

TACKLING NEW CHALLENGES

CONTINUING THE WORK AND COPING WITH COVID-19



BPD COMMUNITY

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WHAT DOES COVID-19 MEAN FOR SUICIDE RISK IN AUSTRALIA?

Covid-19 has had a tremendous impact on people's health, the health system, the economy, along with a devastating effect on mental health. We can expect to see an increased rate of suicide according to a [statement](#) published by the Australian Medical Association (AMA).

Key indicators for suicide include unemployment, failure to complete education and a loss of connection to one's community. This is a problem in rural and regional areas especially.

It is suggested by University of Sydney's Brain and Mind Centre that there may be a 25% increase in suicide. Also, that hospitalisations and emergency department visits due to self-harm may increase by 20 per cent.

To combat the pandemic's impact on mental health, the federal government is investing large amounts of money into the traditional mental health supports. However, the effectiveness of this can be questioned.

According to Dr Jo-An Atkinson, Head

of Head of Systems Modeling and Simulation at Brain and Mind Centre, investments made without the use of modelling can have "very little impact" and even "[unintended consequences](#)".

Disengagement from mental healthcare services due to long wait times and dissatisfaction with the level of care can also increase the risk of suicidal behaviour because people lose hope in the system's ability to help them, according to Dr Jo-An Atkinson.

In some cases, people can also experience further trauma due to inadequate support provided to them when they reach out for help.

These findings have led to mental health experts such as Professor Patrick McGorry urging the government to take urgent action to "[flatten the curve](#)" of suicide risk.

Organisations like Suicide Prevention Australia have also stressed the importance of the need for a National Suicide Prevention Office, passing a Suicide Prevention Act, as well as

setting up a national suicide register as priority measures to prevent surges in suicide.

HELPLINES AND RESOURCES

If you or someone close to you are in an emergency, danger or require immediate assistance call Triple Zero (000) for emergency services.

- [Suicide Call Back Service](#) provides 24/7 telephone and online counselling in relation to suicide. Call 1300 659 467 or access their live chat and video chat services.
- [SuicideLine Victoria](#) also provides free online counselling relating to suicide. Call 1300 651 251 or access their live chat and video chat services.



WHAT DOES THE COVID-19 SUICIDE RISK MEAN FOR BPD?

Suicide was a major concern in relation to BPD long before Covid-19 arrived in Victoria. With the arrival of the pandemic, it is predicted that suicide rates will increase.

This is particularly concerning for our community. If we are to prevent suicide, we need to understand it first.

The main external reasons, or environmental stressors relating to suicide include unemployment and other financial stresses, being unable to attain a complete education, strained relationships and social isolation.

On the flip side, some of the main internal reasons why suicide occurs are feelings of hopelessness, helplessness, isolation, guilt and shame.

Shame is a real issue for people with BPD. It is an invisible problem as it tends to be hidden, and difficult to detect.

An important distinction between guilt and shame is that guilt occurs as a result of a specific action we have taken, whereas shame is the nagging feeling of something being inherently wrong with our own selves.

While this can be commonplace for people with BPD, suicidal ideation and self-harm are 'symptoms' that can help identify the level of suicide risk present in a person with BPD.

Suicide is usually preceded by suicidal ideation. According to Headspace, "the combination of self-harm and intention to die is the single greatest risk factor for completed youth suicide."

Therefore, it becomes very important to determine whether suicidal ideation exists in a person who is self-harming.

"The term 'suicidal ideation' refers to thoughts that life isn't worth living, ranging in intensity from fleeting thoughts through to concrete, well thought-out plans for killing oneself, or a complete preoccupation with self-destruction."

– [HEADSPACE MYTHBUSTER: SUICIDAL IDEATION](#)

HELPLINES AND RESOURCES

If you or someone close to you are in an emergency, danger or require immediate assistance call Triple Zero (000) for emergency services.

- [Lifeline](#) provides crisis counselling and suicide prevention services. Call 13 11 14 (24 hours a day, 7 days a week) or use their [online chat service](#).
- [SANE Australia](#) provides phone and online counselling. Call 1800 18 7263 (Monday to Friday, 10am - 10pm) or participate in their [online forums](#).
- [Tandem](#) provides support for carers of people experiencing mental health issues. Call 1800 314 325 or participate in their [online forums](#).
- [Beyond Blue](#) offers online and phone mental health support. Call 1300 22 4636 (24 hours a day, 7 days a week) or use their [online chat service](#).
- [1800Respect](#) offers confidential counselling, information and support for people impacted by sexual assault, domestic or family violence. Call 1800 737 732 (24 hours a day, 7 days a week) or use their [online chat service](#).
- [BPD Community's](#) Covid-19 strategies and techniques are available [here](#).

According to [Orygen](#), self-harm is “when someone deliberately hurts or mutilates their body without meaning to die, although death may still occur as a result of the self-harming behaviour”.

Self-harm commonly includes self-cutting, self-poisoning, burning, scratching and overdosing, among many other behaviours.

This behaviour often starts in early years and can be a way of finding an outlet for distress, or a way of communicating and coping with overwhelming emotional pain.

