National Suicide Prevention Lifeline: After an Attempt

A Guide for Taking Care of Yourself After Your Treatment in the Emergency Department

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration
www.samhsa.gov
If you are in crisis, please call:
National Suicide Prevention Lifeline
1-800-273-TALK (8255)
En español: 1-888-628-9454
TTY: 1-800-799-4889
www.suicidepreventionlifeline.org
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After an Attempt

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This brochure was created to help you as you begin to work through the challenges that led you to attempt to take your life. It offers information about moving ahead after your treatment in the emergency department and provides resources for more information about suicide and mental illnesses.

Today
Today may feel like the hardest day of your life. You have seriously thought about or perhaps attempted to end your life. You may be exhausted. A common experience after surviving a suicide attempt is extreme fatigue. You may be angry. You may be embarrassed or ashamed. The attempt itself, the reactions of other people, transportation to and treatment in an emergency department or other health care facility—all these can be overwhelming to you right now. But, recovery is likely, and all the feelings you are experiencing right now can get better.

After the Emergency Department
After you have been treated for a suicide attempt in an emergency department and the doctors believe you are medically stabilized, you will either be discharged (released) or you will be hospitalized.
If you are discharged after your suicide attempt, the staff in the emergency department should provide you with a plan for followup care.

The exact steps for followup care will vary with each person, but your plan should include:

• A scheduled appointment in the near future with a mental health provider (such as a psychiatrist or other licensed therapist). Make sure that the name and contact information for the provider is given to you before you leave the hospital and that your appointment will occur as soon as possible.

• Information on any treatments that you received in the emergency department, such as medications, and what, if anything, you will need to do about those treatments after you leave.

• Referrals to local and national resources and crisis lines for information and support. See the back pages of this brochure for more information.

Once you have a plan for followup care that you understand and are comfortable with, you and, if appropriate, a family member should work closely with a therapist to ensure that your plan is meaningful and effective.

If the emergency department staff feel that you need more immediate care or
longer-term care than the emergency department can provide, you will be referred for inpatient hospitalization. If hospitalization is necessary, you and your family, if appropriate, can begin to work with the hospital to develop a plan for the next steps in your care. Hospital staff (usually a social worker) should help you with this process.

What if You Don’t Want To Go to the Hospital?
People generally have the right to consent to or refuse treatment. However, if the emergency physician believes you are a danger to yourself or someone else, he or she must consider having you hospitalized involuntarily for a limited period of time. Laws about commitment vary by State. If you have questions about your rights as a patient, you should contact your local Protection and Advocacy organization. These are legal centers that are funded to protect the rights of persons with mental health needs. You can either go to their national Web site at www.ndrn.org or call the office at 202-408-9514 to inquire about the Protection and Advocacy center in your State.

Next Steps: Moving Ahead and Coping With Future Thoughts of Suicide
Recovery from the negative thoughts and feelings that made you want to end your life is possible. You may get to a place where you never have thoughts of suicide again and you can lead a happy, satisfy-
You also may learn to live with these thoughts in a way that keeps you safe.

After you leave the hospital there are several things you can do to help in your recovery. It may feel hard and overwhelming right now, but over the next few days, following these tips can help turn things around.

**Create a safety plan.**

You and your doctor, or other licensed therapist, should work together to develop a safety plan to help reduce the risk of a future suicide attempt. When creating a safety plan, be honest with yourself and your doctor to ensure that the plan meets your needs and that you feel comfortable with it. Although everyone’s safety plan is different, some common things that may be in your plan include: signs that may indicate a return of suicidal thoughts or feelings and what to do about them; when to seek additional treatment; and contact information for your doctor, therapist, or a trusted friend or family member. Keep a written copy of your safety plan nearby so you can refer to it as needed.

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“Since the time I was in the ER, I have experienced thoughts of suicide, but luckily I have a strong support system in place.”

