Suicide Prevention Awareness Week

Suicide Prevention Awareness Week begins September 10 as the global community observes World Suicide Prevention Day. The goal of calling attention to this event in this newsletter is to open the dialogue about suicide with the hope of decreasing the stigma about the topic and ultimately to reach those in need of support. National efforts, and ours here on this campus, are aimed at insuring that we are aware of the signs and feel comfortable and empowered to reach out to someone at risk. The goal is that we create a safe and supportive culture that encourages members of our community to access help. It is important to know the signs, finds the words to ask, and reach out.

The Signs:
If a person talks about:
- Being a burden to others
- Feeling trapped
- Experiencing unbearable pain
- Having no reason to live
- Killing themselves

Specific things to look out for include:
- Increased use of alcohol or drugs
- Looking for a way to kill themselves, such as searching online for materials or means
- Acting recklessly
- Withdrawing from activities
- Isolating from family and friends
- Sleeping too much or too little
- Visiting or calling people to say goodbye
- Giving away prized possessions
- Aggression

Mood
- Depression
- Loss of interest
- Anger
- Humiliation
- Anxiety

Suicide Risk Factors
- Depression
- Bipolar (manic-depressive) disorder
- Schizophrenia
- Borderline or antisocial personality disorder
- Conduct disorder
- Psychotic symptoms
- Anxiety disorders
- Substance abuse disorders
- Serious or chronic health condition and/or pain
- Stressful life events which may include a death, divorce, or job loss
- Prolonged stress factors which may include harassment, bullying, relationship problems, and unemployment
- Access to lethal means including firearms and drugs
- Exposure to another person’s suicide, or to graphic or sensationalized accounts of suicide
- Historical Factors
- Previous suicide attempts
- Family history of suicide attempts


Wellness Events

UC Davis Health Farmers Market
Ed Bldg. Outdoor Quad Thursdays 3 to 7:30 p.m.

Living Fit Forever Classes
http://intranet.ucdmc.ucdavis.edu/clinops/resources/living_fit_forever.shtm

Work Life and Wellness Events
http://www.ucdmc.ucdavis.edu/hr/wellness/discounts.html

UCDMC Yoga
https://docs.google.com/document/d/1Gz23GMIbZJDrwzn9g8NxUnia4FUvShah4o5vQwO0/edit#heading=h.ey7t6v51js4

Science and Practice of Mindfulness and Compassion Meditation
CONTACT: Philippe Goldin, Ph.D. pgoldin@ucdavis.edu
Thursdays, 5-6 pm
Fall Quarter 2016
Start: 9/28 End: 12/7
Location: room 1335 Center for Health and Technology

"Put Your Insomnia to Bed"
Dr. Christine Osterhout
September 18th, 12-1, Education Building
Find The Words:

- Before starting a conversation with someone you are concerned about, be sure to have suicide crisis resources on hand.
- Ask directly, “Are you thinking of ending your life?” Don’t ask in a way that indicates you want “No” for an answer like “You are not thinking of suicide are you?”
- “I hear how difficult things are for you. But have you always wanted to die? Maybe there is a chance you won’t feel this way forever. I can help.”
- Help the person access resources:
  - [https://afsp.org/](https://afsp.org/)
  - [https://www.mindful.org/being-with-stressful-moments/](https://www.mindful.org/being-with-stressful-moments/)

Notes from the Office of Student and Resident Diversity

Remember that suicide statistics vary among racial/ethnic and other demographic communities in the US. Here are a few facts:

- American Indians and Alaskan Natives between 15 and 24 years of age have a higher suicide rate than any other racial/ethnic group of the same age.
- Among women ages 15–24, Asian American girls have the highest suicide mortality rates across all racial/ethnic groups.
- Among veterans receiving treatment for depression, the rate of suicide was seven to eight times that of their counterparts in the general population.
- Suicides are higher in rural counties and the rate of suicides by firearm were higher the more rural the county.
- Lesbian, gay, and bisexual individuals, particularly adolescents and young adults, have higher rates of suicidal ideation and suicide attempts than their heterosexual counterparts.
- Suicidality is extremely common among transgender individuals, and an estimated 55 percent have had suicidal ideations.
- Older Asian American women have the highest suicide rate of all women aged 65 and older, with elderly Chinese American women exhibiting rates 10 times higher than those of white elderly women.
- Among Asian Americans, female gender, family conflict, and discrimination are positively correlated with suicidal ideation and attempts. A high level of identification with one’s racial/ethnic group is associated with lower rates of suicide attempts.
- Cultural factors may adversely impact the mental health and suicide risk of immigrants and refugees, such as intergenerational conflicts related to acculturation, family pressures around academic achievement, and adverse experiences from the home country, including war, torture, and genocide.

