



Created By
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EMOTIONAL CPR

INTRODUCTION

Statistics show that over 32,000 Americans are taking their lives annually. That's one suicide every sixteen minutes. For every person who succeeds, twenty-five others attempt unsuccessfully. It's the third leading cause of death for those ages 15-24 and the rate is also high among the elderly. Worldwide there are more than 1 million suicides every year. Each person who takes his/her own life, burdens family members and friends with grief and guilt. Many never recover from the trauma of losing their loved one.

Although suicide is one of the most preventable deaths many people feel helpless and don't know how to help those in danger. The purpose of this booklet is to teach you *EMOTIONAL CPR*, enabling you to help save the life of a friend, family member, or anyone you care about who's at risk for suicide. It will give you the tools to reach out to others. You can make a difference!

I encourage you to keep this booklet in a safe place and to refer to it if you have concerns for the emotional safety of anyone you know. If you have any questions after reading it call *The Connection Helpline* at 352-483-2800 or 1-800-351-8082. We care and will be happy to assist you.

WHAT IS *EMOTIONAL CPR*?

It's a technique that helps you determine if a person is in danger of taking his/her life. It also assists you in helping someone who is suicidal. Follow this formula when using *EMOTIONAL CPR*:

- C* - COUNT the number of warning signs the person has;**
- P* - PLAN, determine if the person has a suicide plan;**
- R* - REDIRECT the person, referring to the information in this booklet for help.**

eOUNT THE WARNING SIGNS

- Withdrawing from friends, family and people who are supportive
- Feeling hopeless
- Believing there's no way out
- Practicing reckless behavior such as: speeding, drunk driving, self-mutilation
- No purpose or interest in making future plans
- Dramatic mood changes
- Using statements such as; "You don't need me around." "Everyone would be better off without me." "All I do is cause trouble for people." "Nothing matters anymore." "I can't deal with the pain." "I feel like dying." "There's no way out of this mess I'm in." "No one cares." "Life's not worth living."
- Increased use of drugs or alcohol
- Major difficulty sleeping or eating
- Sleeping most of the time
- Rage or uncontrollable anger
- Giving away prized possession when 5 or more of the above warning signs are present
- ★ Threatening to kill or harm themselves
- ★ Verbalizing a suicide plan (see next section of booklet)
- ★ Showing a high feeling of anxiety or panic
- ★ Looking for a way to kill themselves

A person showing 3-5 of the un-starred warning signs is indicating emotional turmoil, which increases their risk for suicide. Using the information in this booklet can help to lower the risks. A person with 5-10 warning signs is definitely indicating a need for intervention. Even if the person does not have a suicide plan you should move to the **R** section of this formula for information that can help redirect the person.

Note: The warning signs with a star ★ next to them indicate high risk. If a person has any of these warning signs immediately refer to the resources in this booklet and help redirect the person. Do not leave him/her alone.

PLAN - DETERMINE IF THE PERSON HAS A SUICIDE PLAN

If a person has several warning signs, it's important to determine whether or not they have a suicide plan. Many people will admit to suicidal thoughts if asked in a caring and compassionate way. It's important not to be judgmental. You may ask any of the following questions: "Have you been thinking of ending your life?" "Have you been having suicidal thoughts?" "Have you given up on life?" "Are you thinking of ending it all?"

If the person admits to suicidal thoughts you should find out if they have chosen a method. You may ask one of these questions: "Have you decided what method to use to end your life?" "I imagine you may have thought of a specific way to end it all. Would you share that with me?" "What suicide method do you want to use?"

If the previous questions are indicating a plan for suicide you also should determine if the person has chosen a specific time to end their life. Questions you can ask are: "When do you think you will carry out your plan?" "Have you decided when to end it all?"

You also will want to know if the person has chosen a location for the potential suicide. Asking the following questions may help: "Where do you plan to be when you take your life?" "Where do you want to end it all?" "Have you chosen a location?" If the answer to this question is yes you may ask, "Could you share that with me?"

The more detailed the persons' plan, the higher the risk is of them following through with it. If the person has 3 or more un-starred warning signs, any of the red-starred warning signs or has developed a specific suicide plan, follow the suggestions in the next section for redirecting him/her.

HOW TO *R*EDIRECT

SOMEONE WHO IS SUICIDAL

Stay calm and encourage the person to talk about their feelings. Tell them you're glad they're willing to talk with you.

Be a good listener and summarize what the person said to let him/her know you care enough to focus on what they're saying.

Accept the persons' feelings and avoid trying to talk them out of feeling that way.

Be non-judgmental.

Don't give advice or tell the person what to do. Most people will resist this and want to make their own decisions.

Avoid asking why, since questions starting with why encourage others to become defensive.

Talk with the person about suicide, which gives them a chance to vent their feelings and share their thoughts.

Let the person know he/she is not alone and offer hope that there are available options and helpful ways to deal with the problem.

Don't make promises you can't keep such as: "Everything will be okay."

You may tell him/her that many people considering suicide find that the thoughts pass in a few hours or days.

Talk with the person about a few simple things he/she can do to get through the next couple of days.

Encourage the person to talk with a professional and with someone they respect.

Find out if they've been eating and sleeping. If not, emphasize that lack of rest or food can greatly affect how a person feels. Often, with proper nutrition and sleep a persons' whole attitude will change.

After allowing the person to vent his/her feelings and frustrations, gradually steer the conversation into a positive direction by asking some of the following questions:

“Have you ever felt like ending your life before?” If the answer is yes you may ask: “How long did you feel this way?”

“When you've felt down in the past what helped you get through it?”

“What people, pets or things are most important in your life?”

“If a miracle happened in your life and things changed for you, what would you want to see happen?”

“What's the best thing that's happened to you this month, or this year?”

“What would your family or friends say your best qualities are?”

“Who are you important to?” “Who depends on you?”

“Who loves you?”

Note: It can be helpful to find a balance between negative and positive talk. Most people have some positives in their life, but when they're suicidal they may have forgotten the positives and focused entirely on the negatives. Helping them remember the positives can be very beneficial at this time.

***Very important:** Here are some important things to do, in addition to the above, if the person has any of the red-starred warning signs:

- Don't leave the person alone.
- Try to get the person to make a commitment to delay their plans for suicide for a short period of time (a few hours up to a few days).
- Seek professional help for the person.

MISCONCEPTIONS ABOUT SUICIDE

False: People who talk about suicide won't actually do it, but that they want attention.

True: Someone who talks about committing suicide is much more likely to follow through.

False: Suicide happens without warning.

True: Many times people aren't aware of the signs so they don't recognize the warnings.

False: People who are suicidal definitely want to die.

True: Usually the intention is to end the pain, but suicide may seem to be the only way out.

False: Depression and suicidal feelings won't go away.

True: Depression can be treated. Suicidal thoughts are usually fleeting and temporary.

False: Mental health professionals are the only people who can help a suicidal person.

True: Many suicidal people never go to a counselor. That's why it's important for friends and family to know how to help. Professionals are important, but can only help those who are willing to see them.

Dawn Pokorney has been a nurse for over thirty years. She designed the concept for EMOTIONAL CPR after her book “The Miracle of the Lighthouse Cove” was published. She wrote the book to give people hope and to prevent suicide. Since the release of this book, she’s been educating groups on suicide prevention.

She and her husband, Kevin, are the founders of The Connection Helpline, a crisis hotline located in Lake County, Florida. Dawn is passionate about saving lives and is scheduling speaking engagements to inspire others to practice EMOTIONAL CPR.

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For more information

CALL

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at

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or

1-800-351-8082



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