Parent Information Session

2nd September 2013

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My Qualifications for this talk

30 years

What this talk is about

- I am not going to tell you what to do
- I am not going to tell you what to think
- I am going to suggest some things for you to think about

The facts about Youth Suicide in Australia

Thank You

Iris Nastasi
Suicide

- A prominent health concern in Australia
- A death by suicide can have devastating impacts on
  - Family
  - Friends
  - Colleagues
  - Potentially the whole community

In Australia

- 45% of Australians will experience a mental illness in their lifetime
- 15.3% of the burden of disease is due to mental illness
- 2,273 People took their own lives in 2011: 1,727 males (76%) and 546 females (24%)

In Australia

- Highest age-specific suicide rate for males in 2011: 85+
- Lowest age-specific suicide rate for males: 1963
- Highest number of suicides in Australia occurred in 1988
- Suicide rate for Males 15-19: 25.8% of ALL deaths

Source: Australian Bureau of Statistics (ABS) Catalogue 3303.0 Cause of Death Australia, 2011 released March 2013

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Suicide rates by State/Territory

What is the cause...

"...There are a range of risk factors for suicide, including mental illness. Studies show that up to 90% of people who suicide may have been experiencing a mental illness at the time of their death."

http://www.mindframe-media.info/for-media/reporting-suicide/Downloads/?a=5155

Understanding Suicide

"...suicide is a behavioural outcome, it is a process in which social, psychological, neurobiological and cultural variables contribute to produce the end result. These contributing factors carry unequal weights and no single one has been demonstrated to be necessary or sufficient to cause suicide."

Pierre Baume

Can we predict?

"...The prediction of suicides is impossible, even if high risk populations are considered, since the risk factors listed are overly sensitive and non specific."

Dr Michael Dudley, Australian Medicine 19th June 1995

Should we emphasise suicide in the media?

- Generally no, risk of glamorising, sanitising & normalising suicide
- Emphasis should be on depression awareness and mental health promotion
- Sometimes it is inevitable e.g.: Michael Hutchence - recent WA suicides
- when it is high profile, and in all the papers, reframe & use it as an opportunity for reflection

Suicide

"...suicide, like a great work of art, is prepared in the silence of the heart."

Albert Camus
The Challenge of mental illness begins before age 25. 75% of young people do not seek help. Early intervention is associated with a better outcome.

The Need

Messages to Parents from beyondblue

- Establish accurate facts about the situation and what is being done.
- When a suicide occurs there can be significant hearsay dialogue and rumours involved, especially via social media.
- It is important not to perpetuate inaccurate information which can contribute to confusion, public distress and disempower a community.

Messages to Parents from beyondblue

- Make yourself available to LISTEN to your adolescents thoughts, concerns, worries and expression of grief.
- Acknowledge, normalise and validate their reactions
- Look after your own wellbeing in order to be able to support your child/children.

Messages to Parents from beyondblue

- Young people will respond with a wide range of reactions to a suicide.
- Grief manifests itself across a broad spectrum of behaviours, thoughts and feelings.
- The range of common responses is wide and young people should be supported to grieve in a way that is natural to them.

Messages to Parents from beyondblue

- Suicide is a complex behaviour and young people should be supported in not assuming a simplistic explanation (it is never just one thing). E.g. a relationship breakup is often the catalyst to a young person’s suicide but there are often many factors which contributed to the young person’s state of vulnerability leading up to the breakup.
Messages to Parents from beyondblue

- Acknowledge that young people may prefer to talk with other young people about distressing circumstances.
- Encourage your child to support their friends where possible but also to engage with an adult if they are concerned about safety.

Messages to Parents from beyondblue

- Media and social media may need to be monitored as these can have a negative impact on vulnerable young people.

Messages to Parents from beyondblue

- The ripple effects of a suicide may arise across time, and not necessarily in the immediate aftermath of a suicide.

Messages to Parents from beyondblue

- If you are concerned about how your child is responding to a suicide, seek support from your GP, psychologist, and/or school counsellor.

How to build a resilient young person?

Resilience

“...is the human capacity to face, overcome, be strengthened by and even be transformed by adversity.”
First psychological study on 'resilience'

- studied a cohort of children from Kauai, Hawaii in 1970

Professor Emmy Werner

the first scientists to use the term 'resilience' in 1970


Kauai, Hawaii

- High levels of unemployment
- High levels of parental substance abuse
- High levels of mental illness


Kauai, Hawaii

- 2/3rds exhibited destructive behaviours as teens (e.g., years, chronic unemployment, substance abuse, teen pregnancy)
- 1/3rd did not exhibit destructive behaviours.


