

Being compassionately *with*
people in distress: An
important conversation on
suicide, self-harm and safety
planning!

*In collaboration with
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TRAINING & CONSULTANCY

An Invitation ...

To join us in this conversation which we hope will provide some insight and confidence being with, and responding compassionately to, people in distress! This is complimentary to, not in place of, suicide awareness training.

- Give and receive welcome
- Practice self-focus and care. Do what you need during and after the session
- Attend to your own inner teacher
- Practice “both/and” thinking

**When someone asks where
you see yourself in 5 years...**



**Buddy, I'm just trying to
make it to Friday.**

A close-up photograph of a white, fuzzy caterpillar on a green grass blade. The caterpillar is positioned in the lower-left quadrant of the image, nestled among several long, vibrant green blades of grass. The lighting is bright, highlighting the texture of the caterpillar's fur and the sheen on the grass leaves.

An Overview

- **Being *with* people in distress**

What we mean by distress

What we mean by being with

Professional context

- **Talking about self-harm and suicide**

Myths, stigma and barriers

Language

What is safety planning

- **Safety planning in practice**

Key take-aways

- **Question Time and Feedback**

What do we mean by Distress?

Meaning "anguish; grief;
pain or suffering of the
body or mind"





A continuum ...

- Upset ➡ Severe mental anguish/suffering
- Personally, I have experience here ... but maybe not here
- What can I take from my personal experience, amplify it and add to it in order to be with someone in severe distress?

What do we mean
by “being with”?



Our Context

- Social Work is a values-based profession
- Central to the effectiveness of social work practice is the quality of relationship between the social worker and those they work with. Social workers need to know how to connect and communicate with people, to be able to listen

Underpinning Values

The following values inform and underpin the standards of conduct and practice:

Social care workers must:

- Respect the rights, dignity and inherent worth of individuals
- Work in a person-centred way
- Treat people respectfully and with compassion
- Support and promote the independence and autonomy of service users
- Act in the best interests of service users and carers
- Uphold and promote equality, diversity and inclusion
- Ensure the care they provide is safe and effective and of a high quality

NISSC: Standards of Conduct and Practice for Social Workers & Social Care Workers

*I am, just as you are,
a human being*

First, do no harm

Fear

- Of the unknown
- What if I say the wrong thing
- Add to the distress
- What if the person comes to harm

“Helping, fixing and serving represent three
different ways of seeing life.

When you help, you see life as weak.

When you fix, you see life as broken.

When you serve, you see life as whole.

Fixing and helping may be the work of the
ego, and service the work of the soul.”

Rachel Naomi Remen

(Professor at the Oster Center of Integrative Medicine at
the University of California, San Francisco)



Back to basics ...

Reassure

You hardly know me ... it takes a lot of courage to talk about this ...

I can't imagine how upsetting/frightening that must be

Validate

I hear you ... this must feel so hopeless/unfair (responding to their words)

