

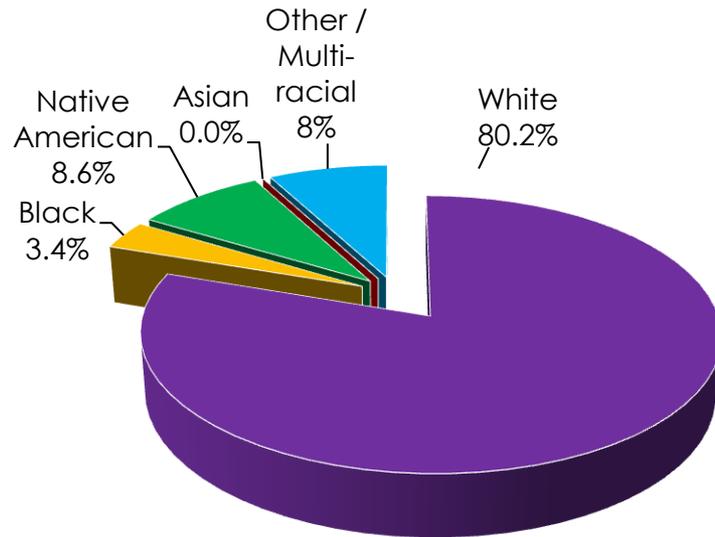
# QPR

Three steps that  
anyone can  
learn to help  
save a life from  
suicide

Question, Persuade, Refer

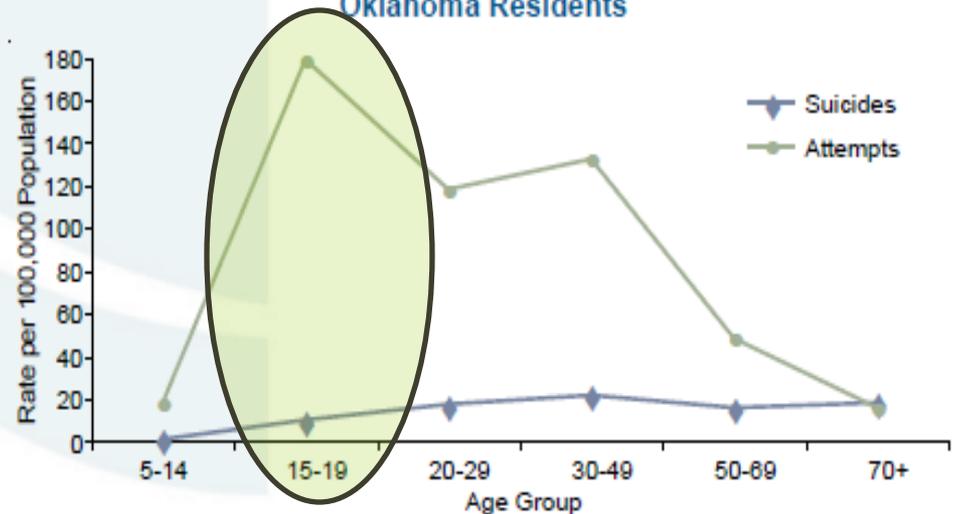
# In Oklahoma:

- In 2007, there were 526 deaths by suicide (rate per 100,000 = 14.5)



- While those between the ages of 35-54 are more likely to die by suicide (232 deaths in 2007), adolescents have the highest suicide attempt rate (16% of hospitalized attempts are by 15-19 year-olds).