When you ask about suicide, create a safe environment for patients to disclose stigmatized behaviors and communicate a supportive stance in light of potentially lethal psychological distress.

References


California Strategic Plan on Suicide Prevention: Every Californian Is Part of the Solution California Department of Mental Health. Draft. April 4, 2008

Cheng JKY; Fancher TL; Ratanasen M; Conner KR.; Duberstein, PR; Sue S; Takeuchi D. Lifetime suicidal ideation and suicide attempts in Asian Americans. Asian American Journal of Psychology. Vol 1(1), Mar 2010, 18–30. PMID: 20953306


If you, or a fellow student, are experiencing a mental health crisis, there are several options for accessing support:

- Student Health Counseling Services is available 24/7 at (530) 752-2349
- Sutter Center for Psychiatry is available 24/7 at (916) 386-3000
- Suicide Prevention Hotline 800-273-8255

Office of Student Wellness | Margaret Rea, Ph.D., Director of Student Wellness
Wellness Tip: Reimagining Stressful Moments with Notice-Shift-Rewire

There are many techniques that help us take care of our mind and body and decrease stress, but sometimes we need to just experience the stress and not try to fight it and in turn build our resiliency.

1) Cultivate the mindful experience of stress using Notice-Shift-Rewire. Let the experience of stress be your reminder to Notice what is happening here and now. Notice the sensations that accompany stress and see if you can even notice the part of you that favors the pleasurable experience of ease over the discomfort of stress. Try to catch yourself in this mind state of stress aversion.

The next step is to Shift back to non-judgmental awareness. See what happens when you simply observe the acceleration of your heartbeat, the tension in your jaw, shoulders or stomach, or the racing of anxious thoughts. What if that sensation of tension wasn’t labeled as ‘bad’?

Then Rewire by staying with whatever is arising. Let go of any effort to change your state.

2) Build resilience by shifting your mindset. Notice when you try to avoid certain events, experiences, or tasks as a way to steer clear of stress. Then Shift by reminding yourself—“stress isn’t bad. It’s often both a pathway to remembering to notice (advancing your practice) and to growth.” And, finally, Rewire by facing the stressors that arise in the course of life head on, staying with whatever arises.

By now, it should be clear that stress can either work for you or against you. By resisting and avoiding it, you diminish your ability to effectively navigate stress. But by integrating Notice-Shift-Rewire into your life, you can turn stress into an advantage.

Start developing this habit of Notice-Shift-Rewiring by setting a tiny goal—purposefully face into the discomfort of an ordinarilystressful situation once each day. If you want to make this even more sticky, tell your friends and family about your approach and see how they react. The simple act of explaining your alternative stress mindset can reinforce your practice and help others view stress from a different, bigger, perspective.

https://www.mindful.org/being-with-stressful-moments/

Monthly Recipe: Brunch ‘Omelet’

Dr. Oliveira from the UC Davis Department of Integrative Medicine is asking us to focus on breakfast for September. “Even if you are typically not hungry when you wake up, maybe you can set aside a couple September mornings to experiment...Breakfast can carry us throughout the day with more energy, enhance our concentration and alerntness and increase the likelihood of making more healthful food choices all day long.” Try making the Brunch Omelet a traditional breakfast favorite can be made egg-free using either tofu or chickpea flour. This lighter and better-for-you option will be the start of your brunch.

http://ucdintegrativemedicine.com/recipes/brunch-omelet/#gs.UwU1Bq8

Wellness App: Sleep Well Hypnosis

This month’s app is directed at helping with sleep. Getting adequate sleep is a critical factor for good mental health. Insomnia and anxiety can create a vicious sleepless cycle. Sleep Hypnosis uses relaxing sounds along with the voice of a hypnotist to lull you into relaxation. Clickable icons let you easily navigate through the app’s options and sessions can be set to loop as you sleep.