I'm so sorry you're in so much pain/distress

Listen to *hear*

Trust your gut and say what comes naturally

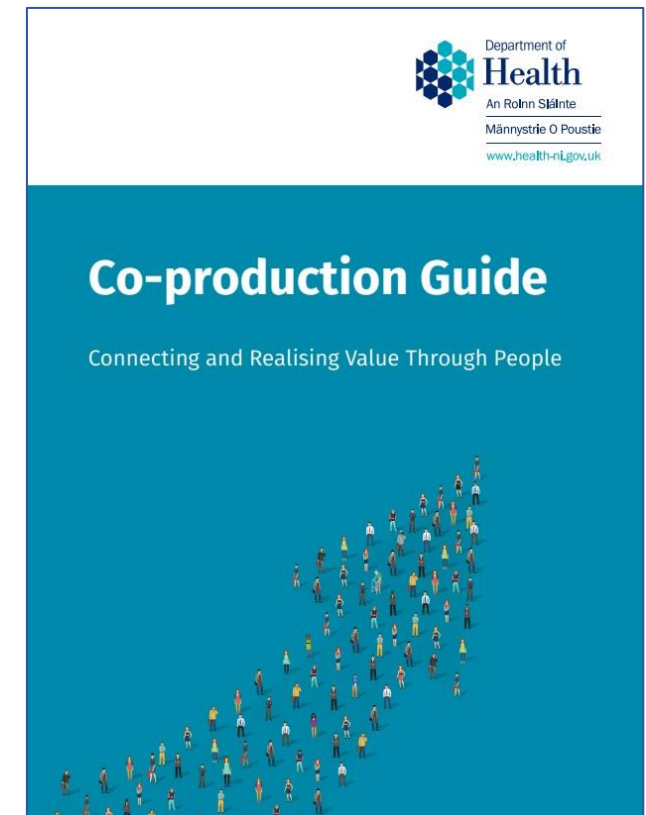
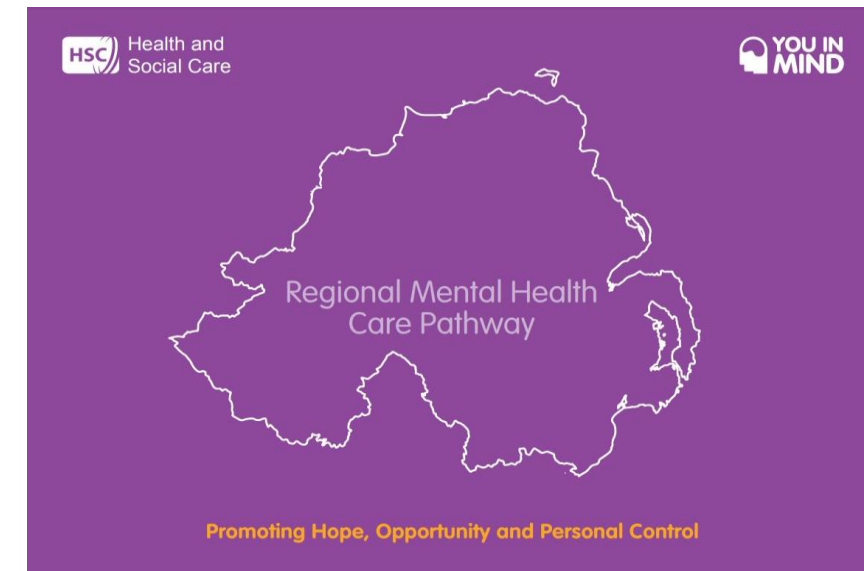
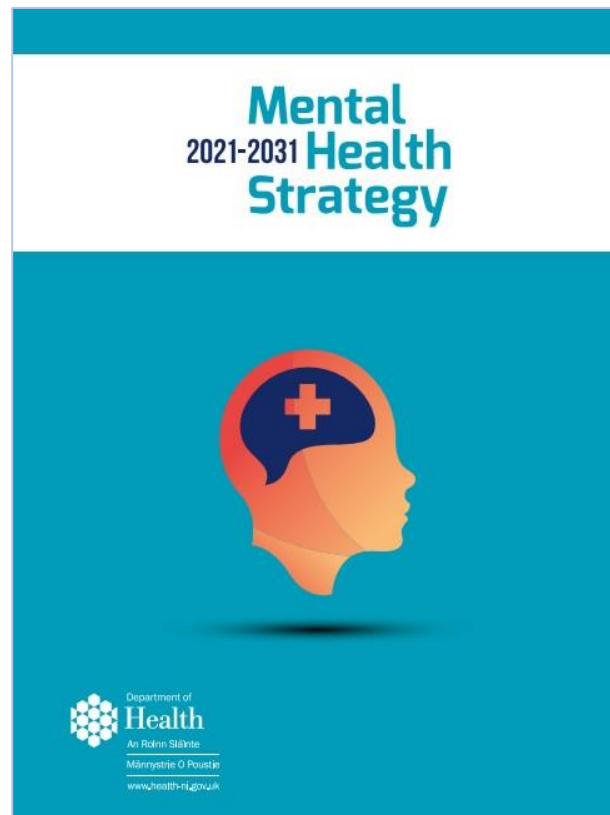
