

# Before you reach your breaking point...

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Are Your  
People  
Assets?





Are Your  
People  
Roadblocks?



Can choose to  
avoid it



Helping your  
people cope  
with changes



# Stages of Change



Sources: Grimley 1997 (75) and Prochaska 1992 (1-68)

# The Change Curve



## Why do we resist change?

- Saying “No” is easier than saying “Yes”
- People want to belong
- The emotional impact of the change has not been taken into account



How can we  
help others to  
change?

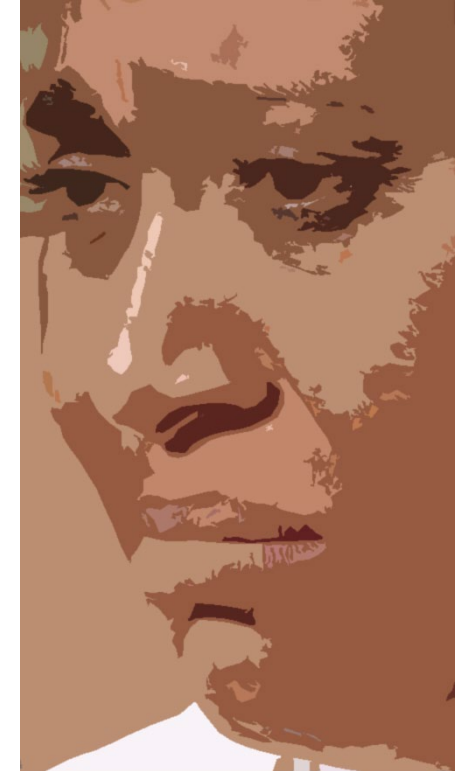
- Listen, show empathy
- Reframe
- Address the emotional impact

Sometimes it  
is more than  
just resistance  
to change....



# What is a crisis?

- How the individual defines it
- Stress is greater than your ability to cope
- Things are out of control
- Things are coming in on me- overwhelmed
- I am going to burst – explode
- Panic, Anger, Doom, Bizarre thinking, wanting to escape



# Emotional vs Rational Mindset

• Emotional

• Rational





## The big four worries

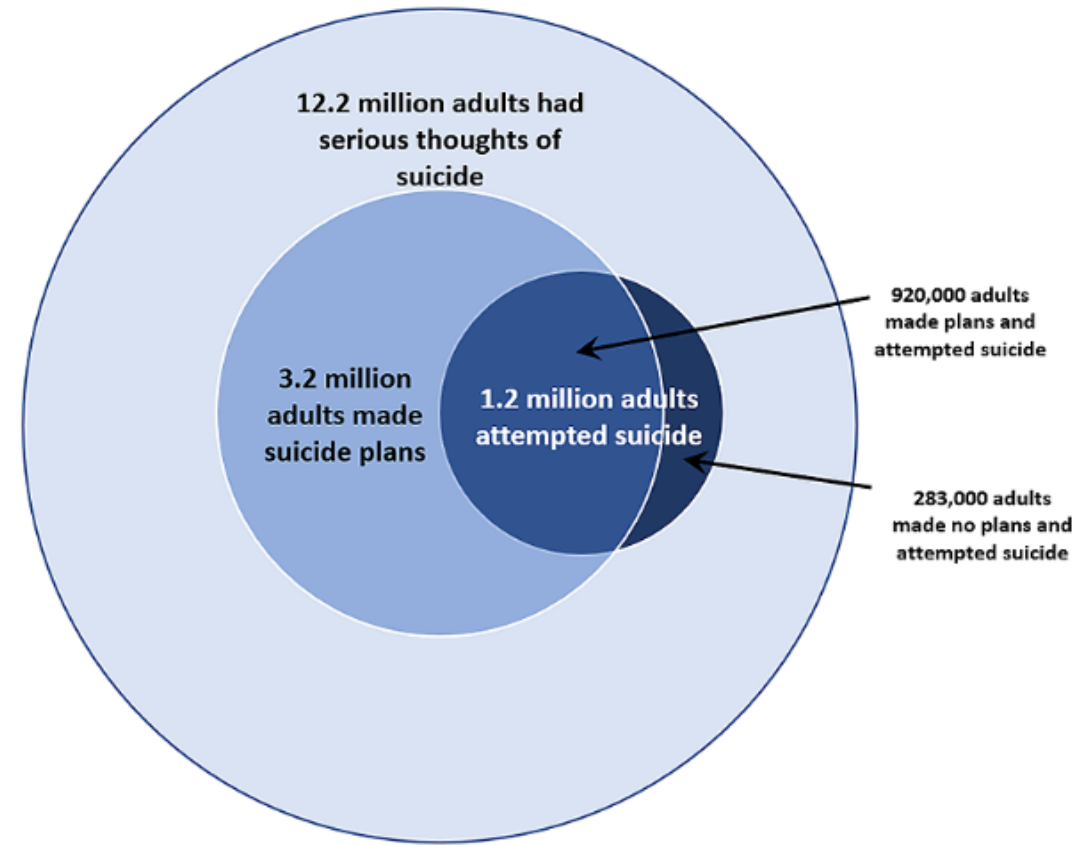
1. Suicidal thinking
2. Homicidal thinking and violent behavior
3. Psychosis
4. Substance Use Disorder