Resilience

- Social/Emotional competencies
- Charismatic Adult
- Spirituality
- Islands of competence


Essential life advice 1

Source: Various

See Life As It Is, But
Essential life advice 2

Essential life advice 3

Family holds out hope for ‘tough bloke’ missing in Cameroon crash

First photos of Sundance plane crash
My list of how I came to think about it differently

1. Died quickly – no suffering
2. Died in Africa a country he loved
3. Died doing what he loved
4. He had the pleasure of having me as a brother
5. His memory will live on in his two boys
Nine secrets of a good night’s sleep

1. Dim lights / Implement a routine
2. Don’t exercise before bed
3. Cool down
4. Avoid cat naps
5. Minimize anxiety
6. Avoid stimulants.
7. Warm & soothing drinks
Great EFFORT TO FIND MEANING

http://www.youtube.com/watch?v=EA5C-1N_r1w&feature=plcp

Essential life advice 8

1. don’t put a limit on the process of healing. Be available some time down the track.
2. sit quietly with the young person while he/she talks, cries or is silent.
3. make opportunities to share memories or look at photos of the person who has died.
4. acknowledge and believe the young person’s pain and distress whatever the loss - large or small.
5. be aware of your own grief and/or feeling of helplessness.
6. reassure the person that grief is a normal response to loss and there is no wrong or right way to grieve.
7. don’t panic in the absence or presence of strong emotional responses.

Ways of supporting an adolescent bereaved by suicide
Ways of Supporting a Grieving Child:
- Provide a safe space
- Have a regular routine
- Be consistent
- Be honest
- Be reassuring
- Give adequate and appropriate information

Ways of Supporting a Grieving Child:
- Include and involve the child in appropriate decision making and in what is happening
- Acknowledge feelings and give support when they are overwhelming
- Provide opportunities to remember, create a memory box and make a memory book, draw, paint, make a collage, write stories, poems, collect photos
- Prepare for special occasions - birthdays, Christmas, Easter, Mother’s Day, and Father’s Day holidays

Good resources

Offer Resources/networks
- Stress the importance of talking to others
- Talking to someone can be a relief not a sign of weakness
- Get students to identify people they could talk to
- Direct them towards resources or websites
- Suggest useful books, DVD’s, websites, etc

websites
SO when should we worry?

What to look for...

- students who
  - can not engage adequately in classroom assignments and activities after a sufficient amount of time has passed since the crisis and after a majority of their peers are able to do so,
  - continue to exhibit high levels of emotional responsiveness (e.g., crying, tearfulness) after a majority of their peers have discontinued to do so,
  - who appear depressed, withdrawn and non-communicative,
  - continue to exhibit poorer academic performance and decreased concentration,
  - express suicidal or homicidal ideation, or students who are intentionally hurting themselves (e.g., cutting themselves)
  - exhibit an apparent increased usage of alcohol or drugs
  - gain or lose a significant amount of weight in a short period of time
  - exhibit significant behavioral changes
  - discontinue attending to their hygienic needs.

Key Indicators of substance abuse

- Change in school attendance
- Change in peer group
- Poor physical appearance and personal hygiene, red eyes, dilated or constricted pupils
- Aggression, mood swings, lethargy
- Furtive behaviour

Signs for parents to look for

- Increased secrecy about possessions or activities
- Use of incense, room deodorant or perfume to hide smoke or chemical odors
- Subtle changes in conversations with friends, e.g., more secretive, using “coded” language
- New friends that you have not met
- Change in clothing choices — new fascination with clothes that highlight drug use

Signs for parents to look for

- Increase in borrowing money, money going missing
- Evidence of drug paraphernalia, such as pipes, rolling papers, garden hose getting shorter
- Evidence of inhaling products and accessories, such as hairspray, nail polish, correction fluid, paper bags and rags, common household products
- Bottles of eye drops, which may be used to mask bloodshot eyes or dilated pupils
- New use of mouthwash or breath mints to cover up the smell of alcohol
- Missing prescription drugs — especially narcotics and mood stabilizers
Laboratory Investigations

- If patient gives a Hx of iv drug use
- Hep B, C and HIV screening

What to take to your GP

- Family Hx of depression
- List of behavioural changes you have observed
- Latest School Report
- K 10 sheet
- A request that they conduct a formal screening for depression