For those with BPD, self-harm often occurs while experiencing intense emotions such as stress, anger, irritability, hopelessness and sadness.

While self-harm can signify that a person is thinking of suicide, not all people who self-harm are suicidal. However, in some cases, it may result in accidental death.

A person with BPD may either knowingly, or unwittingly, engage in at-risk behaviour by misusing drugs or alcohol, or by creating a situation that will place them at risk-such as driving erratically. At-risk behaviour may be associated with impulsivity.

These impulsive behaviours, along with changes to one's sense of self and instability in close personal relationships may result in people with BPD being more vulnerable to suicidal



thoughts and tendencies.

Identity dysregulation is a core domain of BPD, and feelings of emptiness especially when associated with shame, can be closely associated with suicide and self harm.

Relational dysregulation is another core domain which is at the core of many suicide attempts. People with BPD often struggle with close personal relationships.

The possibility of suicide can increase particularly when a close relationship goes awry, or when a close loved one passes away.

Another highly concerning finding in a recent unpublished study was that 99% of individuals with BPD who died by suicide had attended mental health services in in the 12 months beforehand, while 88% had in the six weeks beforehand.

People with BPD often face stigma and discrimination when they seek help. SANE Australia has found that 94% of healthcare professionals who participated in a study have said they have witnessed colleagues stigmatising people with personality disorders.

Co-occurring mental illness tends to be the norm with BPD. Therefore, when we take depression and anxiety into account, we can see why suicide is such a powerful presence in the lives of people with BPD.

If you or somebody dear to you is self-harming or is experiencing suicidal ideation, professional help can make a difference. For healthcare professionals, it is imperative that The National Health and Medical Research Council's (NHMRC) [Clinical Practice Guideline for the management of Borderline Personality Disorder](#) is consulted in caring for people with BPD.

WHAT CAN WE DO?

If you are or someone close to you is feeling suicidal, there are things you can do to help them and yourself.

Here's a step by step guide to some actions you could take in relation to suicidal ideation and suicide:

Step 1: Recognise the reality

Suicide might seem to occur out of the blue, however, it has more likely been in the mind for some time.

Recognise that suicidal feelings build up over time and often something happens - which seems like the last straw - which is where suicidal ideation meets impulsive behaviour.

Then, there is the long slow burn of suicidal ideation and self-harm which



Source: [LivingWorks ASIST](#)

can lead to suicide. The good news is that suicide ideation does not mean that a person will commit suicide; self-harm does not mean a person will

commit suicide. They are signs that a person is struggling.

"I struggled with suicidal thoughts. they were a constant companion. I never self-harmed, but I came very close to death. What I learned later was that my constant companion was suicidal ideation. Any time I got extra anxious, I sought release with thoughts of a violent nature. This lasted decades. When I look back, two times I came close to suicide were when I had relationship breakups. It took some work, but that companion has now gone. It was no friend."

- ANONYMOUS, MAY 2020

People who are vulnerable to impulsivity may respond rashly to an unexpected change in their environment.

People with BPD experience relational dysregulation. So, a trigger for people with BPD can often be a relationship breakup or even a death of a close loved one.

One reason people self-harm is because it relieves the immediacy of the psychological pain that is felt. Perhaps the physical pain diverts attention from the psychological pain, or perhaps, it becomes a visual reminder of the pain, so that others can also see it.

Self-harm and suicide can be related. It pays to understand the difference between a chronic risk of suicide and where there is an acute high risk of suicide (see figure above).

Both these situations occur where the type of self-harm used has the potential to be lethal. This is a clear danger sign.

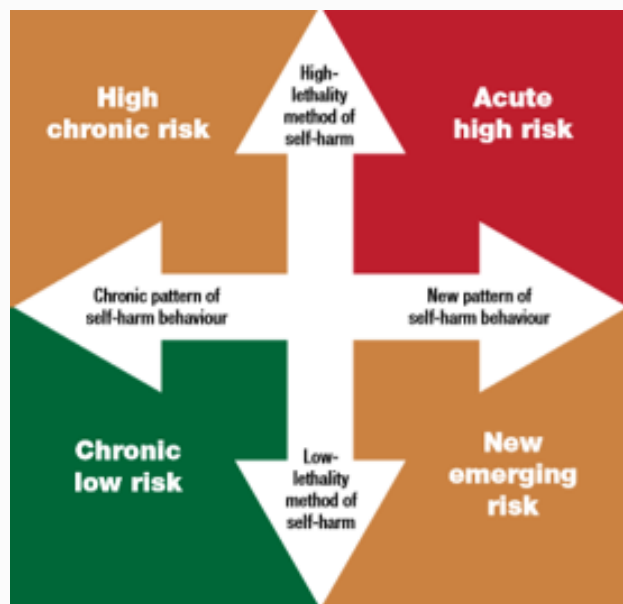
Cries for help are cries for support. By identifying the conditions that create suicidality, we can learn how to address them.

If we can recognise and realise these warning signs, then we can apply circuit breakers to stop suicidal ideation and direct our self-talk and our thoughts towards a hopeful message.

