HKCSS WORKSHOP

Adolescent Suicide-Prevention, Intervention and Postvention

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Adolescent Suicide

what do you know?

what should you know?



How bad is it?

- Average 17 per year attempted
- Rated top cause of death 15-19
- Reated second 10-14
- 10% more attempts

Suicide is a major public health concern worldwide

- Suicide-related behaviour is an action, not an illness, which can have a fatal outcome.
 - It is the result of an interaction of complex biopsychological factors(mental health, biological vulnerability, social isolation, stress, trauma, family violence, illness, general penury and substance abuse)
- It occurs when Pain, Fear and Despair overwhelms Hope

Adolescent Suicide is preventable

- through
- Caring,
- Compassion,
- Commitments
- and Community

The traumatic consequences

- Transferred to family, friends, classmates and community need Intervention.
- The grief of those bereaved by suicide requires compassion, understanding and support to help minimize its impact.
- Postvention to individual victim for further attempts

Promote awareness and understending

- 1. Campaign, forums, conferences, activities.
- 2.awareness and support for persons suffering from mental illness, substance abuse disorders, trauma, grief.
- 3.Broad based support from government, professionals, stakeholders, voluntary groups, schools
- 4. Antistigma
- 5.Media knowledge-guidelines and code of ethics in portrayal and reporting

Develop, Implement and Sustain Community based Teenage Suicide Prevention, Intervention and Postvention Programmes

- 1.Specific strategies
- 2.high-risk groups
- 3.technical resources centres
- Training in protective factors
- Solution focused approach
- 4.training and evaluation
- 5.working agenda, timeline and target

Universal Preventive Intervention

- Reduce the availability and lethality of suicide methods
- 1.drugs, poisons
- Dextropropoxyphene
- 2.dangerous objects at home
- weapons
- 3.Barrier in school and accessible public jump spot
- 4. Charcoal burning

Increase training for recognition

- Of risk factors
- Warning signs
- At-risk behaviours

Provision of effective intervention and postvention

- Targeting key gatekeepers, volunteers and professionals
- Increase the number of committed groups
- Promote protective factors
- Reasons for living
- Solution-focused approaches
- Mental health aftercare
- Continuing care plans

Develop and Promote Effective Clinical and professional Practice

- Understanding
- Communication
- Guidelines
- Treatments
- Family support
- Outreach activities
- Trauma informed services

Adolescent Depression Guide

- Ongoing sadness, discouragement, loss of self-worth, and loss of interest in usual activites
- Process of maturing, influence of sex-hormones, independence conflict with parents
- Reaction to a disturbing event
- Having low self-esteem, are highly self-critical, and who feel little sense of control over negative events
- Other psychological /psychiatric problems-
- Schizophrenia, anxiety, ADHD, eating disorders, reckless behaviour
- Substance abuse

Events over which adolescent feels little control

- Harassment
- Child abuse
- Chronic illness
- Learning disabilitues
- Poor social skill
- Unstable caregiving
- Stressful life events-loss of a parent to death or divorce

Symptoms of Depression

See things more negatively

- Agitation
- Appetite change
- Difficulty concentrating
- Difficulty making decisions
- Feeling of hopelessness, sadness, self hatred
- Loss of pleasure inactivities that were once fun
- Thinking or talking about suicide or death
- Sleep problems
- Acting out behaviours(unusual defiance, missing curfews)
 - Criminal behaviour(shoplifting)
- Faltering school performance
- Highly irresponsible behaviour pattern
- Use of alcohol or other illegal substances
- Isolate self from family and friends
- More than 2 weeks and cause difficulty functioning

Signs and tests of depression

- Difficult
- Direct questions
- Information from family and school personnel
- General physical examination
- Blood and urine tests
- Look also for signs of other psychiatric disorders
- Refer for psychiatric evaluation

Treatment of Depression

- Medication
- SSRI
- FLUOXETINE(PROZAC)
- Escitalopram(Lexapro)
- Warning:may increase the risk of suicidal thoughts and actions, therefore closely followed up for side effects, and don't abruptly stop taking these medications
- NSRI
- Venlafaxine(efexor)
- Duloxetine(cymbalta)
- Mood stabiliser

Treatment of Depression

- By talk therapy
- Cognitive-behavioral therapy
- Family therapy
- Psychotherapy
- Support group
- Exercise, seek out activities that you enjoys
- Avoid alcohol, narcotics and other illegal drugs
- When struggling, talk to someone you trust abour how you are feeling
- Try to be around people who are caring and positive

Improve access and integration

- Develop strong linkages between the continum of care components
- Follow up
- Face to face contact
- Individual care plan
- Utilize collaborative input from families, school personel, classmates, friends
- Prioritize service delivery to high-risk groups-mental illness, mood disorders, substance abusers, with other concurrent disorders

Increase crisis intervention and support

- Develop and implement support structures for families living with suicidal people
- Develop a crisis resource database accessible to all crisis lines
- Increase the number and training of programmes and service providers

Increase services and support to those bereaved by suicide or who have attempted suicide

- Develop education modules for first responders regarding death notifications, community systems of support, aftercare
- Develop guidelines and information packages for schools, health acre settings, education departments, law enforcement departments to improve services, education and support to those bereaved by suicide
- Selective intervention
- Indicated preventions

Increase the number of primary prevention activites

- Training of service providers of evidence informed programmes that promote resiliency and protective factors
- Increase networking and improve cooperation between programmes, services and associations that promote community wellness, public health and injury prevention

Knowledge Development and Transfer

- Improve and expand surveillence system
- Promote and support the development of evaluation tools
- Promote and develop research
- Increase opportunities for reporting

Funding

Useful sites

- The Hong Kong Jockey Club Centre to Suicide Research and Prevention
- csro@hku.hk
- Asian Journal of Counselling
- hkier-journal@cuhk.edu.hk
- http://www.edb.gov.hk/index.aspx?nodeID=623&langno=1

Thank You