Average Annual Self-Inflicted Injuries by Age Group, Oklahoma Residents





# Our Oklahoma Youth

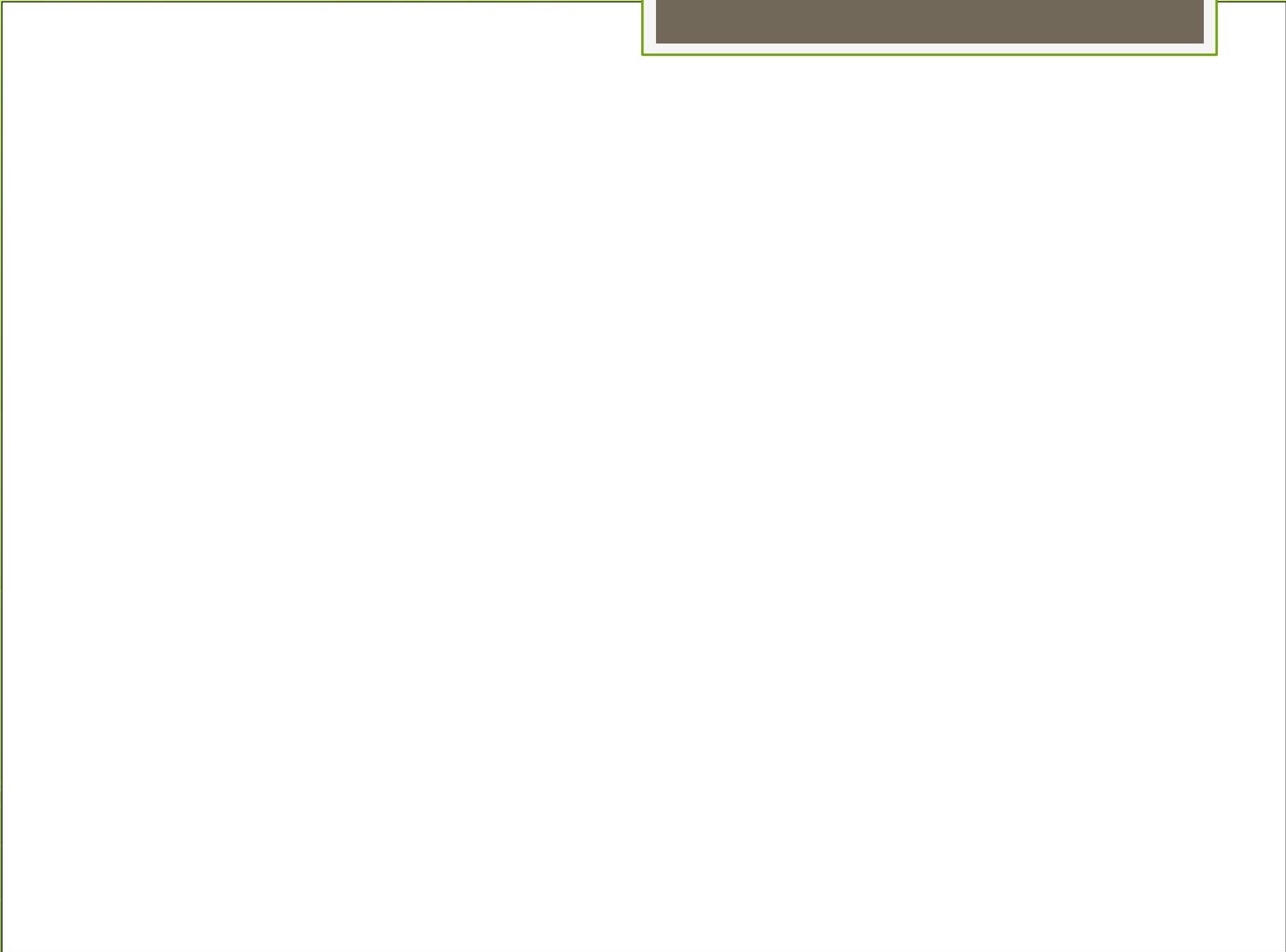
- When surveyed about the previous 12 months:
  - 13.9% of 9<sup>th</sup> – 12<sup>th</sup> graders in Oklahoma acknowledged that they had seriously considered attempting suicide
  - 5.9% reported that they had actually attempted suicide one or more times

*Youth Risk Behavior Survey (YRBS), 2007*

- In the years 2003-2006, an average of seventy-five (75) young Oklahomans (ages 5-24) took their own life each year.

