

WHAT TO DO IF YOU SUSPECT SUICIDE?

CRISIS AND EMERGENCY PLAN FOR COUNSELORS

General information on suicide

In 2023, a total of 10,304 people died by suicide in Germany – twice as many as died in traffic accidents, from illegal drugs, and murder combined.

The triggers and motivations for suicidal thoughts are complex and individual. Often, they are driven by a desire to no longer have to live with one's current life situation or crisis. Suicide is considered a solution to end the current crisis.

It is important to talk about suicidal thoughts. Such a conversation can be the first step out of a crisis. People who are approached do not need to be afraid of triggering suicidal thoughts in someone by talking to them, because the opposite is true:

Talking Can Save Lives!

What are suicidal thoughts? How can I recognize them?

Suicidal thoughts are considerations, desires, or ideas about death and suicide. Some people with suicidal thoughts mainly want peace and quiet or a break ("I just want it all to stop") or to be dead without committing suicide themselves ("Everything would be fine if I weren't here anymore," "X would be better off without me"). Other people have concrete plans or thoughts about their own suicide or even a specific target for suicide.

Signs of suicide can vary greatly from person to person. Very often, there are only indirect clues. We should not ignore these, but seek dialogue. **We can't do much wrong, but we can do a lot right.**

Simply offering to talk and thus removing the taboo surrounding the subject of suicide is a relief and a relief for many of those affected.

Warning Signs of Suicidal Tendencies:

Words: Those who are affected talk about

- committing suicide,
- having no hope,
- seeing no way out,
- being a burden to others,
- feeling trapped,
- having failed, and/or
- no longer seeing any meaning in life.

Mood: Those who are affected feel

- sad and/or anxious,
- easily irritable,
- angry over minor issues,

- extremely moody,
- full of shame,
- uninterested in hobbies and activities,
- exhausted.

Behavior:

- withdrawal from family and friends
- changed eating or sleeping habits
- consumption of alcohol or drugs
- risky behavior, e.g., speeding
- high irritability and aggressiveness
- gifts without occasion
- unusual farewells
- sudden improvement after a difficult crisis

How can I address my concerns?

- 1) Describe your own observations.
- 2) Address concerns about suicide directly. Ask direct questions about suicidal thoughts and listen openly and actively to the person concerned.
- 3) Ask specific questions – Is there a suicide *plan*?
- 4) Offer or initiate help.

In an emergency, help must and may be sought even without the consent of the person concerned.

It may be useful to ask about the existence of a crisis or emergency plan if we know that the person has had psychotherapy.

Some people have developed such a plan for dealing with possible suicidal tendencies as part of psychotherapy. This can be helpful for people in mental crises. A crisis or emergency plan is developed and written down individually and usually with professional support. It can include possible coping strategies for a crisis situation or name contact persons.

Help and Support Services:

In case of acute danger to oneself or others

→ Emergency services: 112

Psychosocial help from the city of Halle

www.halle.de/leben-in-halle/gesundheit/psychosoziale-hilfe

Hansering 20, 06108 Halle (Saale) → 0345 - 2215720

Paul-Thiersch-Straße 1, 06124 Halle (Saale) → 0345 - 6902304

E-Mail: sozialpsychiatrie@halle.de

The Psychosocial Service of the City of Halle (Saale) should be contacted if the specific risk of suicide cannot be assessed by the counseling staff. It can be involved if you feel unsure about how to assess the situation and you recognize a need for support for the person concerned that you yourself cannot or do not want to provide.

The SpDi staff ([social psychiatry team](#)) can provide counseling for the affected person and their contact person (i.e., you), assess the actual risk of suicide, and offer help and support options for the affected person.

Family doctors

Confidential telephone counseling for those affected:

Telephone counseling: 0800 111 0 111 or 0800 111 0 222

www.telefonseelsorge.de

NightLine – by students for students: +49 152 2513 2365

www.nightline-halle.de

Clinics:

[Diakoniekrankenhaus Halle](#)

Mühlweg 7, 06114 Halle (Saale)

Emergency room: 0345 - 778 6622

[Universitätsklinik und Poliklinik für Psychiatrie, Psychotherapie und Psychosomatik der
Universitätsmedizin Halle \(Saale\)](#)

Julius-Kühn-Straße 7, 06112 Halle (Saale)

Tel.: 0345 - 557 3611

[AWO Psychiatriezentrum Halle](#)

Zscherbener Straße 11, 06124 Halle (Saale)

Tel. 0345 - 6922-0

Krankenhaus St. Elisabeth und St. Barbara - Klinik für psychosomatische Medizin und Psychotherapie

Barbarastraße 4, 06110 Halle (Saale)

Tel.: 0345 - 213 4351

Internal university services:

Social and Conflict Counseling Center - www.sozial-konfliktberatung.uni-halle.de

Phone: 0345 - 55 21572 or email: anke.maerker@verwaltung.uni-halle.de

Company Medical Service- www.betriebsarzt.uni-halle.de

Phone: 0345 - 5571 829 or email: anmeldung-betriebsarzt@medizin.uni-halle.de

CRISIS SUICIDE

Thoughts – Behaviour – Feelings



REACT: TALK AND LISTEN

Describe your observations – Ask direct questions about suicidal thoughts

Ask follow-up questions



HELP AND SUPPORT

HELP AND SUPPORT	
Affected Person	Support Person Acute suspicion of danger to self or others
• Contact family doctor and/or therapist	• Emergency services 112
• Contact psychiatric and psychotherapy clinic	• Contact the social psychiatric service of the city of Halle (Saale)
• Personal emergency contacts	• Counseling by the university counseling center
• Contact the social psychiatric service of the city of Halle (Saale)	
• Telephone counseling	
• Contact the university counseling centers	