

## Suicide Prevention Training 101 Part 3 Transcript

[Jason Murrey]: What does mental health look like in the state of Indiana? Somebody is thinking of suicide. They believe they have a plan. They're very adamant about it, and these kinds of things, all working in schools, you know this doesn't happen at 11:00 AM on a Tuesday, right? This is right before that fall break. It's Friday, it's four o'clock, and the student is pretty persistent. Where do individuals normally go when they're thinking about suicide?

[Jason Murrey]: Okay, so we got folks. So the Stress Center, that's usually that. That'd be the place I would highly recommend, but where do normally individuals go first? You go to the EDs, right? The ER, the emergency rooms. Are EDs or the ER set up to do mental health services? No, they can't even bill for it and they know it. The director of the ER is telling the social worker at the ER they have two decisions. Either they're not safe to go home and we got to get them out, go into an acute inpatient facility, or they're safe to go home and we discharge them 'cause none of the services we're providing them here at this ED are we able to bill for, okay?

[Jason Murrey]: How long does it take to get into an acute inpatient facility? Well, could be days, could be a lot of hours. You might just get lucky calling, the first ring. That's very highly unlikely. Are there beds in every county? No, there's a chance you could be at Deaconess Hospital in Evansville and the only bed is Mishawaka Behavioral Health up by South Bend. Are they gonna go? More than likely, how do they get there? Ambulance.

[Jason Murrey]: So when they get these facilities. That's where their prime assessment's being done because they're not providing any services that they can't get paid for, correct? So you're gonna ensure that there's something there that hey, can be treatable. And let's find out, the student had medication and was off medication for six months. Felt like dealing with bipolar, but I'm feeling good. I don't need this medication. They had some state of mania. They get back on the medication, they get stabilized. Now they get discharged. Within 72 hours, you have to be connected with either your provider which, let's say they moved from out of state. They don't have a current provider right now, so they have to be connected with your community mental health center. Do we all know who our community mental health centers are? Those would be facilities here in Indiana like Adult and Child, Cummins Behavioral Health, and Meridian Health. When they go in and check in in that first 72 hours, do they get to see a medication-prescribing doctor or nurse practitioner? What do y'all think? No, how long does it take for you to wait in order till you can see a doctor or a medication-prescribing nurse practitioner? You got 30 to 90 days, right? I think they say it's about six weeks. The acute inpatient facility only provides medication for a few



days of which the discharge in their first contact usually with that community mental health center.

[Jason Murrey]: So what's the chances of the individual relapsing and off their medication and becoming manic before they actually see a medication-providing doctor? Very likely, and if you have somebody, especially in your family who has bipolar disorder, this is probably something you experience once every three years, maybe once a year. But you know this vicious cycle because it's very real.

[Jason Murrey]: All right, so difference, mental health, mental illness, just 'cause somebody is upset and sad and they may be sad for a few days doesn't necessarily mean they have mental illness, right? The psychological impact of mental health stigma. Talking about that, 10 years, the average delay between the onset of symptoms and intervention is eight to 10 years. Approximately 50% of students age 14 and older with a mental illness drop out of high school. 70% of youth in the state and local juvenile justice systems have a mental illness.

[Jason Murrey]: When we think about the decentralization of centralized medical care or state under medical care, think Central Hospital, when they went through and did the nationwide, were no longer providing these sorts of inpatient long-term services. When they closed up, what happened, anybody know? Did they call around and look for alternative placements for everybody in there? Just left the doors unlocked. And so who's the biggest health provider in the country now when it comes to mental health services? It's prisons, so jail systems, right?

[Jason Murrey]: Environmental reasons, access to lethal means, this is important. Whether it be firearms, medication, power cords, YouTube videos, right? It wasn't so long ago, I may feel ancient, I was born in 1982, but it wasn't so long ago that the only way you got new information was you go to the library and read about it. But now just get anything you need at the snap, even faster than that. Whether it be on your cell phone, whether it be on your computer, how do I take my own life? And as a parent, you may say, "You know what? My son's having suicidal ideations" or, "My daughter's having suicidal ideations." They're talking about it. We put a lock on pills and that's good, that's a good prevention method. We take the kitchen knives and we put them away. That's a good one. We have locks on our firearms. We have safes, that's a good one. Or we remove those things completely out of the house. Had a parent put all the knives and things in the trunk of the car and when it was time to cook, they utilized it and then they cleaned them, and put them back in the trunk of the car. But what about the HDMI cable that runs from the television to the Xbox? Did you think about that? The power cord to the computer? Because these are some of the things that we're seeing today that are more prevalent today and having that conversation with the parent, having that conversation with the teacher, with the counselor, and discussing the student, what are some lethal means within the house? If you're thinking about suicide, how would you do it? And we'll talk a little bit more about that.