# Understanding Suicidal Thinking

## Past Year Suicidal Thoughts and Behaviors Among U.S. Adults (2020)

Data Courtesy of SAMHSA



## Morbidity and Mortality Weekly Report

**TABLE 3. Suicide rate per 100,000 civilian, noninstitutionalized working persons aged 16–64 years, by sex, based on suicide decedents (N = 14,728) presumed in the labor force at time of death using Standard Occupational Classification (SOC) major groups — National Violent Death Reporting System, 17 states,\* 2012 and 2015**

| Males    |                             |           |           |             |                   | Females  |  |          |           |             |                   |
|----------|-----------------------------|-----------|-----------|-------------|-------------------|----------|--|----------|-----------|-------------|-------------------|
| SOC code | Occupational group          | 2012      | 2015      | Rate change |                   | SOC code | Occupational group                             | 2012     | 2015      | Rate change |                   |
|          |                             |           |           | %           | Rank <sup>†</sup> |          |  |          |           | %           | Rank <sup>†</sup> |
| 47       | Construction and Extraction |           |           |             |                   | 27       | Arts, Design, Entertainment, Sports, and Media |          |           |             |                   |
|          | Rate rank <sup>§</sup>      | 1         | 1         | +22%        | 5                 |          | Rate rank <sup>§</sup>                         | 1        | 1         | +34%        | 2                 |
|          | Rate per 100,000            | 43.6      | 53.2      |             |                   |          | Rate per 100,000                               | 11.7     | 15.6      |             |                   |
|          | 95% CI <sup>¶</sup>         | 40.9–46.3 | 50.2–56.1 |             |                   |          | 95% CI <sup>¶</sup>                            | 8.6–15.5 | 12.1–19.8 |             |                   |
|          | Suicide decedents, no.      | 1,009     | 1,248     |             |                   |          | Suicide decedents, no.                         | 47       | 67        |             |                   |
|          | Population, no.             | 2,313,934 | 2,345,952 |             |                   |          | Population, no.                                | 403,305  | 429,424   |             |                   |



## Warning signs of suicide

### **Factors contributing to suicidal thinking**

job stress, unemployment, legal problems, financial problems, problems with relationships, substance abuse, depression

### **Warning Signs**

Increased drug or alcohol use

Aggressive behavior

Withdrawal from family , friends, community

Dramatic mood swings

Impulsive or reckless behavior

### **Suicidal behaviors can include**

Purchasing a weapon

Giving away possessions

Tying up loose ends

Saying goodbye to family and friends

# Myths about suicide

- Asking someone if they have thought about suicide gives them the idea to do it.
- Everyone who has thought about suicide needs to be hospitalized.
- People who think about suicide are weak.
- The best response to hearing someone talk about suicide is to let them know that that is a bad idea and the pain the person will cause the family and friends if they act on it.

