

Amid coronavirus, Catholic psychologists provide a frame for suicide prevention

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By [Perry West](#)

Denver, Colo., Apr 18, 2020 / 06:01 am MT ([CNA](#)).- As health experts predict an increase in suicidal tendencies amid the coronavirus, Catholic professionals have outlined how to seek help and to be aware of those inclined to self-harm.

Dr. Melinda Moore, a licensed psychologist and assistant professor in the Department of Psychology at Eastern Kentucky University, said there are many factors that contribute to suicide ideation but it is behavior that arises when people cannot manage distress, particularly anxious situations such as a pandemic.

“When you are in an extraordinary situation, such as the one we are in now with the COVID-19 pandemic, with quarantining, isolating from others you normally are with at school, work, et cetera, getting out of your routines, it can be extremely stressful,” she told CNA.

“The anxiety created by the current situation can definitely spur on circumstances where people cannot cope effectively.”

An opinion piece in Scientific American suggested the pandemic has likely contributed to two suicides already - K. Balakrishna, a 50-year-old Indian father-of-three, and Emily Owen, a 19-year-old waitress in England.

After obsessing over the coronavirus videos, Balakrishna convinced himself that he contracted the illness. Afraid he would infect his family, he distanced himself from all his relatives, despite evidence that he did not have the illness, and hung himself at a local graveyard.

Owen also committed suicide, but not because she believed she contracted the disease. Instead, the young woman was afraid of the lockdown and the isolation that would follow, noting that she could not handle "her world closing in, plans being canceled and being stuck inside," the Sun reported.

Moore said roommates and family members should pay close attention to their loved ones who are acting oddly, especially if they have a history of suicidal thoughts. She highlighted some of the biggest signs associated with suicidal tendencies which may or may not be communicated directly.

She pointed to evidence such as abusing substances, lacking sleep or sleeping too often, withdrawing from friends and family, giving away prized possessions, and acting recklessly. She said these are often coupled by emotional states of anxiety, hopelessness, purposelessness, and uncontrolled anger. She urged people to pay particular attention to suicidal threats and pursuits of lethal means, like pills or firearms.

If suicide is being considered, she said it is important that families or friends ask their loved one's questions about suicide and take steps at home, including reducing access to dangerous medication, alcohol, and firearms. She underlined already available resources, like the National Suicide Prevention Lifeline, 1-800-273-TALK (1-800-273-8255).

Dr. Christina Lynch, a supervising psychologist for Denver's St. John Vianney Theological Seminary, told CNA that families should seek clarification from those suspected of suicidal ideation - identifying how strongly they have control over their pain, if they have access to lethal means, what are their barriers against seeking help, and be aware of emotional reactions of peace and calm regarding their wish to die.

The coronavirus crisis further exasperates despondency and hopelessness, she said, emphasizing the importance of having someone to talk to, whether that is a priest, counselor, teacher, or friend. She said in some cases a person may need to call 911 for another individual.

“The greatest stressor for people in difficult especially crisis situations is loss of hope and then despair. They may feel that they are alone, no one would understand their situation, and there is no solution in sight. In these times it is crucial to seek help and talk to a trusted friend,” she said.

Beverly Tauke, the board vice-chair for the Catholic Social Workers National Association, has been a therapist for Cornerstone Family Counseling since 1996. While the pandemic may aggravate suicide factors, she said, it is important to develop a self-care plan that incorporates mind, body, spirit, and relationships.

“COVID-19 circumstances can easily exacerbate such additional suicide-relevant factors as depression, anxiety and anger; alcoholism and substance abuse; loss of pleasure or interest in life and activities; social isolation; work and finance related problems; family stress; physical illness; and sleep disruption,” she told CNA.

She said that as an initial step, a person should simplify and organize the process, like developing a 31-day chart to prepare. As part of the process, she said, the person should focus on managing one’s mind by engaging in personal challenges and expressions of gratitude. She said this should be coupled with consistent physical activity, like walks or exercise routines.

“Gratitude can be noted in a mental or written journal or in notes, texts, e-mails or phone calls to people - which at times lifts them from their own sad, isolated or under-valued states,” she said.

“Use your mind positively and constructively to help diminish and extinguish negative, self-defeating obsessions,” she said, noting that an individual may consider “a free online course; experimenting with an interesting recipe; using online guides for a home-improvement project.”

She emphasized the value of spirituality and relationships, including acts of charity. She said meditation, such as reflection on scripture and on

Christ, can influence a person's emotional state. She said a person should engage with others in games and conversation, but also in charity, which will instigate a "helper's high," and forgiveness, which helps relinquish resentment.

"Those struggling with great personal and family pain, scary life circumstances, panic attacks and depression have reported swift relief through faith-centric daily meditation – progress confirmed by sometimes astonished colleagues and family members," she said.

"Forgiveness, relinquishing resentment of those who have offended or wounded you – even gravely...Research shows this triggers striking physical, health, emotional and relationship upgrades - easing anxiety and depression while boosting autonomy, self-sufficiency and relationship stability."

While most western countries have been in quarantine for the last month, the exact impact of the pandemic on suicide has yet to be determined, Moore said. The National Suicide Prevention Lifeline has reported no surge in call volume, but the national Crisis Text Line and the Disaster Distress Helpline have seen an increase, she added.

"It is possible that people will have very different reactions to this time of crisis. Some may become distressed and suicidal. What we know from previous, large-scale disasters, whether sudden and traumatic, such as 9/11, natural, or environmental, are almost always accompanied by increases in depression, posttraumatic stress disorder, substance use disorder, domestic violence, and child abuse," she said.

"[However,] George Bonanno's research in the aftermath of 9/11 also told us that people were far more resilient than we gave them credit for being. In a study six months after 9/11, he found that people were functioning well and were more resilient than expected."

Since the pandemic has struck, she said her colleagues and her have switched over to telehealth and telepsychology. She said it has been a valuable experience in providing Collaborative Assessment and Management of Suicidality.

"We are addressing both issues of risk of suicide as well as the issue of geographic boundaries and 'distancing' in order to treat people who

might otherwise be alone in their despair and unable to get treatment in this current environment where clinicians are not seeing patients face-to-face.”

While this is an obviously difficult time, she said, this pandemic is also an opportunity to embrace personal reflection, resolve issues within the household, and rediscover lost intimacies. She said it has also been a time when people have stepped up in solidarity, donating time and money to those in a considerable struggle.

“Many grief and bereavement experts believe that this may be a time of great personal growth for individuals who are having to spend time with themselves and think deeply about issues of great importance to them. ... It is also possible that people will use the distress that they are feeling and that others are feeling in order to derive some meaning or some benefit for others who are struggling.”