Quote from a national survey of individuals who attempted suicide.
Build a support system. A support system is a key part of recovering from a suicide attempt and preventing another one. It is important that you have at least one person in your life who can be your “ally.” This must be a person you trust and can be honest with—especially if you start to have thoughts of ending your life again. Family members or a close friend can serve this important purpose. A member of the clergy, mentor, or colleague also could be helpful to you at this time. Having more than one ally can be a great asset, as well.

Keeping your ally informed about your thoughts, feelings, and wishes can help in your recovery and may help prevent another suicide attempt. You will have to be honest with yourself and with your ally to make this work. Even when you are feeling alone, always remember that there are people in your life who care about you a great deal and are willing to help.

Learn to live again. When you are recovering, the world can look like a pretty bleak place. It may take a little while before your life starts to feel comfortable again. One thing you can do to help is to get back into a routine. Eat at regular times, exercise regularly, and go to sleep and get up at the same time each day. Try to join in your usual activities a little at a time, and add in more when you feel comfortable.
If you continue to have thoughts of suicide, reach out for help immediately and contact your ally, a doctor, or a crisis hotline (see the back pages of this brochure for listings). Remember: The emergency department is open 24 hours a day, 365 days a year to help you if you have thoughts of suicide or if your medical team is unavailable to provide you with the needed care.

Listen closely, and carefully consider the support and advice you receive. It is important to be honest with yourself, your doctor, or others about your feelings so that you get the best possible care.

Sometimes being under pressure and having thoughts of suicide can make it difficult for you to make the best decisions, and at those times, other people may have a more realistic view of your situation than you do. Your ally can help you work through these confusing and isolating thoughts and feelings and help keep you safe.

_Everyone’s recovery is different._ Some people have persistent thoughts of suicide. For others, such thoughts may accompany certain moods or circumstances. Here are some steps you can take to prevent negative and destructive thoughts in the future and to keep you safe. You also may want to consider adding some of these steps to your safety plan.
• **Remove the means for hurting yourself from your environment:** Work with your ally to remove methods of self-harm. It is better not to have these things around while you are recovering. If you use medication, keep only a few days’ supply on hand and ask someone else to hold onto the rest. For other means of self-harm, place them in someone else’s hands for a while; you can always take back these items when things feel more settled.

• **Identify what sets off or starts these thoughts for you:** It may be an anniversary of a painful event, for instance, or seeing a knife in the kitchen. Plan to minimize the effect of these triggers on your life. Sometimes you can avoid them or train yourself to respond differently, or you can involve your allies ahead of time to help you face a difficult situation. Remember that life events do not cause a suicide, but they can increase the risk of an attempt.

• **Learn about mental illness:** Someone who has had or is living with suicidal thoughts may be suffering from a mental illness such as bipolar disorder, schizophrenia, or major depression. Contact a doctor or see the back pages of this brochure for more information about mental illness and treatment.

• **Learn about crisis hotlines:** Hotlines provide you with a trained person to talk to when you are having suicidal thoughts.
This person will listen to you and help you choose another path. The person you talk with may work with you on your safety plan, so have that plan close by when you make the call. If you do not have a safety plan in place, the crisis staff will help you create one. See the resources listed at the back of this brochure for more information on crisis lines.

• **Participate in a mutual peer-support group:** There are many types of support groups, and you may wish to participate in one in your area. Learning from others and sharing your experience can make a big difference in the way you think about your life. It also may help save the life of someone else. The resources listed at the back of this brochure can link you to a number of peer-support centers in your area.

• **Get involved in life:** Finding a hobby or enjoying a favorite pastime—such as listening to music, watching your favorite movie, or collecting things—is a great way to help you cope when things get tough. Hobbies or activities that involve interacting with others are an especially good idea. Whatever your interests may be, make sure you have access to the things you enjoy. That way, if your negative thoughts come back, you can turn to something that brings you comfort and enjoyment.

Remember—there are reasons to live and make things better. You can survive, and
even thrive, despite the way you feel at times. Recovery is likely.

To learn more about suicide and to get help, consider the following resources.