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**BUSTED**





## What to do?

### If you hear someone mention:

- There is no point going on.
- What's the use?
- I wish I was dead.
- There is no hope of things getting better.
- I can't take it any more.
- It's all over.

### Ask:

- Sometimes people get so discouraged they think about their own death. Are you thinking about wanting to die?
- Sometimes people think about suicide as an answer. Is that where you are?
- Are you thinking about killing yourself?



## What to do – after you ask about suicide

### If they answer “No”

- I am glad to hear that, but at any time if you get to that point you can count on me. I care about how you are doing.
- Check in on them.

### If they answer “Yes”

- Thank you so much for sharing that with me. I know it must be tough for you. Can you stay with me until I can connect you with someone who is an expert at helping with this kind of thing? (Then connect.)
- Help them get away from the planned means to do it.
- Ask about firearms.

# Question Persuade Refer

- 1. Are you thinking about killing yourself?
- 2. If so, can you stay with me until we can talk to someone safe?
- 3. Refer to professional. Call or text 988



# Lethal Combination

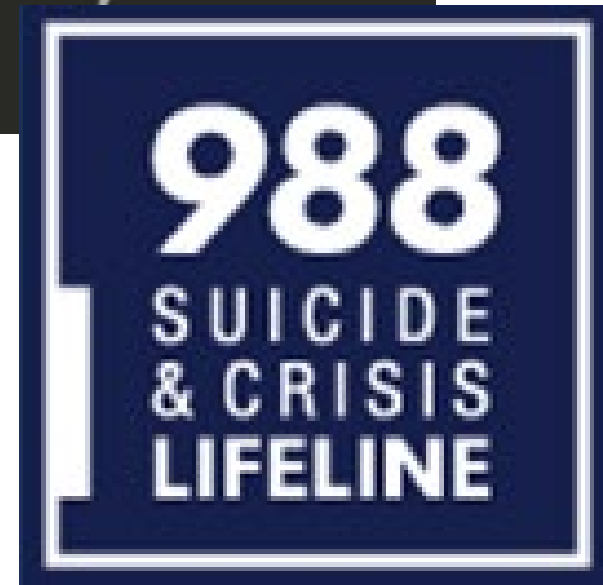


Like taking a  
drunk friend's  
keys



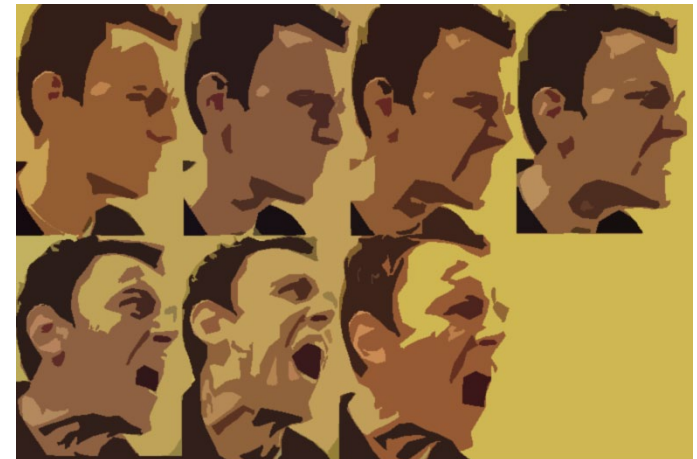


911 and 988



# Homicidal ideation and violence

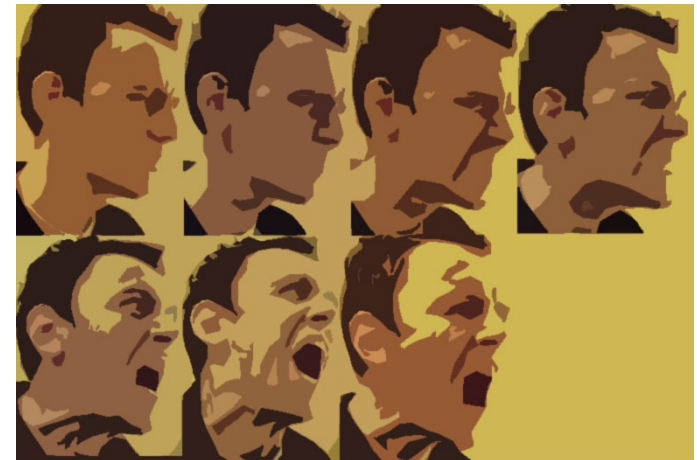
- Very hard to predict
- History of past violent acting out is a risk factor, as well as being a victim of past violence
- Overlap with suicidal ideation in some people
- Homicidal behavior is not always preceded by ideation
- Only 5% of mentally ill people are violent. Mentally ill people are more likely to be victims of crime than to commit crime.





# Homicidal ideation – What to do

Don't worry alone – share concerns with others  
Call 988



# Psychosis



Hearing or seeing things that are not there

Having a bizarre delusional belief - like science fiction, not making sense. Seeing connections when they are not actually there.

Your husband was playing with his rock band inside the wall of my bedroom.

The devil is stealing my thoughts.

My parents have been replaced by androids that are very similar to humans.

I figured out how to do microwave gardening.

The FBI has bugged my calls, and Spectrum television is putting thoughts in my head.

Jesus is talking to me directly through the radio.