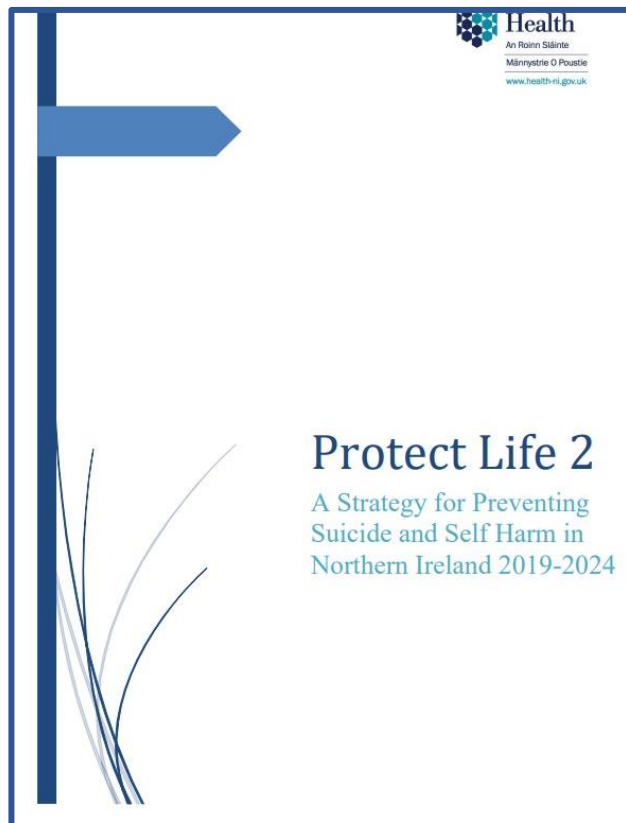
We can't and don't need to have all the answers. Be honest without despairing. Services often can't provide what people need, when they need it. Validating people's experience, is worth more than we can ever know!