In a crisis, contact:

1-800-273-TALK (8255)
TTY: 1-800-799-4TTY (4889)
National Suicide Prevention Lifeline
A 24-hour, toll-free crisis hotline that links callers to a nearby crisis center. The Lifeline accepts calls from non-English speakers.
www.suicidepreventionlifeline.org

For more information about suicide and mental illness:

American Association of Suicidology
A resource and education organization dedicated to the understanding and prevention of suicide.
www.suicidology.org or call 202-237-2280

American College of Emergency Physicians (ACEP)
A national medical society committed to advancing emergency care through continuing education, research, and public education.
www.acep.org or call 1-800-798-1822.

American Foundation for Suicide Prevention
Dedicated to advancing the public’s knowledge of suicide and its prevention.
www.afsp.org or call 1-888-333-AFSP
American Psychiatric Association
A national professional organization of psychiatrists.
www.psych.org or call 703-907-7300

American Psychological Association
A national professional organization of psychologists.
www.apa.org or call 1-800-374-2721

Befrienders International/Samaritans
An online resource that gives support through e-mail and offers a directory of local crisis helplines.
www.befrienders.org

Covenant House Nineline Hotline
1-800-999-9999
A 24-hour, toll-free crisis hotline offering confidential and immediate crisis intervention and referrals to community resources.
www.covenanthouse.org/programs_nl.html

Hispanic Community Resource Helpline
1-800-473-3003
(La Linea Nacional de Ayuda)
Offers support for Latinos who need information about educational, health, and human service providers.

Link’s National Resource Center for Suicide Prevention and Aftercare (LINK–NRC)
Provides suicide-related community education in prevention, intervention, aftercare, and support.
www.thelink.org or call 404-256-9797
National Alliance on Mental Illness (NAMI)
Offers information, support, and advocacy for persons affected by mental illnesses.
www.nami.org or call 1-800-950-NAMI (6264)

National Disability Rights Network
Serves individuals with a wide range of disabilities by guarding against abuse, advocating for basic rights, and ensuring system accountability. The Web site provides a directory of member agencies by State.
www.ndrn.org or call 202-408-9514 or 202-408-9521 (TTY)

National Institute of Mental Health (NIMH)
The leading Federal agency for research on mental and behavioral disorders.
www.nimh.nih.gov or call 1-866-615-6464

National Mental Health Association
Addresses all aspects of mental health and mental illness.
www.nmha.org or call 1-800-969-NMHA (6642)

National Mental Health Information Center (NMHIC)
A SAMHSA-operated Center that provides information about mental health and is available on weekdays from 8:30 a.m. to 12 a.m. Eastern Standard Time to answer mental health questions.
www.mentalhealth.samhsa.gov or call 1-800-789-2647 or 1-866-889-2647 (TDD)
National Organization for People of Color Against Suicide
Addresses and raises awareness about suicide in minority communities.
www.nopcas.com or call 1-866-899-5317

National Strategy for Suicide Prevention
A comprehensive national plan to confront suicide in the United States.
www.mentalhealth.samhsa.gov/suicideprevention

Suicide Awareness Voices of Education (SAVE)
Dedicated to preventing suicide through education, public awareness, and stigma reduction.
www.save.org or call 952-946-7998

Suicide Prevention Action Network (SPAN) USA
A national organization dedicated to action and advocacy for suicide prevention.
www.spanusa.org or call 202-449-3600

Suicide Prevention Resource Center
Supports suicide prevention with the best of science, skills, and practice.
www.sprc.org or call 1-877-GET-SPRC (438-7772)
The Trevor Helpline
1-866-4U-TREVOR (488-7386)
A national 24-hour, toll-free suicide prevention hotline aimed at gay and questioning youth. www.thetrevorproject.org

These resources may contain materials that express views, policies, and opinions that do not necessarily reflect those of the Substance Abuse and Mental Health Services Administration and the U.S. Department of Health and Human Services.
Your Notes Here: