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Guidelines for Negotiating with a Major Depressive Episode

- ✓ If psychomotor retardation is present, you may have to wait longer than usual for a reply
- ✓ Friends and relatives may provoke or escalate feelings of worthlessness and guilt
- ✓ Beware of sudden improvements which are unrelated to your negotiation
- ✓ Keep your time perspective in the here and now
- ✓ He will generally have a small body space
- ✓ He will generally be honest and straight forward with you
- ✓ Beware of “suicide by cop”
- ✓ Real world versus abstract concepts
- ✓ Attempt to postpone action as opposed to changing mood
- ✓ Use empathy

Effective Techniques

- ✓ Continuously explore their feelings
- ✓ Focus on getting them to express their feelings
- ✓ Let the person get angry at you
- ✓ Focus on the cause of the suicidal feelings
- ✓ Talk openly about the finality of death
- ✓ Ask them if they are considering suicide
- ✓ Ask them what they have done to implement their plan
- ✓ Have the person describe suicide they have fantasized
- ✓ Focus on the specific incident that created this crisis
- ✓ Explore what is meaningful to this person
- ✓ Buy time
- ✓ Put their actions in perspective
- ✓ What will suicide solve?
- ✓ Stress that suicide is only one of many alternatives
- ✓ Express personal concern and empathy
- ✓ Precedent for their children

Guidelines for Negotiating with the Depressed Hostage Taker

- ✓ Because responses are delayed, you may have to wait longer than usual for a reply.
 - Do not grow impatient
 - Remember time is your most reliable resource
- ✓ Depressed people may be of normal or greater intelligence
 - Thus, your attempts to help them find a solution to their problem(s) will require a lot of work
- ✓ Once rapport has been developed, it may be appropriate to be more explicit
 - They are desperate in their search for a solution
 - Your insight may result in a sudden agreement to resolve the situation
- ✓ Beware of sudden improvement unrelated to your negotiations
 - Check any sudden change with your back-up negotiator
- ✓ Friends and relatives may provoke or escalate feelings of worthlessness and guilt
 - They do not need an audience for their current failure
- ✓ Hopeless people cannot imagine a positive future
 - Keep your time perspective in the *here* and *now*
- ✓ May be very honest and straight forward with the negotiator
 - Open discussion of suicide is a better sign than denial
 - Deeply depressed people who deny suicidal deliberations are dangerous
- ✓ Be prepared to repeat reassurances again and again and again

Suicide Clues

- ✓ Expressions of hopelessness and helplessness
- ✓ Indirect verbal clues
- ✓ Behavioral clues
- ✓ Situational clues
- ✓ Direct verbal clues
- ✓ Time clues
- ✓ Relationship clues

How to Determine if a Person is Suicidal

- ✓ Ask! “Are you going to commit suicide?”

Determine Motivation

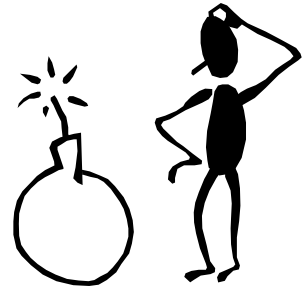
- ✓ Why does the person want to die?
- ✓ What does the person want to achieve?

Telephone Calls from Suicidal Individuals

- ✓ Fear of dying alone
- ✓ A form of manipulation and control
- ✓ Want someone to know
- ✓ Looking for verification and permission

Pre-Suicidal Situations

- ✓ Sudden loss
- ✓ Social isolation
- ✓ Deep loneliness
- ✓ Illness and pain
- ✓ Changes in life style
- ✓ Burden to others
- ✓ Unfulfilled, unrealistic expectations



Suicide - Ten Basic Assumptions

1. We will try to stop all suicidal persons
2. A suicidal person will put you in crisis
3. Every person has final responsibility for his/her life
4. All suicidal situations are volatile
5. All suicide threats are serious
6. No social, sexual, religious, ethnic or economic group is immune from suicide
7. You cannot implant the idea of suicide in the mind of a person
8. Every suicide person has some ambivalence
9. Judgments have no place in suicide intervention
10. Empathy is the basic, unalterable foundation on which to use suicide skills

FEELINGS COMMON TO SUICIDE

Ambivalence - never a total wish to die

Hopelessness - can't achieve desired goal

Helplessness - can see no way of changing life

Tunnel vision - unable to see full range of possibilities

The hostage negotiator must be willing to involve himself/herself as the primary resource for the moment; the one link between life and death.

PARAPHRASING

- Using new words with the same meaning.

REFLECTION OF FEELINGS

- "It sounds like you feel..."

ACTIVE LISTENING

- Listen to the tone
- Listen for the feelings behind the words

VALIDATION

- Reassurance that their feelings are okay
- "I can understand that"
- "I imagine I would feel..."

PROVIDE SUPPORT

- "That must be hard for you"

PROBE RESPONSE

- Encourage subject to say more about the particular crisis situation

ALTERNATIVES

- Explore alternatives
- Consequences of alternatives
- Feelings about these



PUT SUBJECT IN TOUCH WITH THEIR OWN STRENGTHS AND RESOURCES

- Has it happened before?
- How did you handle it then?
- Did it help?

OFFER NEW ALTERNATIVES

- Explore possibility of help from family or friends
- Be familiar with community resources
- Brainstorm new ideas with subject

HOSTAGE NEGOTIATOR "DON'TS"

- Instant diagnosis
- Value judgments
- I care....
- I want to help
- Advice giving
- Police terminology
- I don't want you to die

ASSESSING LETHALITY

- Identify stressors
- Identify losses
- Thinking about suicide
- Suicide plan
- Previous attempts

ESTABLISH A RELATIONSHIP

- Provide a safe environment of: concern, empathy, and acceptance
- "I would like to know you better."
- "Could you tell me about it?"
- "I would like to hear your side."
- "Could you share it with me?"

EFFECTIVE PHASE (SILENCE)

- Provides constructive time for person to think rather than react.
- Provides time to absorb what was just said or what just occurred.
- Provide quiet time to collect feelings.

MINIMAL ENCOURAGERS

- U m ... , uh... , o.k., yes...
- Keep conversation going and a rapport will establish.
- "I" messages provide a non-threatening manner that doesn't put the person on the defensive.

SUICIDE CLUES

Situation References

1. I cannot put my family through all the suffering and expense of these last few months.
2. The doctor says there is no treatment for it.
3. I do not know how I got into this mess, there is no way out.
4. I have tried every drug program available. I have really tried, and there is nowhere else to turn.
5. I never thought I would be caught. I cannot face anyone after this.
6. Nothing is going to make it any better.
7. How can I be sure that my pets will be taken care of when I am not there to do it?
8. How does one leave their body to a medical school?
9. Take care of my children.
10. I have really tried but nothing works for me, nothing makes it right.
11. I just cannot do the things I use to be able to do.
12. I would like to crawl into a hole and never come out.
13. Sometimes I think I would be better off dead.
14. I just want out of the whole mess.
15. That, is one problem I will never have to worry about again.
16. I want out.
17. I am tired of trying.
18. I have nothing to live for.
19. The doctor says it's just a matter of time anyway.
20. Everyone I ever loved is gone.
21. I want you to tell my family good-bye for me.

Relationship References

1. He/she will be better off without me.
2. Nobody cares.
3. He/she will be sorry when they find me.
4. He/she will be sorry when they find out what I did.
5. I cannot wait to see his/her face when they find me dead.
6. My mother is so angry with me because I will not have anything to do with her now. She thinks she has done something wrong but it just makes it easier this way.
7. He/she deserves what I am going to do to him, her.
8. I have never been good enough for him; it will be better this way.
9. Everything will be all right when my husband/wife finds me.
10. I am going to make him suffer like I have.
11. My children do not need me anymore - they will be okay.

Time References

1. It will not matter after today.
2. That does not matter now.
3. I just cannot go on like this anymore.
4. I just called to say goodbye.
5. You are the last person that will hear from me.
6. That is one problem I am taking care of right now.
7. I just want to sleep forever.
8. I will not be around much longer anyway.
9. I am leaving.
10. I have decided now...(pause)...it is time to do it.
11. I cannot take this any longer.
12. Tomorrow...there will not be a tomorrow.
13. That was a problem, a big problem, but it cannot bother me now.
14. I talked to all my family last night so everything is taken care of.
15. About three months ago I went through a rough time and took an overdose, but I couldn't even pull that off.

16. You cannot help me now, nobody can.
17. My sister killed herself a year ago today.
18. I will not have any problem tomorrow.
19. I do not have to worry about that anymore.
20. You will not be hearing from me again.
21. I cannot live this way another day.

ACTIVE LISTENING SKILLS

IF CLUES SUGGEST SUICIDE

ASK!

"ARE YOU GOING TO COMMIT SUICIDE?"

NO.- NO HARM DONE YES: Proceed down chart

NO

May have means with them Obtain Information

1. How
2. When

YES

"HAVE YOU DONE ANYTHING YET?"

YES

WHAT HAVE YOU DONE?"

METHOD

PILLS:

"How many did you take?"

"What kind/strength were they?"

"Did you take anything else?" (Alcohol?)

"How long ago did you take them?"

OBTAIN MEDICAL OPINION

TOXIC SUBSTANCE:

OBTAIN MEDICAL OPINION AND ANTIDOTE FROM POISON CONTROL CENTER

GUN/KNIFE:

DETERMINE SERIOUSNESS OF WOUND

GAS/CARBON MONOXIDE:

WHEN ACTION BEGAN

OFFER HELP!
Rescue Squad; family, friend

REDUCE LETHALITY

Get means as far away as possible.

Use "I Message

PILLS: Vomit Pills, flush down toilet, walk, stay awake.

TOXIC SUBSTANCE: Focus on a person taking recommended antidote.

GUN/KNIFE: Put away, put out of reach. Unload gun, stop bleeding.

GAS/CARBON MONOXIDE: Turn off gas/car; Open door/windows/garage; get out of house/car/garage.

WHAT IS IMMEDIATE PROBLEM?

"What has happened in last 24 hours to make you want to kill yourself?"

Identify the problem/situation: Identify Loss

Talk about it

Ventilate feelings

IDENTIFY HOOK

What is still important to the person?

What still has value/meaning? Family, Pet, Job, etc.

Keep returning to the hook.

DETERMINE MOTIVATION

What is objective/goal of suicide action?

What is the person trying to accomplish?

Develop non-lethal alternative/option to diffuse crisis state and accomplish objective/goal.

Develop specific plan of action.

Be realistic.

Make a list.

Go step by step

Referral

When appropriate.

When crisis has ended.