"There simply is no pill that can replace human connection. There is no pharmacy that can fill the need for compassionate interaction with others. There is no panacea. The answer to human suffering is both within us and between us."

-Dr. Joanne Cacciatore

Context Relevant Documentation

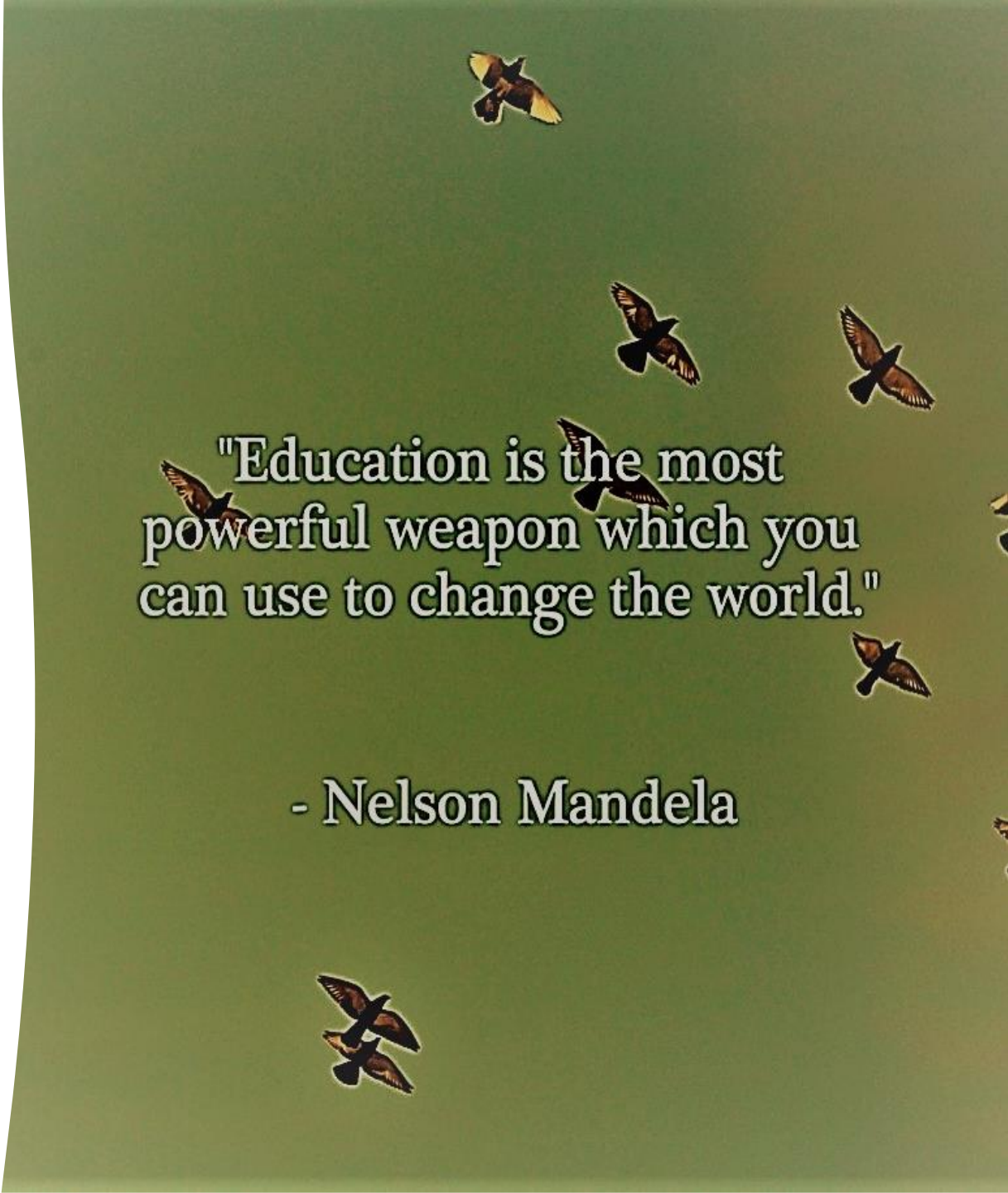
See links under 'resources'



Suicide: Useful information

- Suicide isn't inevitable and everybody can play a role in prevention
- Asking someone if they are suicidal doesn't put the idea in their head. It lets them know you're ok to talk about it
- Mental health problems alone do not explain why people die by suicide
- There is no single cause
- Northern Ireland Statistic and Research Agency (NISRA)

Finalised Suicide Statistics in Northern Ireland, 2015 – 2021 'NI most deprived areas had suicide rate almost twice of least deprived areas' in 2020



"Education is the most powerful weapon which you can use to change the world."

- Nelson Mandela

Stigma and potential barriers to seeking help

- Suicide and self-harm are selfish. What is going on for people?
- Suicidal people are weak, attention-seeking and/or 'crazy'
- Barriers to seeking help:

Just talk? ... reaching in?

What will people think of me

I'm too ashamed

Question my professional competence

I should be able to sort this out on my own

How I've been treated in the past




Language

- Self-harm with or without the intention to die. One can lead to the other. Self-harm is one risk factor for people who die by suicide

- Self-harm without the intention to die

There are many reasons people self-harm

- We no longer say 'committed' suicide. It's not a crime. Alternatives are 'the person tried to end their life/take their life/attempted suicide'
- 'Repeat offender', 'revolving door', 'frequent flyer', 'deliberate' and 'threatening' all communicate judgement and blame



**What we don't
need in the
midst of struggle
is shame for
being human.**

Brene Brown

What is Safety Planning

- Evidence-based tool. Findings from a wide range of different types of studies show it helps keep people who are suicidal safe (O'Connor, 2021)
- A plan to help people keep safe when thoughts feel overwhelming ... *and more*
- Safety planning is for everyone AND safety planning in response to a crisis
- Safety planning for everyone: Online co-produced safety planning site for anyone struggling or supporting someone who is suicidal www.stayingsafe.net
- 'Putting on a seatbelt'

