

Alternatives to Suicide: Mutual Support in Community

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About the Western Mass RLC



About the Western Mass RLC

Our Community includes:

- A peer-run respite called Afiya House,
- Community centers in four cities,
- Hearing Voices Network meetings,
- Alternatives to Suicide groups,
- Community Bridging,
- Free events and trainings
- And many other supportive spaces.

About the Western Mass RLC

- We create space for anyone who has a genuine interest in taking part in our community.
- Our shared “lived experiences” and ‘humanness’ are what unite us.
- Our stories, collective wisdom and strength are what guide us and our community forward.

Western Mass RLC's Defining Principles

Genuine Human Relationships

Self-Determination and Personal
Strength

Healing Environments

Mutuality

Optimism

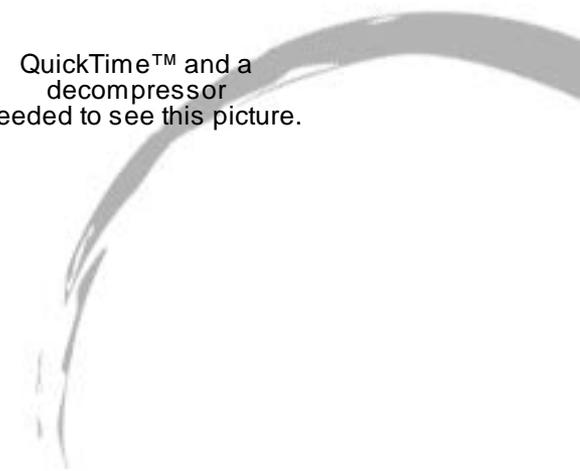
Respect

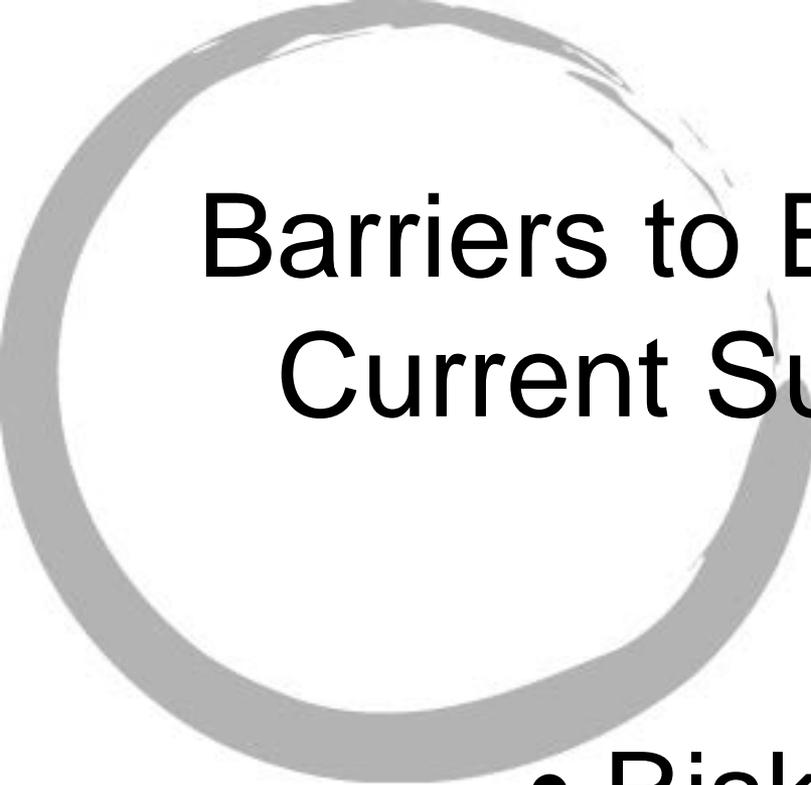




Barriers to Equity and Justice: Current Suicide Prevention Model

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decompressor
are needed to see this picture.





Barriers to Equity and Justice: Current Suicide Prevention Model

- Risk Assessment
 - Criminality
 - Pathology
- 

Risk Assessment

“I want someone who is willing to BE with me in my pain. Not just ask me if I am taking a medication for that. When I am in pain I don't want to be asked canned questions like ‘Are you feeling safe?’ or ‘Do you have a plan?’”

- *an Alt2Su attendee,
Northampton,*

Criminality

“I learned to be silent or risk being treated like a criminal or caged like an animal. I have had so many bad interactions with police after talking about suicide. I have had my door kicked in. I have had my freedom and my dignity taken away.”

- *an Alt2Su attendee,
Greenfield, 38*

Pathology

“Before the Alternatives to Suicide group, there was a big part of myself that I couldn’t show anybody. I was told I could only talk about my sadness in this sanctioned little box (my therapist’s office). But I couldn’t even talk about suicide there, because they would make me go into the hospital.”