The K 10

- The Kessler Psychological Distress Scale (K10)

How Schools Can Help Students with the Tasks of Grieving:

- To accept the reality of the change/loss
- To emotionally process the pain of grief
- To adjust to an environment in which the person is no longer present

Factors Influencing Grief and Bereavement

Factors related to the nature and circumstances of the loss
- Degree of suddenness
- Length of illness prior to the death
- Perception of preventability
- Psychosocial context of the death

Factors related to the relationship with the deceased
- Psychological character
- Strength
- Security of the attachment
- Amount of unfinished business between the deceased and the bereaved
- Level of ambivalence in the relationship
- Roles of the deceased occupied in the bereaved life and social system
World health Organisation predicts

- By 2030 depression will be the largest cause of illness in the world...

The process of managing a group of at-risk students

- Aim of group session after a crisis
  - Comfort level to be restored and sense of safety returned
  - To find answers to questions they have about the difficult incident
  - To know what is happening to them and to adults

Group process

- Ask them to choose one or two words to describe how they feel
- Acknowledge legitimacy of all feelings including the “I don’t know’s”
- Point out acceptability of all reactions
- Emphasise how important it is to respect one another’s feelings
- Explain it is common to want to know the details of the information – then ask if anyone has any other information to add

Advantages of a group approach

- Clear and consistent group understanding of what happened and who was involved
- Dispel rumours and innuendo
- Group provides an opportunity to fill the gaps in understanding
Phase 1: setting up a crisis group
- Ensure you have an appropriate space
  - Not too small
  - Properly ventilated
  - A door you can shut
  - Comfortable room temperature
  - Access to box of tissues
  - Can hold it outside
- Explain
  - Who you are & the purpose of the group
  - how long it will take (approximately 1 hour)
  - What you will do together
  - What the facilitators role will be
- Convey to the students you are in control not have the content of the emotional climate

Phase 2: providing information
- Reiterate why you are there and outline the incident
  - Do not use euphemisms e.g.: “passed away”, “went to sleep”
  - students require truth in order to actualise loss
- Clear accurate details of the circumstances surrounding the incident
  - Where and when incident took place
  - Who was present
  - How it happened
  - What help was at hand
  - What will happen next
- This minimise rumours

Phase 3: Questions and Answers
- Form into small groups of three or four people
- Given five minutes to think of a question they would like to have answered
- Provide writing implements and encourage students to write-down questions
- Answer questions as honestly and accurately as possible
- Be prepared to questions that seem bizarre, gruesome or centred around psychological aspects of death. This may be the first opportunity students have to find out what happens when people die

Phase 4: reactions to grief
- Provide information about reactions to grief
  - Stress normality of reactions
  - Outline the range of physical and psychological responses
  - The period of time over which they are likely to occur
  - Emphasise there is no prescribed responses
- Reinforce the appropriateness of talking to other people

Phase 5: How to close the group
- Discuss getting together again
- Thank students for their honesty
- Acknowledge that this is a difficult time
- Appreciate their courage and talking about the incident and their feelings
- Ask each boarder to describe in a word or sentence how they now feel

Offer Resources/networks
- Stress the importance of talking to others
- Talking to someone can be a relief not a sign of weakness
- Get students to identify people they could talk to
- Direct them towards resources or websites
- Suggest useful books, DVD’s, websites, etc

Memorial tributes
- planting a tree
- creating a book prize
- Creating a scholarship or trophy
- Donating a musical instrument
- Mounting a photo
- Having a regular assembly, concert in that person’s name

Canvass student input

When is it over?
- The effects of the crisis are not over until the first anniversary passes
- At which times staff and students will recall the incident and may experience similar emotions to those they felt at the time of the crises

Why schools must address the crisis
- Serving the wider community
- Substituting for the extended family
- Providing services to young people & families
- Maintaining a cohesive school community
- Fulfilling a legal responsibility
- Reducing the effects of trauma and stress

Missing Depression when it’s under our nose

The End
www.michaelcarr-gregg.com.au

www.beyondblue.org.au
Info Line 1300 22 4636

APS Psychologists: Good Thinking!
The Australian Psychological Society Ltd

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Red Chocolate Elephants: For Children Bereaved by Suicide

- Created as an assisted reading and activity book, designed to encourage discussion with young children about the unique experience of grief through suicide bereavement.

- Features interactive activities to explore feelings, identify grief responses and encourage a sense of normalcy in the child's experience.