@LisaTM

My Safety Plan

CONNECTING WITH PEOPLE

Getting through right now

Making your situation safer

Things to lift or calm your mood

Things to distract you

People to support you

List who you can talk to if you are distressed or thinking about self-harm or suicide

Emergency professional support

Ref: www.stayingsafe.net and www.4mentalhealth.com
and www.wellbeingandcoping.net

Safety planning in response to a crisis and ongoing struggles with self-harm and suicidal thoughts and behaviours

- Co-created/collaborative plan
- Spans across services: Inpatient, Home Treatment, Community, GP's
- Regional Towards Zero Suicide Programme: Safety Planning = one workstream
- Acute crisis and follow up
- Dynamic Document
- Practical ideas for what helps the person when they are in crisis
- A plan to help keep safe when thoughts feel overwhelming ... and more

My Personal Plan

(Myself)

(My Supporter)

(My Health Care Professional)

STEP 1

Making my environment safe.

Try to Distract Yourself

5 Things you can see right now.

4 Things you can hear right now.

3 Things you can touch, reach out and touch them now.

2 Things you can smell or like the smell of.

1 Slow, deep breath, focus on your breathing.

STEP 2

Place I can go to distract me.

STEP 3

How will I get there?

STEP 4

People I can talk to if things get worse.

STEP 5

Things other people can do to help me.

STEP 6

Professionals that can help.

G.P.

G.P. Out of Hours

Community Mental Health Team

Crisis Team

STEP 7

Emergency Contact Numbers

Lifeline : 0808 808 8000

Samaritans:

116123 (Freephone)

71265511

STEP 8

If I am experiencing suicidal thoughts I will attend A&E.

If I cannot get there I will call 999.

Person to contact in case of emergency

HSC Western Health and Social Care Trust

Stay strong, things will get better. It may be stormy now but it never rains forever.

Keeping me well. My Positive Affirmation.

Things I enjoy.

Warning signs I'm becoming unwell

What has helped me in the past?

What would I say to a friend who is feeling down?

Who or what keeps me going?

Three goals I can complete daily.

1

2

3

Hobbies I can begin/continue.

