Suicides can be prevented - we all need to work together

Anthea Ong For The Straits Times

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FACEBOOK

NMP recalls her own time of despair and calls for a national suicide prevention strategy
It was the last Saturday of 2019.

I was sitting by the Singapore literature section of Marine Parade Library, shedding more than a few tears, after two hours of chat with a suicide-bereaved mother. I recalled her comment: "Forever 17" - the words of a heartbroken and guilt-stricken mother of a child gone too soon. Anxiety from school turned to severe depression and took a bright young star from us.

Another friend had also texted me weeks before to say a senior banker in his firm had died suddenly, and later shared that it was suicide.

Then, there was that young taxi driver who shared with me not too long ago about his 87-year-old grandfather jumping to his death by climbing up the flowerpot racks along his Housing Board corridor after his breakfast. His whole family was still having breakfast inside the flat when they heard the loud thud. The taxi driver worries about his widowed grandmother, who has been sharing her suicidal thoughts with him.

On Dec 22 last year, former Singapore Idol contestant Samantha Lee left a video on her Facebook page, saying that she believed she didn't fit in this world, and she knew that she never will. She took her own life.

Deaths from suicides have become a global public health concern. Between 1990 and 2016, it was found that there has been a 6.7 per cent increase in global suicide mortality.

In Singapore, we are also witnessing a spike in suicide rates, with the number of reported suicides increasing by 10 per cent in 2018, to 397. Teenage suicides among boys and elderly suicide were the highest since Singapore started tracking suicide in 1991.

UNDERSTANDING WARNING SIGNS AND RISK FACTORS

Suicide is preventable. Studies show that 50 per cent to 60 per cent of all persons who died by suicide gave some warning of their intentions to a friend or family member.

It is often helpful to pay attention to unusual and sustained changes in actions (withdrawal, loss of interest), words (verbal statements such as "everybody will be better off without me" and "what's the point of living"), feelings (guilt, hopelessness); and biological/physical aspects (poor sleep, loss of appetite).

I have learnt to become better at noticing these warning signs from my teammates in Hush TeaBar who live with mental health conditions.

One of them has had many withdrawal and suicidal episodes. Each one made him stay away from family and work, yet stay awake night after night with hopelessness. He's taking a sabbatical now to recover, even if it is a financially debilitating choice for him.



Suicide is preventable, says the writer. Studies show that 50 per cent to 60 per cent of all persons who died by suicide gave some warning of their intentions to a friend or family member. ST PHOTO: KELVIN CHNG

We must also learn to discard our stereotypes of suicidal individuals as only those with pre-existing mental health conditions. Apart from mental illnesses, other key stressors which increase the risk of suicides include stressful events, traumatic events or events which evoke feelings of loss and worthlessness. Examples of such events are exposure to violence, loss of a loved one, and being embroiled in financial difficulties.

I found myself in a deep, dark hole 12 years ago, after a messy divorce, several lawsuits filed by my former husband against my business that also led to a failed business, and only \$16 in my bank account. I still remember that fleeting moment of contemplating the distance between my 18th floor flat in Marine Crescent, where I was lying on the floor in despair, to the ground below.

BREAKING THE SILENCE SURROUNDING SUICIDE

Another key risk factor for suicides is the stigma surrounding the act, and therefore not talking about it even when there are warning signs.

The tragic story of Zen Dylan Koh taking his own life while studying in Melbourne serves as a cautionary tale. His mother, Ms Elaine Lek,

believes her son could have been saved if his friends had been forthcoming about his suicidal thoughts.

To break the silence surrounding suicide, we need to start talking about this taboo topic by creating a safe space for suicidal individuals, and their family and friends, to share and seek help.

If we suspect that a family member or friend may be suicidal, it is useful to express our concerns in a non-judgmental manner. Most people considering suicide need assistance getting through their moment of crisis. Often, they have tried searching for solutions, but as despair sets in, they may begin to feel hopeless and unable to see alternative solutions to their problems.

It is important for us to acknowledge this - that suicide is the only solution they see right now - and not be so quick to judge them as seeking attention or taking the "easy way" out, which is not helpful in de-escalating the present risk of suicide.

I've learnt that there is no need to give solutions to their problems immediately. Just listen and be with them until the despair and desperation fade, before gently encouraging them to speak with a counsellor or doctor. If you are unsure and emotional, especially with a loved one who is actively suicidal, you can also contact any of the emergency hotlines while listening and being with them, but do ask for consent first.

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The long overdue decriminalisation of suicide came into effect this month. Experts believe that decriminalisation is helpful in combating the stigma surrounding suicide, allowing those who are struggling to feel more comfortable seeking treatment.