- *an Alt2Su attendee,
Greenfield, 42*

Alternatives to Suicide Groups

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History of Alternatives to Suicide Groups

- First group began in 2008.
- Funded by Tapestry Health (DPH), program based in harm reduction.
- Co-facilitators come with and share their own lived experiences (and who don't necessarily identify as "attempt survivors").
- Evolved from "closed" to "open" groups.
- Currently, weekly groups in: Greenfield, Northampton, Pittsfield and Springfield, MA; and Hartford, CT (all meet in non-clinical spaces).

Our Groups

- Groups meet weekly for 90 minutes and relationships also encouraged beyond.
- Group size between 5 and 20 people per meeting and average about 12.
- Groups support people from many different communities and especially folks who identify as transgender and LGBTQIA.
- No intake, no qualification and no need to share a psychiatric diagnosis and none is assumed.
- No barriers to attending based on someone's attempt history (or lack thereof).

Conversations Beyond Suicide

- Topics aren't limited to themes of suicide.
- We discuss: hearing voices, substance use, self-harm, sexual abuse, the things our cats do, recipes, spiritual experiences, artistic practices among many other things.
- We can participate in times of joy and times of sorrow.
- Emphasis on continuing conversations and building community beyond groups.

Alternatives to Suicide: Culture, Philosophy and Values

- Non-clinical, social group.
- Mutual support, respect and empathy.
- Each person regarded as expert of their own experience.
- Respectful of each person's definition of privacy.
- Transparency and authenticity are encouraged.
- Aim for group to be self-led and governed.

Facilitators' Role and Training

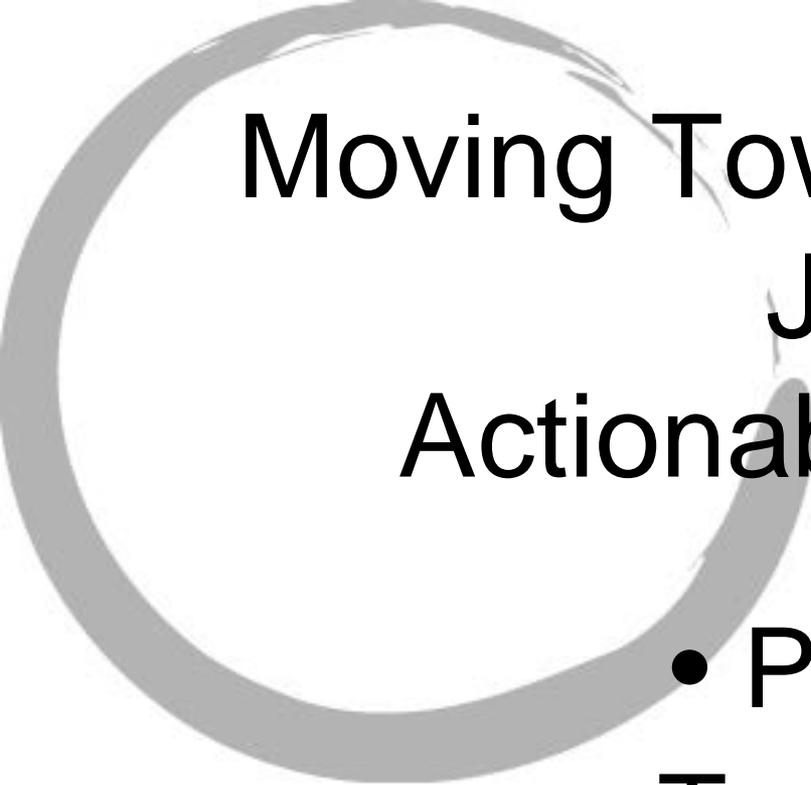
- Each group has two co-facilitators.
- Trained in curiosity vs fear-based approach.
- Emphasis is place on making meaning out of experiences.
- Strive for transparency in relationships.
- All people encouraged to share authentically and support each other, including facilitators.
- Facilitators help move a group to be self-led and governed.



Moving Towards Equity and Justice: Actionable Objectives

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Moving Towards Equity and Justice: Actionable Objectives

- Partnering
 - Transparency
 - Community
- 

Partnering

In PARTNERING, the support person(s) will regard their role as that of partner in identifying concerns and potential options with the person they're supporting.

(Roles to avoid: risk assessor, protector, decider, etc.)