We can control our minds. For the person with BPD, this probably means accepting the support of a trained professional.

This requires learning how to ask for support. A GP is a good place to start.

For loved ones, it means recognising



Source: The National Health and Medical Research Council's (NHMRC) Clinical Practice Guideline for the management of Borderline Personality Disorder

their own fears, dispelling their inclination to be judgemental, and learning how to listen deeply and offer support.

BPD Community Family & friends Group has a monthly learning program in the techniques required to support loved ones.

Step 2: Plan what to do when things go wrong

In life, it is only natural that things can go wrong sometimes. Typically, the loved one will want to help, but they need to help themselves too. These steps are helpful for people with BPD and their loved ones:

- **A support group**

It is really important to have a support group. This may include trustworthy friends, family members, and even professional support.

Support groups provide access to a community that is there for you no matter how big or how small the problem may seem. Most importantly, these are people who are non-judgemental.

Building our resilience requires planning, and nowadays, there's an app for everything!

[YourCrew](#) is a new app designed especially for young people – but hey, older people can use it too! It helps us understand how we feel, communicate with those we trust to support us, and helps us stay on track.

- **A safety plan**

When we are feeling unsafe and our thoughts are too clouded to seek help, it pays to have a safety plan.

When your mind is clear, there are seven simple questions you respond to:

1. What are my warning signs?
2. What are my reasons to live?
3. How do I make my space safe?
4. What can I do by myself?
5. What are the people and places I can connect with?
6. Who can I talk to or chat with?
7. What is the professional support?

Installing the [Beyond Now suicide safety planning app](#) and filling out these questions, equips us to consult our plan when things get serious for us.

This is really helpful because we do not tend to think straight when we are challenged with suicidal thoughts. This is where it helps to consult our own advice from when we were calm and thinking straight.

- **A crisis plan**

When things go awry, it is helpful to have as much as possible in order.

Imagine you need to go to the Emergency Department but your cat is unwell and you don't want to leave. Or perhaps, the rent is due tomorrow and you'll be in the hospital.

These simple things can be like a

weight holding us back. It helps to have ourselves organised beforehand to avoid adding to our panic.

It is recommended to have a folder with our details written in. It could start by asking ourselves the following questions:

1. If you are in a crisis, what do you want to happen?
2. Who do you want to contact?
3. Who needs to be contacted?



BPD Community has prepared a [checklist](#) of questions to guide you through collecting the important information in order to keep control of your life.

Step 3: Recovery gives us hope and optimism

Never lose sight of the knowledge that recovery is a realistic goal for people with BPD. It might not happen overnight, but it is possible.

With recovery, thoughts of suicide can

fade into the past where they belong.

Starting your journey towards recovery is empowering. It's when you take matters into your own hands, learn how to ask for support and how to accept the support you are offered.

It means learning how to manage when what you want is not available.

It means understanding when you backslide and make mistakes.

Recovery means being able to regulate your emotions, having a sound sense of self, having strong long-term personal relationships, and recognising the flaws in your thinking and taking them into account.

It means having a life worth living.

BPD Community offers [suggestions](#) for you to help you begin to take control of your recovery.

LOOKING TO THE FUTURE...

New research finds that an extra 370,000 Victorians will seek treatment or be hospitalised due to mental health issues in the next three years as a result of Covid-19, along with an increase in the number of suicides. While these numbers are overwhelming, here are a few practical steps we can actively take to improve our lives and our mental health:

Work for Victoria

Covid-19 has led to massive financial stress, which is one of the major contributors to suicide. If you find yourself unemployed or earning a lower income due to the pandemic, know that you are not alone. One way to find employment could be through the government's [Working for Victoria](#) initiative. The \$500 million initiative helps those who have lost their jobs or have been adversely impacted financially due to Covid-19 connect to employers and get back on their feet. All you need to do is register on [Sidekicker](#), search for jobs and apply.

Study a Free TAFE course

A lack of education is also one of the main reasons why people have access to fewer opportunities. The Working for Victoria initiative also allows you to access a free, short online training unit in areas such as cleaning and sanitation, food preparation, health care, customer service, food packaging, and retail support. Another option may be to consider a [free TAFE course](#) whereby if you're eligible, the government will cover the full tuition fee for a course of your choice from the [free TAFE course list](#).

Find your community

Another important coping mechanism for people with BPD is our community. The easing of restrictions means that we are now able to slowly meet our families and friends, although it is still important to maintain social distancing. If you're experiencing thoughts of self-harm and suicide, it is encouraged to reach out and confide in someone you trust. Building a network of people who love and support you can help to regain a sense of belonging to a community and give meaning and purpose to our lives. It is also equally important to consult a professional such as a therapist.

Be a warrior

All of this and more can be achieved if one is able to maintain a sense of hope and optimism. The mantra "This too shall pass," carries a lot of meaning especially during this pandemic. During this time, let us try to look within to recognise the warrior in ourselves. We have overcome a number of challenges before and will get through this one too. Carrying hope and optimism in our hearts and minds not only reduces psychological pain, but also reduces physical pain. So be your own best friend, know that you are worthy of love and, be gentle with yourself. This too shall pass.