[Jason Murrey]: Individuals dealing with prolonged stress such as harassment, bullying, relationship problems, or unemployment. Seeing the individual's crisis for their crisis, and not how you would judge it. What do I mean by that? My son was a freshman. He asked a young girl out on a date. I thought wow, son, I was a senior and a football captain before I had the guts to ask a girl out on a date. We go pick up this young lady and he says, "Dad, get ready to meet your future daughter-in-law." Okay, that lasted about a week and a half. I walk into the house. My wife says, "You probably need to talk to your son." I'm like, "Okay." She explained to me we probably didn't have a future daughter-in-law anymore.

[Jason Murrey]: So I grew up watching "That 70's Show" and there's this story. Anybody familiar with "That 70's Show" in here, right? You got Red, there's the neighbors, they're best friends. You wanted them to be boyfriend and girlfriend. You cheered when that occurred at the end of that first season, but then the next season they break up and Red Foreman's not even, no emotional heart, right? He just tells his son, "Get up and go to work." That was going through my head when I went into his room thinking about okay, what can I say to just kind of be funny or be the dad he knows that I am? And I sit there and I start talking to him, and I realize he ain't even responding. So I'm thinking oh, goodness, this is the big deal and then I touch his leg, and he jumps out at his skin because he had those earbuds in his ear. Y'all know what I'm talking about, you're trying to talk to a student who had earbuds in or your own child. That thing should come with a warning, right? One in only at a time, and he explains to me that things are good. He's got a date with her friend two weeks later. I said, "I don't know if things are good, but I'm glad you're okay hopefully, future-wise, might become difficult for you if you keep up this pattern," right?

[Jason Murrey]: For my son, that could have been a big deal, and for a lot of students, those relationships, those are a big deal. And for us as an adult, we may see that as son, you're gonna have a lot of different relationships before you decide to get married. It was silly that you would even say that, but yeah, that's my judgment. That may not have been the place he was at. So I meet the individual in their crisis at where they're at and get an understanding of what that crisis is. Stressful life events, rejection, divorce, financial crisis, and loss. A young person saw a text message on one of the parents' phones that was not of the other parent that was sexual in nature. That student explained it to the other parent, hey, there's something going on, which caused a divorce, which then the student felt that now their younger sibling hated their guts because they were the cause of this divorce, and the student didn't communicate that to either of the parents. They felt like that was their issue and unfortunately died by suicide, all right?

[Jason Murrey]: But if we know some things are going on and we hear about it, having that conversation and engaging, that's got to be really difficult. Talk to me about it. How are you feeling about it, what's going on? It's important for these young folks to



understand that they are not the cause of the problems and it's not just our young people, it's our adults. We suck, at humans, in this regard. We take responsibility for things that are outside of our control and later on we're gonna learn a tool on how we can help mitigate that.

[Jason Murrey]: And then, of course, environmental, family history of mental illness. Again, you may be able to do everything you can possibly do, but you just can't get away from it, all right? It's in our DNA. Societal reasons, the biggest one being stigma. My mother's a big Charlie Brown fan, into "Peanuts," right? And Schultz, I always loved the whole Lucy five cents in psychiatric help. As the story goes, Charlie Brown shows up to Lucy, "I have a deep feeling of depression. What can I do about this?" And Lucy just says, "Snap out of it, five cents please." It's like yo, dude, just snap out of it. What do you mean you're feeling upset? Put some positive thoughts in there. You'll be all right. If it was only that easy. If it was only that easy. We also have a lack of understanding and myths when it comes to societal thoughts when it comes to suicide and getting help and getting mental help.