The Nature of Suicide
8 ’Truths’

Dr Rachel Gibbons
Consultant Psychiatrist, Psychoanalyst, Group Analyst
The only way out is through...
My Experience

Suicide Lead: for Barnet Enfield & Haringey MHT

British Transport Police Suicide Prevention Team: Clinical Lead

Haringey Suicide Prevention Group: Founder member

Suicide Group for Consultants for 11 years

Coroners Office reviewing all suicides

RCPsych: Chair Patient Safety Group & Working Group for the Effect of Patient Suicide and Homicide on Psychiatrists.

Suicide Strategy Nationally for Priory Group

Oxford Centre for Suicide Research- Bulletin paper, Leaflets for support.
“There is only one serious philosophical question, that is suicide….

Camus
“To help a truly suicidal person you have to approach them with an open heart...If you are worried about the risk their action poses to you they are more likely to jump”
8 'Truths' about Suicide
1: Suicide is not an accident

• Suicide does not occur due to our negligence

• It is a result of complex universal unconscious mental mechanisms that we do not understand

• It can be highly determined
2: Impulsive  Or Premeditated
3: You do not know what is going on in someone else’s mind

We do not even know what is going on in our own mind!
4. From data – everyone is shocked and surprised by the death
5: Suicide is a human condition not a mental health condition
6: Suicide result from an incapacity to mourn

If a psychiatric diagnosis is wanted then that of Adjustment Disorder is appropriate
Pathway to Suicide

1: Pre-suicidal vulnerability

2: Trigger loss event

3: Pre-suicidal state

4: Trigger event

5: Suicide
7a: Suicide prevention - challenging in any individual case but not on a population or conceptual level
7b: Suicide Prevention- Suicide is an acting out event

You act out when you cannot put your emotional experience into words
It’s time to talk about it.

#WorldSuicidePreventionDay
8 ‘Facts’ or ‘Truths’ about suicide

1. Suicide is not an accident it is the result of complex and probably universal mental mechanisms we do not understand.
2. It appears to be either impulsive or premediated.
3. You do not know what is going on in someone else’s mind.
4. Everyone is shocked by the death.
5. It is human condition and not a mental health condition.
6. Suicide appears to result from an incapacity to mourn.
7. Suicide prevention
   a) is a public health issue
   b) Suicide is an acting out event – talking about it reduces the risk.
8: No one is to blame for a death by suicide
• It’s is our belief that we can predict and prevent individual suicide that makes us the architect of our own downfall following the suicide of a patient.

• We then take suicide of a patient as our own failure.

• The truly suicidal then pose a risk to us.

• It makes us less likely to approach them with an open heart