*Oklahoma KIDS COUNT Factbook, 2007–2008*

- In 2007, this number decreased to 61 (still 61 too many!)  
*Oklahoma Violent Death Reporting System*



# Thoughts to ponder

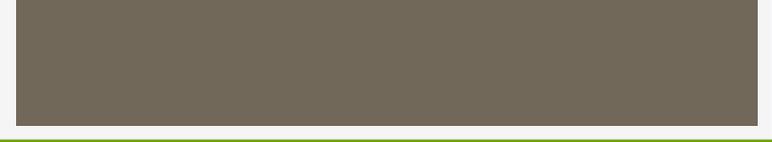
What would you do if you were worried about someone?

Where would you take them?

What about fees, hours of operation, etc.?

# QPR

*Ask A Question, Save A Life*



# QPR

*Question, Persuade, Refer*

# *QPR*

- QPR is not intended to be a form of counseling or treatment.
- QPR is intended to offer hope through positive action.

## Suicide Myths and Facts

- **Myth** No one can stop a suicide, it is inevitable.
- **Fact** If people in a crisis get the help they need, they will probably never be suicidal again.
- **Myth** Confronting a person about suicide will only make them angry and increase the risk of suicide.
- **Fact** Asking someone directly about suicidal intent lowers anxiety, opens up communication and lowers the risk of an impulsive act.
- **Myth** Only experts can prevent suicide.
- **Fact** Suicide prevention is everybody's business, and anyone can help prevent the tragedy of suicide.

# QPR

## *Myths And Facts About Suicide*

- **Myth** Suicidal people keep their plans to themselves.
- **Fact** Most suicidal people communicate their intent sometime during the week preceding their attempt.
- **Myth** Those who talk about suicide don't do it.
- **Fact** People who talk about suicide may try, or even complete, an act of self-destruction.
- **Myth** Once a person decides to complete suicide, there is nothing anyone can do to stop them.
- **Fact** Suicide is the most preventable kind of death, and almost any positive action may save a life.

How can I help? Ask the Question...

# *QPR*

## Suicide Clues And Warning Signs

The more clues and signs observed, the greater the risk. Take all signs seriously!

# *QPR*

## Direct Verbal Clues:

- “I’ve decided to kill myself.”
- “I wish I were dead.”
- “I’m going to commit suicide.”
- “I’m going to end it all.”
- “If (such and such) doesn’t happen, I’ll kill myself.”

# *QPR*

## Indirect Verbal Clues:

- “I’m tired of life, I just can’t go on.”
- “My family would be better off without me.”
- “Who cares if I’m dead anyway.”
- “I just want out.”
- “I won’t be around much longer.”
- “Pretty soon you won’t have to worry about me.”

# *QPR*

## **Behavioral Clues:**

- Any previous suicide attempt
- Acquiring a gun or stockpiling pills
- Co-occurring depression, moodiness, hopelessness
- Putting personal affairs in order
- Giving away prized possessions
- Sudden interest or disinterest in religion
- Drug or alcohol abuse, or relapse after a period of recovery
- Unexplained anger, aggression and irritability

# *QPR*

## **Situational Clues:**

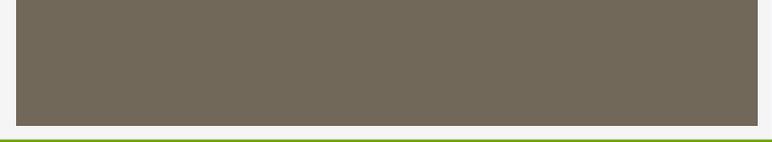
- Being fired or being expelled from school
- A recent unwanted move
- Loss of any major relationship
- Death of a spouse, child, or best friend, especially if by suicide
- Diagnosis of a serious or terminal illness
- Sudden unexpected loss of freedom/fear of punishment
- Anticipated loss of financial security
- Loss of a cherished therapist, counselor or teacher
- Fear of becoming a burden to others

# *QPR*

## *Tips for Asking the Suicide Question*

- If in doubt, don't wait, ask the question
- If the person is reluctant, be persistent
- Talk to the person alone in a private setting
- Allow the person to talk freely
- Give yourself plenty of time
- Have your resources handy; QPR Card, phone numbers, counselor's name and any other information that might help

Remember: How you ask the question is less important than that you ask it



**Q**

***QUESTION***

**Less Direct Approach:**

- “Have you been unhappy lately?  
Have you been very unhappy lately?  
Have you been so very unhappy lately that  
you’ve been thinking about ending your life?”
- “Do you ever wish you could go to sleep and  
never wake up?”