Transparency

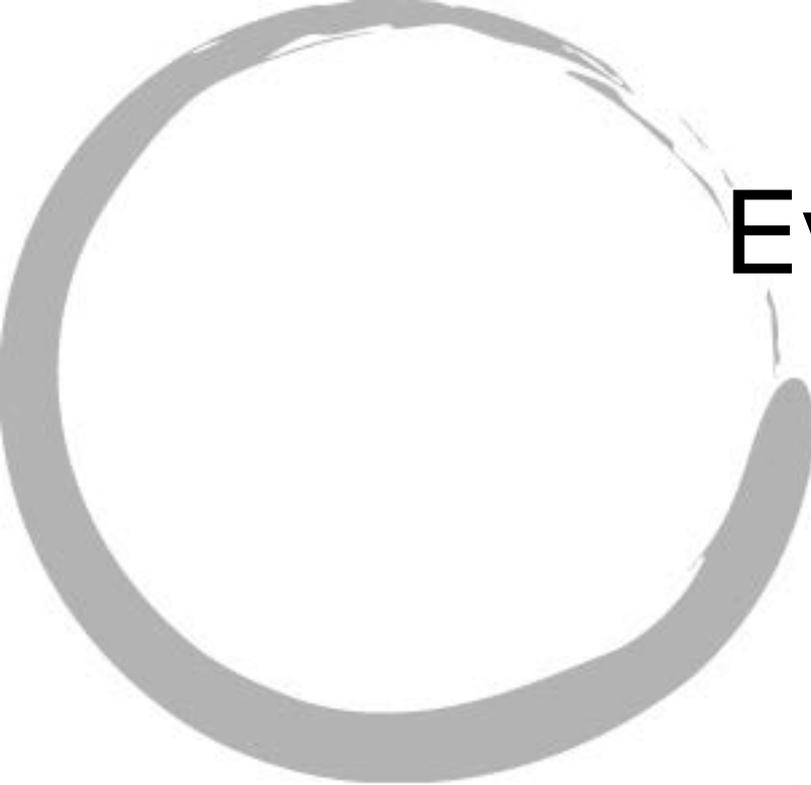
Through TRANSPARENCY the support person(s) will be honest about their own concerns and need for support in difficult situations, including when/if they feel the need to call a supervisor or colleague during a given interaction.

(Roles to avoid: secretly calling for help, keep the individual in distress “busy” while someone else calls for help, pretending you are not affected by their distress, etc.)

Community

The support person(s) will be aware of their own limitations of knowing what's best for another person and share any limits to mutuality their professional licensure may present. From this the support person(s) can communicate the value of a support COMMUNITY outside the mental health system to find ways out of despair and find a purpose in life.

(Roles to avoid: assuming you know what's best for someone else, acting as savior, engaging with someone as if they come from no context, history or community, etc.)



Evidence

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Evidence

- There are plenty of studies demonstrating the efficacy of peer-to-peer supports
- Bradstreet, S. (2006) Harnessing the 'lived experience'. Formalising peer support approaches to promote recovery. *The Mental Health Review*. Vol 11, 2, 33-37.
- Cook, J.A., Peer-Delivered Wellness Recovery Services: From Evidence to Widespread Implementation, *Psychiatric Rehabilitation Journal*, Vol. 35, No. 2, 201.
- Daniels, A., Grant, E., Filson, B., Powell, I., Fricks, L., Goodale, L., (eds), (2010) *Pillars of Peer Support: Transforming Mental Health Systems of Care, Through Peer Support Services*, www.pillarsofpeersupport.org; January, 2010.
- Find these and more “peer”-reviewed articles on the SAMHSA-hosted Peer Support Resources: <http://psresources.info/the-evidence>.

Evidence

“Alternatives to Suicide groups saved my life. I tried to kill myself three times in one month before my professor told me about these groups. I found people that didn't judge me and reminded me I was strong.”

- *an Alt2Su*

*attendee,
Springfield, 21*

Evidence

“When I first spoke about these feelings I was in jail. They stripped me of my clothes and shoes and put me in handcuffs. This kept me from every talking about my feelings again, until I came to my first Alternatives to Suicide group at the RLC Center.”

*- an Alt2Su attendee,
Springfield, 26*

Evidence

“Being part of these groups has helped me see the suicidal thoughts I experience not as repetitive death sentences but as messages that something in my life needs to change.”

- *an Alt2Su attendee,
Northampton, 28*

Evidence

“My suicidal thoughts are like tidal waves that only stronger when silenced. When I come here, they can crash and just be.”

- *an Alt2Su attendee,
Springfield, 24*

Other Resources

-Western Mass Recovery Learning Community

<http://www.westernmassrlc.org/>

-Alternatives to Suicide Trainings:

<http://www.westernmassrlc.org/alternatives-to-suicide>

-Hearing Voices Trainings:

<http://www.westernmassrlc.org/hearing-voices>

-Hearing Voices Network USA:

<http://www.hearingvoicesusa.org/>

-Peer Support Resources:

<http://psresources.info/>

-Declaration of Peer Roles

<http://psresources.info/declaration-of-peer-roles>

-Harm Reduction Guide to Coming Off Psychiatric Drugs and Withdrawal (The Icarus Project):

www.theicarusproject.net/alternativetreatments/HarmReductionGuideComingOffPsychDrugs

Images

Making Contact (fist on text):

<http://www.radioproject.org/2013beats-rhymes-and-laughs-culture-as-a-tool-for-racial-justice/fist/>

Dreamstime (clipboard with handcuffs):

<http://www.dreamstime.com/royalty-free-stock-photo-handcuff-clipboard-image6215045>