottage Grove does have access to PeaceHealth Medical Group's Early Assessment and Support Alliance (EASA) program out of Eugene, a resource which identifies and offers support to young people who are at risk of developing psychosis or are experiencing early signs of psychosis.

Lorraine McKenzie is a licensed clinical social worker and a team leader with EASA.

"Our program has multi-faceted services and is designed to address each individual's needs," she said. "We hope to be preventative and capture young people before they have that first episode."

EASA's target is young adults ages 12 to 24 and offers a transition program which can last up to two years. Among its range of services, the program helps participants create structure in their social, occupational and private lives. The program will also send workers into rural communities as part of its outreach.

"We believe that recovery is achievable by all of our participants and that each individual can be empowered to develop goals that reflect their own concept of recovery," said McKenzie.

The collective aid provided by Cottage Grove's programs and services spreads across a wide landscape of needs. Even the Cottage Grove Police Department serves its own role in connecting individuals with that aid.

"I think it's fair to say that we have people in our community that we contact on a regular basis," said Cottage Grove Police