

# SIGNS OF SUICIDE

## Proactive steps can be taken by anyone

By Richard Hanners  
Blue Mountain Eagle

*Editor's note: This is the final installment of a three-part series on suicide.*

Oregon's suicide rate has been increasing since 2000, but people can take proactive steps to combat it.

Oregon's suicide rate for many years ranked seventh to ninth in the United States, and the problem is getting worse. In 2011, twice as many Oregonians died by suicide than were killed in vehicle crashes.



Thad Labhart

According to the Oregon Violent Death Reporting System, suicide was the eighth leading cause of death in the state in 2012. The age-adjusted rate of 17.7 suicides per 100,000 individuals was 42 percent higher than the national average.

Suicide rates in Oregon's 36 counties ranged from 9.4 to 36 per 100,000 individuals from 2003-2012, according to the Oregon Health Authority. Grant County's rate ranked third highest at 32.1 after No. 1 Curry and No. 2 Harney.

### Risk factors

Suicide rates in Grant County are alarming, but proactive steps can be taken to reduce those numbers by people without advanced training. An important first step is to identify people who might harm themselves.

Residents of Grant County share many of the same risk factors as other rural communities in the western states, Community Counseling Solutions Clinical Director Thad Labhart told the Eagle — geographical isolation, winter weather, family dynamics of denial, abuse, neglect and separation, lack of things to do, higher rates of gun ownership, relatively less access to mental health treatment, low socio-economic status and stigma issues about admitting mental health problems.

Many Grant County residents have a strong sense of independence, a "pick me up by the bootstraps" or "toughen up" mentality that steers



them away from seeking help, Labhart said.

The fishing, farming and timber industries posted the highest suicide rates of all, according to a Centers for Disease Control report on the 20 percent increase in the national suicide rate from 2002 to 2012. The CDC attributed the high rate to workers facing isolation, high stress, lack of mental health services and the recent declining economy in those industries.

Suicide impacts families for years, even generations. About one-third of suicide victims in Oregon from 2003 to 2012 had experienced a crisis within the prior two weeks, including problems with an intimate partner, physical health, family stress, other relationships, lost jobs or problems at work, financial difficulties and criminal charges or other legal difficulties.

### Screening

Labhart said he would like to see more screening and referral. Cards provided by the Columbia University's Lighthouse Project provide a simple set of six questions that parents, family members, friends or co-workers can use to identify people at risk of attempting suicide.

People are asked if they

### Leading suicide counties in Oregon, 2003-12

... by suicide rate per 100,000 residents

Rank/county	Rate	Deaths
1. Curry	36	77
2. Harney	32.7	22
3. Grant	32.1	22
4. Wheeler	29.1	4

... by suicide deaths

Rank/county	Rate	Deaths
1. Multnomah	15.4	1,084
2. Washington	12.2	639
3. Lane	17.7	612
4. Clackamas	13.8	523

Statewide 16.4 6,145

Source: Oregon Health Authority  
EO Media Group graphic

had wished they were dead or thought about killing themselves over the past month and, more specifically, if they had thought about how they would do it. People are also asked about how serious they had considered these thoughts,

or if they had worked out the details of how they would do it. They are also asked if they had actually done something or prepared to do something to end their lives.

Labhart noted that only 38 percent of people who complete suicide ever mention it to others ahead of time, so it's important to consider the risk factors to identify a person and then ask these questions.

Any yes to the Columbia Lighthouse questions should be taken seriously. If a person has indicated serious intent or taken definitive steps toward committing suicide, they should be escorted to emergency personnel for care.

Labhart noted that veterans complete suicide at about twice the rate in Oregon and 2.5 times the national rate. Veterans in isolated communities like John Day don't have to travel to Veterans Administration facilities — they can find help with local providers like Community Counseling Solutions through the Veterans Choice Program.

### Suicide prevention resources

- Community Counseling Solutions in John Day, 541-575-1466
- David Romprey Oregon Warm Line, 1-800-698-2392
- Oregon Youth Line, 1-877-968-8491, text 839863, youthL@linesfor-life.org
- National Suicide Prevention Lifeline, 1-800-273-TALK
- Spanish Language National Suicide Prevention Lifeline: 1-888-628-9454
- Crisis Text Line: 741741
- Military Helpline: 888-457-4838 or text MIL1 to 839863
- Alcohol and Drug Helpline: 800-923-4357 or text RecoveryNow to 839863
- Suicide Prevention Resource Center, sprc.org
- SafeOregon reporting line: 844-472-3367 or tip@safeoregon.com

### Risk factors

- Can't enjoy anything
- Anxiety and/or panic
- Insomnia
- Hopelessness or despair
- Homicidal ideation
- Psychotic disorder or command hallucinations
- Personality disorder
- Mood disorder
- Post-traumatic stress disorder
- Substance use, abuse or withdrawal
- Impulsivity, aggression or anti-social
- Ongoing medical illness, including chronic pain
- Recent or anticipated loss of relationship, finances, health or home
- Loss of support or increasing isolation
- Perceived burden on others
- Legal issues or incarceration
- Local suicide cluster or exposure to one through media
- Access to lethal means, including firearms
- Recent inpatient discharge
- Noncompliant or not in treatment

### Treatment

CCS offers individual, family and group treatment options, psychiatric consultation, medication prescription and referrals to higher-level care, Labhart said.

"Treatment works — absolutely," Labhart said. "Suicides are much lower for people in treatment."

Representatives at the Feb. 15 meeting of the Grant County's Youth Suicide Response Team recognized a list of steps already being taken to address suicide in Grant County. Mental health presence in schools is increasing, CCS is providing more prevention work and depression screenings and more training has been offered, including crisis-intervention training for law enforcement.

Typically police officers are trying to enforce the law, Labhart said. The new training helps them differentiate between mental health issues that could be linked to suicidal tendencies and someone

who is behaving badly. Additional training is a good idea, he noted.

Looking forward, the Youth Suicide Response Team called for more community screening efforts and more collaboration with county officials, law enforcement, community-based businesses and churches.

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Applications may be picked up at City Hall (450 E. Main Street) during business hours, 8:00 a.m. - 4:00 p.m., Monday - Friday. Applications are due to City Hall by close of business on March 30, 2018.

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