# Psychosis – what to do

- Call Netcare 614-276-2273 (Franklin County) or call 988
- The earlier the intervention, the better







# Substance Use Disorder

- If it is causing you problems, then you have a problem with it.
- CAGE
- Cut down – failed attempts?
- Angry or Argue – do you have arguments with people about your drinking/drugs, or does the topic make you angry in discussions?
- Guilt – Do you feel guilty about your use?
- Eye opener – do you use first thing in the morning? (“Hair of the dog” “Wake and bake”)

# Substance Use Disorder

Anyone can develop a substance use problem.  
It is all a matter of Quantity and Frequency.

Quantity: How much you use.

Frequency: How often you use.

You can have a bad thing happen if you drink **a lot** on only one occasion. (Intoxication/Impairment)

Once you have used **enough** over a **long enough** period of time, you will develop **dependency** on the substance.



# Substance Use Disorder

- How much is enough? Depends on several factors
- The substance: cigarettes, heroin, crystal meth, etc.
- The age of your first use
- Genetic vulnerabilities to dependence
- Your gender
- Your body size



# 24/7 Netcare Crisis Hotline

Answered by licensed social workers and counselors

Chat feature available on our website and partner agencies websites

988, National Suicide Prevention Lifeline

Homeless Hotline 614-274-7000

614-276-CARE



In total, a combined **212,292 calls** were handled in 2021



When you  
call, what  
happens?



We ask for some basic information. If you are calling about someone else, start with the most alarming or worrisome thing first.

## What can 988 do?

- Help you come up with some ways to cope, if you are calling for yourself. Direct you how to get some help for yourself.
- If you are calling about someone else, we can help you figure out how serious it is. We can help you figure out next steps. If there is someone you are worried about who is at imminent threat to self or others, we can work together with you to figure it out and keep everyone safe.



Questions?





# Thank you

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# Resources

- [What Change Management can learn from Mediation | APMG International \(apmg-international.com\)](http://apmg-international.com)
- [Suicide Rates by Major Occupational Group — 17 States, 2012 and 2015 \(starchapter.com\)](http://starchapter.com)
- [NIMH » Suicide \(nih.gov\)](http://nih.gov)
- [QPR Gatekeeper card.pdf \(wpi.edu\)](http://wpi.edu)