### Intervention guidelines

If you observe any one or combination of the symptoms listed in this brochure, or know of any circumstance that increases risk, reach out to the person at the earliest possible time by:

- Inviting the person to meet with you privately (try to find a time and place where you won't be interrupted)
- Expressing your genuine concern for the person's well-being and telling them the signs and symptoms that you have observed (make a list ahead of time if it helps)
- Asking the person directly, "Are you thinking of harming yourself or taking your own life?"

\*\*\*DO NOT be afraid to use the words "taking your own life" or "suicide". These words will NOT cause the person to take these actions\*\*\*

- Making the person become aware of and helping him or her access professional support services as well as other means of support
- Not leaving the person alone if you believe he or she is in *imminent* danger, and calling 911 for immediate help

#### HOTLINE NUMBERS

\* The National Suicide Hotline:

1- 800-273-TALK (8255)

\* CONTACT of Mercer County (24 hours)

609-896-2120 or 609-896-4434

# Counseling and Psychological Services

#### CRISIS UNIT

Capital Health Systems at Fuld Crisis Unit (24 hours)

609-396-HELP (4357)

The Counseling and Psychological Services is open from 8:30 am to 4:30 pm weekdays. For after-hour emergencies, contact the Fuld Crisis Unit at 396-HELP, Campus Police at 911, and/or a Residence Education staff

> Confidentiality is strictly maintained in accordance with all applicable laws and professional ethical codes.

Responding to someone who may be Depressed or Suicidal

> The College of New Jersey Eickhoff Hall, Room 107 Ewing, NJ 08628-0718 (609) 771-2247 psycouns@tcnj.edu

www.tcnj.edu/~SA/counseling

## Responding to someone who may be depressed or suicidal

Symptoms of depression can be strong indicators that a person may be considering suicide. Symptoms that you might observe include:

- Withdrawal from peers, colleagues, friends and/or family
- Diminished interest in, or withdrawal from usual activities
- Significant changes in performance/participation/attend ance
- Direct or indirect comments about death, the meaning of life (verbal or written)
- Sleep disturbances that may cause increased fatigue and/or need for sleep (may appear very fatigued)
- Appearance (clothing and/or grooming) that represents a diminished capacity for self care
- Weight loss or gain (reported, or observed as ill fitting clothing)

- An increase in physical agitation (seemingly constant motion... shaking, twitching, inability to be still)
- An observable mood that strikes you as hopeless, helpless, and/or apathetic
- Constant tearfulness, or appearing to be "on the verge of tears" much of the time
- Diminished capacity for pleasure derived from usual forms of enjoyment or satisfaction
- Any other behavior that seems *un-characteristic* of the person

#### *Circumstances that <u>may</u> increase the risk of suicide in addition to the symptoms of depression include:*

- A recent loss of a significant relationship by death or other circumstances (\*\*\* This is of <u>increased</u> <u>concern</u> if the loss was another's death by suicide\*\*\*)
- Other family or friends that have died by suicide
- An event that has caused the person to "lose face" or to feel shamed

- Having a history of previous suicide attempts
- Having a history of mental illness
- Use of substances: Alcohol and/or other drugs including prescription drugs
- Other addictions such as gambling, pornography or internet use
- Being of the male gender and in the age ranges of 18-24 or 65+ years
- Financial difficulties
- Easy access to firearms or other weapons
- Living with a life threatening illness
- Lack of social supports
- The time of year...suicide rates are highest in the spring