The Please Stay movement, founded by Ms Lek and other mothers like her who have lost their teenage children to suicide, is slowly but surely starting a national conversation on suicide prevention and mental well-being for young people after the launch video of four mothers sharing their personal accounts went viral.

FOSTERING A CARING CULTURE IN SCHOOLS AND WORKPLACES

A culture of overwork was blamed for the deaths of two Stanford graduate students in 2018, with many peers pointing the finger of blame at university advisers who do not value the importance of mental health and work-life balance.

The recent convictions of three top executives of French telecommunications company Orange for the suicides of 35 employees serve as a chilling reminder for leaders to live up to the responsibility of keeping employee well-being as a top priority.

Here in Singapore, more teenagers from top schools are seeking help at the Institute of Mental Health (IMH) for school-related stress.

Last year, a 17-year-old student in a top school shared on social media about her admission to IMH for suicide attempts and a history of depressive episodes from the immense pressure she faced to do well in school. She claimed to have met four other students from top schools in IMH who had attempted suicide or self-harmed also because of school stress.

A survey last year showed that Singaporeans are among the most stressed at work globally, with one in eight considering their stress levels unmanageable or "burnout". Other than serious physical, psychological and work-life consequences, burnout is also a precursor to premature death - such as from a sudden stroke or suicide for some.

In these circumstances, it can be difficult for those who are struggling to seek help. Raffles Institution has been running its Peer Helpers Programme for the past four years, training student volunteers to provide wellness support to their schoolmates.

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Ministry of Education schools have also started similar peer support programmes. In the same vein, many employers within the WorkWell Leaders Workgroup - which I started in May 2018 with 20 C-suite leaders from organisations such as Accenture Singapore, Johnson & Johnson and the National Council of Social Service - have trained employees as mental health allies to spot and deal with signs of distress in their colleagues.

A suicide is one too many. Other than peer support and emotional first aid training, specific guidelines in responding to suicide ideation, attempted suicide and suicide must be developed and included as part of an organisation's mental health plan. This is especially so for schools, given the alarming spike in teenage suicides last year, and parents must be included in the response protocols and support systems provided, including suicide postvention.

BUILDING A SOCIETY THAT CARES BECAUSE EVERY LIFE MATTERS

Suicide is a layered and complex issue. We need a national suicide prevention strategy that must aim for zero suicide, especially among children and teenagers.

This goal starts with doing everything we can to understand what is behind the number of children aged five to nine calling the Samaritans of Singapore hotline increasing by more than 500 per cent in less than three years; what made teenage suicides and elderly suicides peak last year. It means learning what we must do to arrest these disturbing trends; improving how we are following up with care and community support for those who have attempted suicide (20 per cent of suicides have had a previous attempt); and seeing what we can learn from others.

Studies show that 83 per cent of people who die by suicide visit some kind of doctor a year before their death. This means healthcare facilities, especially emergency departments, are a logical place to prevent suicides.

GET HELP

 If you or someone you know is seeking help for mental health-related issues, here are some helplines:

Samaritans of Singapore (24-hour hotline): 1800-221-4444

Community Health Assessment Team: 6493-6500/01 or click on the webchat icon at <u>chat.mentalhealth.sg</u>

Singapore Association for Mental Health helpline: 1800-283-7019

The Zero Suicide Initiative by the National Strategy for Suicide Prevention in the United States is based on a fundamental belief that suicide deaths of individuals under the care of health and behavioural health systems are preventable.

A Zero Suicide Institute was also established as part of the initiative to help healthcare systems transform to reduce suicides among people under their care - with steps that provide a directive to acknowledge each patient's pain, empower them to make safe decisions and build hope for recovery.

I agree with Samaritans of Singapore senior assistant director Wong Lai Chun when she said: "With a more open dialogue about suicide, we can create a more kind and empathetic society who will be aware of people around them struggling in silence."

Be there for someone who needs someone. Let's learn not to judge how someone is dealing with a pain that we've never experienced, their suffering is absolute to them and must never be invalidated. We all need to work together to build a society that cares, because every life matters.

Someone once said, the person who dies by suicide dies once - those they leave behind die a thousand deaths, trying to relive those terrible moments and asking why.

That was the pain I felt with the bereaved mother I mentioned at the beginning of this article - inconceivable, inconsolable.

If you are in despair and reading this, please know this: No, you aren't alone. Yes, we all feel this way sometimes. No, you won't always feel like this. Yes, the world is a better place because of you in it.

Please stay.

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