## QUESTION

### Direct Approach:

- “You know, when people are as upset as you seem to be, they sometimes wish they were dead. I’m wondering if you’re feeling that way, too?”
- “You look pretty miserable, I wonder if you’re thinking about suicide?”
- “Are you thinking about killing yourself?”

**NOTE:** If you cannot ask the question, find someone who can.

# How *Not* to Ask the Suicide Question

“You’re not suicidal,  
are you?”

# *P*

## *PERSUADE*

### HOW TO PERSUADE SOMEONE TO STAY ALIVE

- ◉ Listen to the problem and give them your full attention
- ◉ Remember, suicide is not the problem, only the solution to a perceived insoluble problem
- ◉ Do not rush to judgment
- ◉ Offer hope in any form

# *P*

## *PERSUADE*

Then Ask:

- “Will you go with me to get help?”
- “Will you let me help you get help?”
- “Will you promise me not to kill yourself until we’ve found some help?”

**YOUR WILLINGNESS TO LISTEN AND TO  
HELP CAN REKINDLE HOPE, AND MAKE  
ALL THE DIFFERENCE.**

# R

## *REFER*

- Suicidal people often believe they cannot be helped, so you may have to do more.
- The best referral involves taking the person directly to someone who can help.
- The next best referral is getting a commitment from them to accept help, then making the arrangements to get that help.
- The third best referral is to give referral information and try to get a good faith commitment not to complete or attempt suicide. Any willingness to accept help at some time, even if in the future, is a good outcome.

# *REMEMBER*

*Since almost all efforts to persuade someone to live instead of attempt suicide will be met with agreement and relief, don't hesitate to get involved or take the lead.*