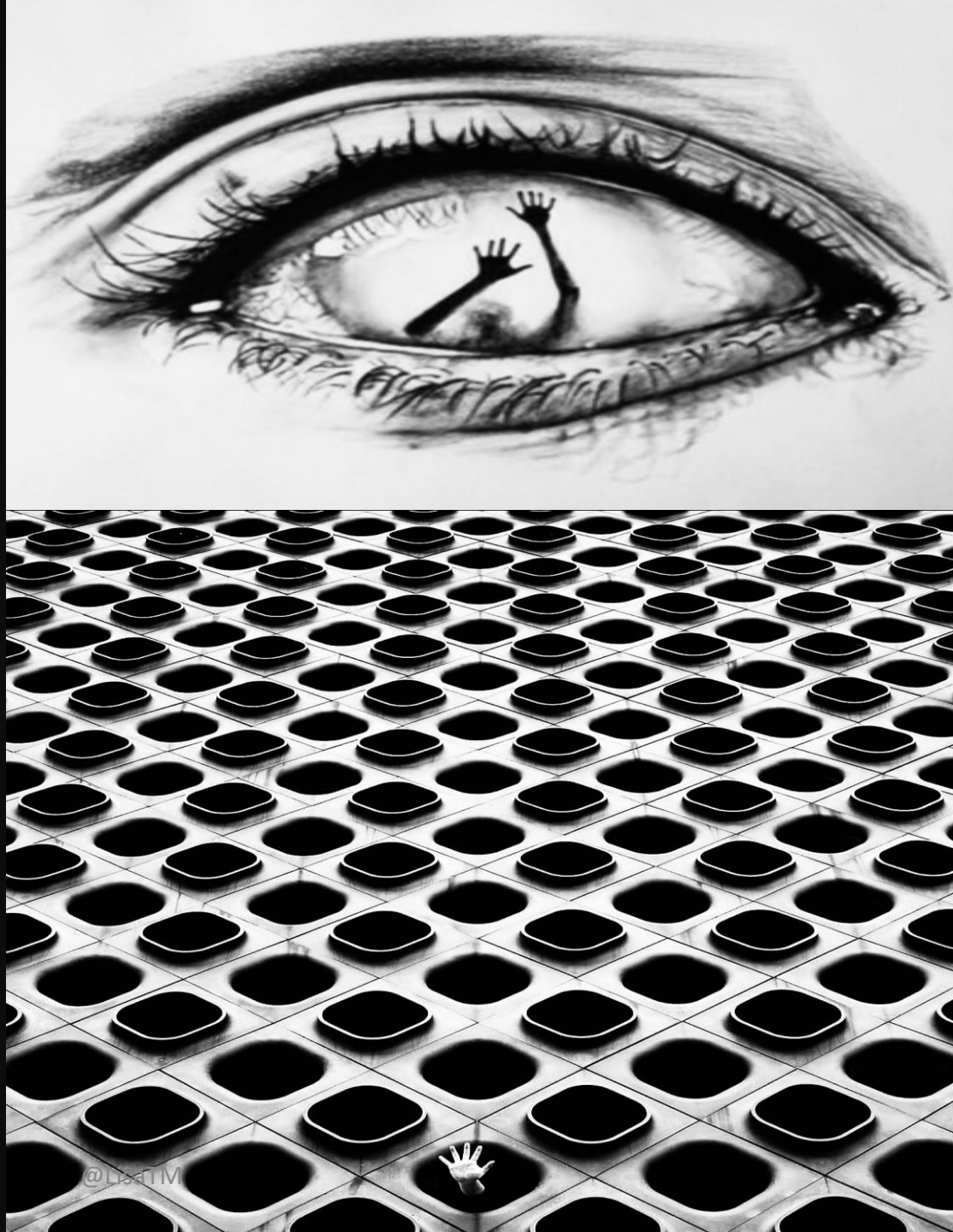
Blinded

What did you see when you looked at me?
Bandaged, broken, breaking down.
Symptoms smothering, suffocating sound.
Risk assessed, year on year
Those boxes ticked,
The plans you made
The same each time
Which I then went and disobeyed.
Repeat offender, that was me,
Revolving door, we all could see

Or Not!!

Textbooks teach many truths,
They have their place.
But I am me and you are you
Did you not see?
A hundred stories carved upon my skin
Speak a truth I needed heard,
But I'd been labelled to be understood
And a heavy cost was incurred.

Not all is as it seems you know
For me or you.
Behind the walls and masks we wear
We're all just human, we all know despair.
Before you judge or label me
Please make some space and truly see!



Them: Maybe a little lavender would help reduce your stress

Me:



@LisaTM

@KRISTINAKUZMIC

Safety Planning in Practice

- Challenges: Supporters, skills and tools to distract and calm, self-awareness/knowledge, practice, causes of distress not addressed
- Making the environment safe
- Realistic strategies (e.g., financial, time of day, childcare)
- Support: Emotional and practical
- Supporters need to know and agree their role
- Professional values in action
- Choice and autonomy and safeguarding relationships
- Boundaries and self-care (personal and professional)
- Human boundaries
- Dynamic, evolving document



