

# Media Advisory: (re)Imagining Suicide Intervention

## October 6, 2020

Crisis happens. It can't be scheduled. This includes suicidal crises. We don't always know who the next person in crisis will be, but we do know they will need compassionate, thoughtful, nuanced support in the moment. Trauma-informed, community and culture-based partnerships can accomplish this goal.

We know from experience that everyone is able to learn skills to support another person in crisis. We train 130 volunteers a year to answer calls from people in crisis. We train police, first responders, teachers, and non professionals how to understand and help when they encounter individuals who are at risk of suicide. Over 200 organizations a year send workers to learn how they can make a difference for people in distress.

For most individuals who are in a suicidal crisis, connecting to a crisis responder and talking or chatting about their suicidal thoughts and underlying reasons allows their own coping to emerge by the end of the call or chat. Safety plans include coping strategies that would help prevent their suicidal thoughts developing into action or attempt. We encourage individuals to continue using our services as a safety net if their suicidal thoughts intensify. Part of safety planning also includes the Centre scheduling follow-up calls to review risk and strengthen the individual's safety plan while connecting them to other resources on their journey to wellness.

The Crisis Centre of BC receives ~300 call and chat requests from individuals in crisis per day. In 98% of cases, our crisis service responders are able to resolve these calls & chats through these methods of emotional support and collaborative safety planning.

In situations where the risk of suicide is determined as imminent or if suicidal action is in progress - approximately 2% of our calls and chats - we work with the individual to negotiate their consent to contact emergency services. When the person at risk does not consent and is unable to keep themselves safe from suicidal behaviour, we may contact ECOMM-011 with the

goal of saving their life. We take this decision very seriously. Our decision to send intervention without consent is based on the best practice standards laid out by the American Association of Suicidology, of which the Crisis Centre of BC is an accredited member. Information about how we balance the confidentiality and privacy of our callers and chatters with the need to act in life-threatening situations is found in our <u>privacy policy</u>.

In our 51+ years of 24/7 crisis intervention and suicide prevention we have seen fluctuations in the mental health care model with regard to suicidal individuals in the community. The challenge of providing trauma-informed, responsive crisis services is embedded in the legal, funding, and policy frameworks of our emergency response, policing and health and mental health systems. These challenges intersect with stigmas and stereotypes involving suicide, mental health, poverty, gender, race, sexual orientation, and the impacts of historical wrongs yet to be righted.

An integrated approach to community-based suicidal prevention is part of the solution. Legislation that defines how our society responds to those in life-threatening crisis is another. Protected funding streams linked to population growth, and that require community involvement and oversight is another.

We are currently seeking funding to bring together crisis line callers, individuals with lived experience of suicidal thoughts and attempts, individuals who have required emergency mental health support, members of marginalized communities, and emergency responders, including ECOMM-911, police, BC Ambulance, emergency room services and hospitals, and mental health service providers. Our collective goal: to identify legislation, policies, procedures and assumptions that facilitate a law enforcement approach to mental health emergency response, and legislation, policies and procedures that facilitate trauma-informed approaches within communities of care.

If you or someone you know is struggling, especially with thoughts of suicide, we are here for you. Reach us at:

- Vancouver Coastal Regional Distress Line: 604-872-3311
- Anywhere in BC 1-800-SUICIDE: 1-800-784-2433
- Mental Health Support Line: 310-6789
- Online Chat Service for Youth: <a href="https://www.YouthInBC.com">www.YouthInBC.com</a> (Noon to 1am)
- Online Chat Service for Adults: www.CrisisCentreChat.ca (Noon to 1am)

If you, your company, social group or agency, are seeking skills to support you through the pandemic, check out our programming for <u>adults</u> and <u>youth</u>.

## **MEDIA CONTACT**

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# BACKGROUND Crisis Centre of BC

The Crisis Centre of BC provides help and hope to individuals, organizations, and communities. Spanning the spectrum of crisis support, suicide prevention, and postvention, we engage staff and volunteers in a variety of services and programs that educate, train, and support the strength and capacity of individuals and communities.

## We offer:

- Immediate access to barrier-free, non-judgemental, confidential support and follow-up to youth, adults, and seniors throughout 24/7 phone lines and online services.
- Education and training programs that promote mental wellness and equip schools, organizations and communities to assist people at risk of suicide.

Our programs work to ensure timely access to support, destigmatize suicide and mental health concerns, and increase awareness and skills for mental health. We engage a community of passionate volunteers. We foster and create compassionate, connected, suicide-safer communities.