# *For Effective QPR*

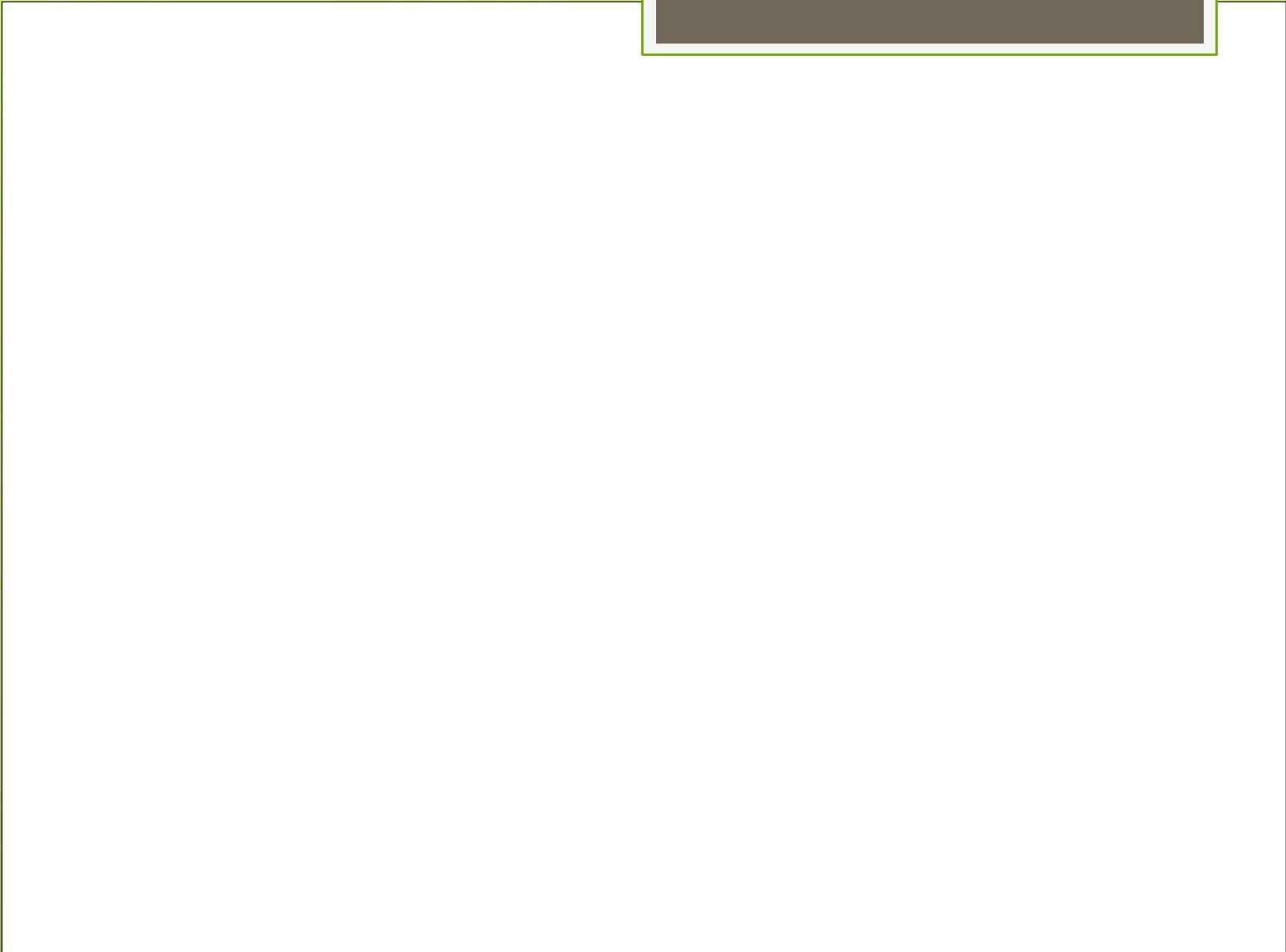
- Say: “I want you to live,” or “I’m on your side...we’ll get through this.”
- Get Others Involved. Ask the person who else might help. Family? Friends? Brothers? Sisters? Pastors? Priest? Rabbi? Bishop? Physician?

# *For Effective QPR*

- Join a Team. Offer to work with clergy, therapists, psychiatrists or whomever is going to provide the counseling or treatment.
- Follow up with a visit, a phone call or a card, and in whatever way feels comfortable to you, let the person know you care about what happens to them. Caring may save a life.

# What Are Your Resources ?

- Emergency Room-EMTALA  
Do they have suicide safety precautions?
- National Lifeline 800-273-TALK
- Mental Health Provider  
There are fifteen CMHCs, five of which are state-operated facilities and the other ten are contracted non-profit providers  
<https://www.odmhsas.org> and then search for Community Mental Health Providers
- Police/Sheriff Dept.
- Follow-up



# EIRF

We need your help.....

Tell us a story....

*If you identify and assist someone you believe to be at risk, please share this information with us using the survey at:*

**[https://www.surveymonkey.com/s/EIRF\\_Oklahoma](https://www.surveymonkey.com/s/EIRF_Oklahoma)**

# REMEMBER

**WHEN YOU APPLY QPR,  
YOU PLANT THE SEEDS  
OF HOPE. HOPE HELPS  
PREVENT SUICIDE.**

# Resources

**National Suicide Lifeline  
800-273-TALK**

**Suicide Prevention Resource Center**  
[www.sprc.org](http://www.sprc.org)

**Resource Center (free materials)**  
[www.odmhsas.org/resourcecenter](http://www.odmhsas.org/resourcecenter)

**To request QPR presentations in your  
community or for organization please  
contact**

**Julie Geddes**

**405-522-3835**

**[jgeddes@odmhsas.org](mailto:jgeddes@odmhsas.org)**