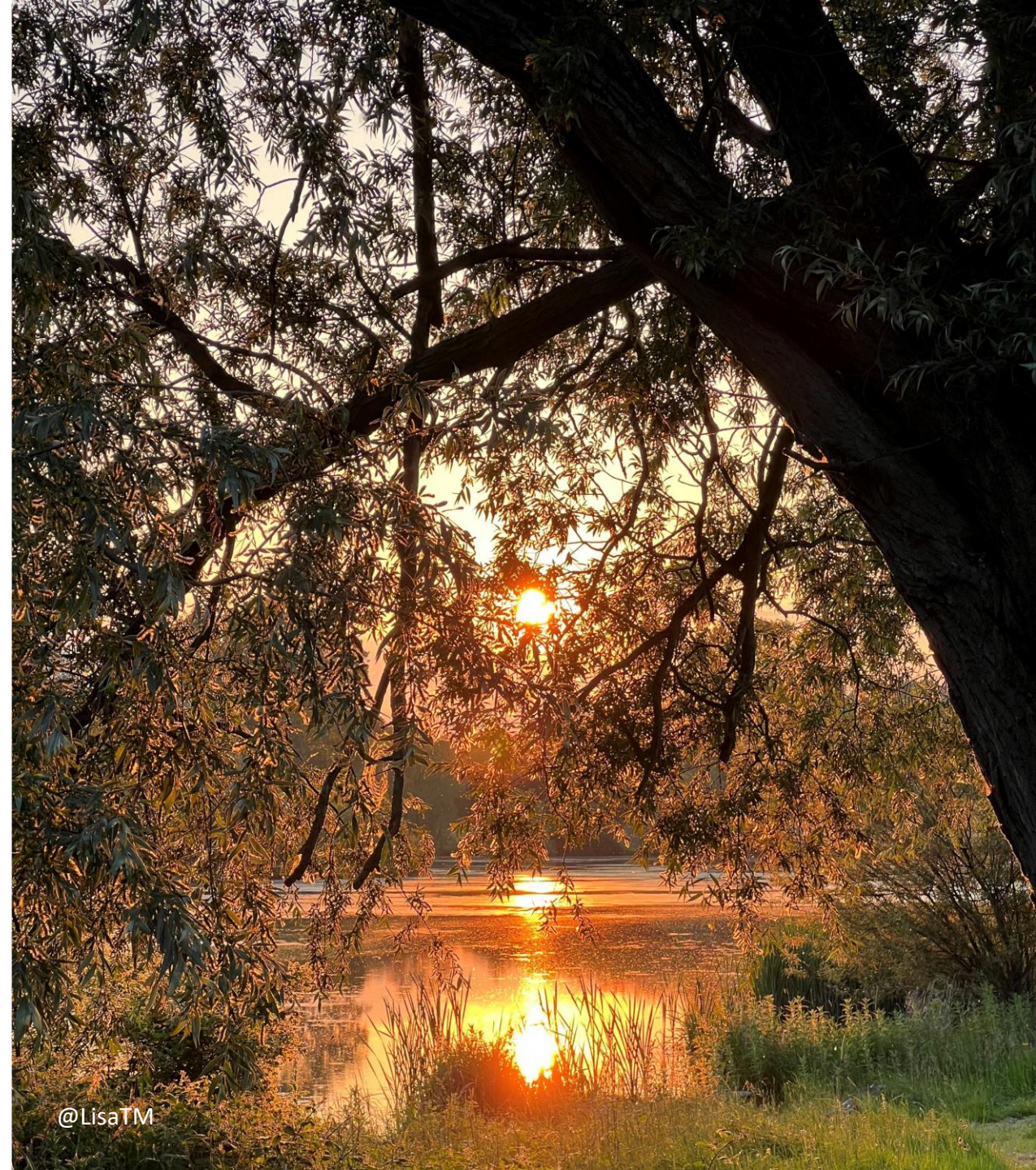
Key Take Aways

- Safety planning is for everyone
- Myths, stigma and language
- Self-awareness: How am I?
- Being *with* ... keeping the person central
- Not another 'form' to be filled ... a conversation
- Remembering carers/supporters
- Making environment safe: what might they use, are these currently available, try to agree a concrete plan, clarify, think through barriers
- Dynamic document
- Wellness Recovery Action Plan (WRAP) – Recovery College's in every Trust deliver free courses

“How we are with people really does matter.
Every interaction is an opportunity to help
someone feel seen and valued. It’s a very
lonely place to feel invisible, like you’re not
even a person”

Lisa Morrison

*“Change begins with
us. One relationship
at a time”*



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Thank You and Questions!

