

DEPRESSION, SUICIDE RISK AND AUTISM

People with Autism Spectrum Disorders such as autism and Asperger's syndrome can be prone to depression, which may lead to a risk of suicide in some cases. These developmental disorders have a lasting change in a person's thinking, how they react to certain situations, their work and how they relate to others. People with Asperger's or Autism may face increased stress, greater difficulty with relationships, difficulty managing their own emotions, and often fewer skills for dealing with these problems. Without appropriate support they may find themselves feeling isolated and helpless.

It is important to realize that because of these and other factors, Autistic teenagers and adults might experience feelings of depression and may be at greater risk of suicide. For people who think about ending their lives, suicide may represent an answer to what they feel is an otherwise unsolvable problem. The choice may appear preferable to circumstances such as enduring emotional distress or disorder, which the person may fear more than death.

It is particularly important for family members, friends and those who care about the person to know the danger signs, know ways of being helpful and know who you can turn to for advice or referral.

RECOGNISING THE FIRST SIGNS

A suicide attempt is rarely made following a sudden or impulsive decision. Rather, it is more common for individuals to shift between the stages on a continuum which range from the initial thoughts about suicide to committing suicide. The stages may be bi-directional (i.e. a person may move forward, return to an earlier stage or no longer consider suicide as an option):

- Planning
- Organizing means
- Suicide attempt (intentional or sub-intentional)
- Commit suicide.

Some may engage in self-harming behaviour which has the potential to lead to death while the actual goal is not to die. It is important to be alert to cues that someone may be considering suicide. Things to look out for are:

- Statements like "It would have been better if I had died"
- Making threats about committing suicide
- If they become very withdrawn or depressed.

Autism and Asperger's syndrome can affect communication abilities, which may complicate looking for these cues. If the person has tried to commit suicide before, you should particularly be aware of cues and try to assist them to seek professional help. There are various factors which indicate a higher risk of suicide occurring. The autistic person may have access to lethal means and the development of a specific plan. Drug abuse, engaging in extreme behaviour and catastrophic reactions to relatively mild stress can also increase the risk factor. In some cases a final crisis may act as a precipitating event.

HOW YOU CAN HELP

A person who is considering suicide usually needs to know that others care. Some suggestions on providing support include:

- Sometimes just being with a person is helpful, even if not talking
- Contact others who may be able to provide support
- Listen to what they are saying about themselves and their life
- Avoid saying things like 'You should be grateful you are alive' or 'You'll get over it'
- Tell them you are always willing to talk and that there are others who care as well.
- Encourage them to stay in touch with friends or make new ones
- Make sure they are in touch with a local doctor.

WHEN THE RISK OF SUICIDE IS HIGH

Crisis intervention can involve a number of strategies. Immediate support can include telephone counselling, referral to a psychiatrist, closely monitoring the person or moving the person to a less stressful environment. Other strategies are:

- Medical/psychiatric treatment (including medication)
- Hospitalization
- Psychological therapy
- Mental health case management
- Linking into support systems (e.g. family and community organizations).

SPECIFIC CRISIS INTERVENTION STRATEGIES FOR SUICIDE RISK

The general aim is to lower the level of lethality or very high risk of suicide by working to:

- a) increase the individual's psychological sense of possible choices
- b) to increase his/her sense of being emotionally supported.

Strategies may include the following:

- Establishing rapport (e.g. 'I'm listening and I want to support you')
- Explore the person's perception of the crisis
- Focus on the immediate past (e.g. a recent significant event or problem) and immediate future
- Develop options and a plan of action
- Increase the options available to the person and the number of people available to help
- Arrange removal of the potential means of suicide where possible
- Monitor their emotional state and establish a follow-up plan
- Try to involve appropriate people in the person's natural support system.

Encourage the person to develop a plan including resources and support in the immediate future. Write down the steps of a personal safety plan to be carried around by the person (e.g. in their wallet). Also, try to increase the person's investment in the future by involving them in small and meaningful activities (e.g. tasks around the house and garden).

EFFECTIVE COMMUNICATION

It is recommended that people offering support to a distressed individual avoid using the following techniques:

- False reassurance e.g. 'Everything will be fine, don't worry'
- Inappropriate use of facts e.g. 'You'll recover from your brain injury within a year'
- Confrontation e.g. 'It is time for you to accept that you will never walk again'
- Minimizing a person's feelings e.g. 'Come now, it is not that bad'
- Probing or intrusive questioning (e.g. 'Why do you think your girlfriend left you?')

A combination of the following techniques can be used to convey support:

- Active listening (nodding and minimal responses such as 'okay', 'sure')
- Meaningful eye contact and supportive body language
- Reflection of feeling (e.g. 'You sound really upset', 'I can see that you are frustrated')
- Reflection of content (e.g. 'It sounds like you want your family to give you more space')
- Paraphrasing and summarizing (e.g. 'At the moment you are feeling overwhelmed')
- Asking permission (e.g. 'I want to help you - can I come and sit near you?').

SUPPORT FOR THE PARENT OR CARER

Working with, or being close to someone who is at high risk of committing suicide can be extremely stressful. It is very important that people receive their own support and take care of their own emotional well-being. Support for the person working with the distressed individual may come in the form of debriefing from other professionals. Relatives and friends may also benefit from seeking professional help in order to express their feelings and receive advice.

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<http://www.autism-help.org/family-suicide-depression-autism.htm>