<https://www.surveymonkey.co.uk/r/V95L557>

Lifeline 0808 808 8000 & Samaritans 116 123

Helplines NI: www.helplinesni.com

Online Co-Produced Safety Planning site for anyone struggling or supporting someone who is suicidal www.stayingsafe.net

References & Additional Resources

- Zero Suicide Alliance (ZSA) Training <https://zerosuicidealliance.com>
- Lifeline 0808 808 8000 and information on their website <https://lifelinehelpline.info> 24/7. Can help if you or someone you know is in distress.
- Lisa Morrison website: <https://www.lisamorrison.co.uk>
- Being with people in distress: <https://youtu.be/yRiXaJGIoJE>
- Collaborative Safety Planning: <https://youtu.be/UB86CiOmqBI>
- More videos: Lisa Morrison YouTube channel with videos on self-harm, ECT, diagnoses, wider systemic issues in services and why a trauma-informed approach is so needed <https://youtube.com/@lisamorrisontrainingconsult798>
- Online co-produced safety planning site www.stayingsafe.net with www.4mentalhealth.com and wellbeing ideas and resources www.wellbeingandcoping.net
- When it is Darkest. Why people die by suicide and what we can do to prevent it. Rory O'Connor (2021)
- #NewScript for Mental Health: Practice and Participation of Rights (PPR) visit www.nlb.ie/campaigns/mental-health . Do get involved
- Bryony Shannon, Strategic Lead for Practice Development in Doncaster, writes blogs about language used in social care. You can view her site at <https://rewritingsocialcare.blog/>
- Sources: VISIONS inc. www.visions-inc.org & Centre for Courage & Renewal www.couragerenewal.org
- Psychiatric drug withdrawal (includes a video on safe withdrawal) <https://iipdw.org/>

Additional Resources

- Co-Production Guide (DoH)
<https://www.health-ni.gov.uk/sites/default/files/publications/health/HSCB-Co-Production-Guide.pdf>
- Regional Mental Health Care Pathway (You In Mind and HSC)2014 <https://www.northerntrust.hscni.net/wp-content/uploads/2017/07/Regional-mental-health-care-pathway-1.pdf>
- Protect Life 2 Strategy <https://www.health-ni.gov.uk/protectlife2>
- Mental Health Strategy 2021 – 2031 <https://www.health-ni.gov.uk/sites/default/files/publications/health/doh-mhs-strategy-2021-2031.pdf>
- The Polyvagal Theory in Therapy, Engaging the Rhythm of Regulation, Deb Dana (2018)
- The Developing Mind, Third Edition, 2020, Daniel J. Siegel
- A Treasure Box for Creating Trauma Informed Organisations, Volume 1 & 2, Dr Karen Treisman (2021)
- The Body Keeps The Score. Mind, brain and body in the transformation of trauma. Bessel Van Der Kolk (2015)
- Healing the Fragmented Selves of Trauma Survivors: Overcoming Internal Alienation. Janina Fisher (2016)
- The Boy Who Was Raised As A Dog, 3rd Edition And Other Stories from a Child Psychiatrist's Notebook. What Traumatized Children Can Teach Us About Loss, Love and Healing. Bruce Perry M.D. PhD with Maria Maia Szalavitz

- They Died Waiting: Caroline Aldridge and Emma Corlett www.learningsocialworker.com
- A Straight-Talking Introduction to the Causes of Mental Health Problems. Dr John Read and Pete Sanders. Order <https://www.pccs-books.co.uk/products/a-straight-talking-introduction-to-the-causes-of-mental-health-problems-1> and/or contact PCCS Books, the publisher Katie Moffat katie@pccs-books.co.uk

