

**LEVEL UP: COMPETENCES OF THE FUTURE**  
**WORKING WITH SUICIDAL PEOPLE - DON'T BE AFRAID TO ASK**  
**FOR HELP**

**SCRIPT 11**

County Center for Family Assistance in Oświęcim in cooperation with  
UNITED KINGDOM - BUTTERFLIES LTD  
EDU SMART TRAINING CENTER LIMITED IRELAND

PROJECT ERASMUS+, Action 2:

Strategic partnerships for vocational education and training:

„Level up- competences of the future”

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Script 11 LEVEL UP

Topic: WORKING WITH PERSONS WITH A LONG to SOME - LONG TO SAME

The duration of the meeting: 3 hours divided into meetings.

Recipients:

The recipients of the meetings are families,

The script can be used by social workers, family assistants, family coordinators and all other professionals working with family facing divorce difficulties.

Participants:

The meetings may be attended by the whole family, individual family members on their own, adults without children or adults with children e.g:

- Mother with children
- Father with children
- Mother and father with children
- Mother with father
- Whole family

In justified cases, you can invite people relevant to the life of the child, e.g. grandmother, grandfather, etc. to the meeting.

## Work methods:

- case study
- psycho-education
- mini-lecture
- group work
- individual work
- relaxation techniques
- psycho-education
- mini-lecture
- group work
- individual work
- relaxation techniques
- brainstorming

## Materials needed for the meeting:

- worksheets
- markers
- crayons
- scissor
- adhesive cards
- flipchart paper

- A4 paper
- pens

The script includes exercises and individual work cards for 3 meetings lasting 1 hour.

The user decides for himself/herself in what order He/she will use the proposed content.

### **The purpose of the meetings:**

The aim of the classes is to psychoeducate the family in the scope of forms of help in case of suicidal thoughts or suicidal behaviour in at least one member of the family. During the classes, participants get to know the places where they can get help depending on the difficulties that arise, they get to know the forms and procedures of help granted to individual family members. Participants will learn about the rights and duties of parents and children who are directly or indirectly involved in the process of help. They will learn about the consequences of particular behaviours (e.g. self-harm), as well as acquire appropriate skills to better deal with the problems that arise.

- **The following results are planned to be achieved by the participants:**
- Learning about aid institutions
- Psycho-education in suicidal behaviour, self-mutilation

- To know the main difficulties in the family in dealing with the presence of suicidal content
- To make the situation of a person experiencing suicidal thoughts more open and understandable

The individual workshop tasks will serve to increase understanding of the issues involved, provide participants with specific tools to work with their families, as well as increase interpersonal competence to better cope with illness and emerging suicidal thoughts.

## Meeting 1

The social worker / specialist summarises the previous meeting; answers questions, if any.

He or she then gives information to the client/client on how to get help and discusses it in detail.

He or she answers the questions that arise.

## Information card

### Suicidal thoughts: where to seek help

If you have suicidal thoughts, or if a person close to you has suicidal thoughts, you should seek the help of specialists who can provide effective help. Do not delay your decision in order not to escalate with fatigue, difficulties and prolong your suffering. Seek the help of a psychiatrist, psychotherapist or crisis intervention specialist.

You will find these specialists in:

*OŚRODEK  
INTERWENCJI  
KRYZYSOWEJ*

*Poradnia  
Zdrowia  
Psychicznego*

*PSYCHOLOGICAL  
AND PEDAGOGICAL  
COUNSELLING  
CENTRE*

*116 111  
TELEFON ZAUFANIA  
DLA DZIECI I  
MŁODZIEŻY*

*116 123  
POWIATOWE  
CENTRUM  
POMOCY  
RODZINIE*



*Hospital*

*OŚRODEK  
POMOCY  
SPOŁECZNEJ*

*FOUNDATIONS AND  
ASSOCIATIONS*

**116 123 – Kryzysowy Telefon Zaufania.** Free phone call for adults who are in emotional crisis and need support and psychological advice. It has a database of places providing professional support throughout the country. Open daily (also on Saturdays, Sundays and holidays) between 2 and 10 pm.

**116 111 – Telefon Zaufania dla Dzieci i Młodzieży.** Free phone call for young people who are experiencing difficulties and need help in coping with problems. Open daily (also on Saturdays, Sundays and public holidays) between 12.00 and 22.00.

The trainer discusses with the family specific forms of help, where they can find them, what kind, etc. It is worth noting that the first and basic step in case of suicidal thoughts is a psychiatric consultation (both for adults and children). Suicidal thoughts are a real threat to health and life, for this reason, a medical diagnosis (perhaps including pharmacological treatment) is essential.

Supporting questions:

- Have you ever used a form of assistance?

- What are your experiences, your impressions of the places?

- Are you afraid of something in connection with the place?

After completing the mini-lecture and the psycho-educational part, the social worker gives the client a card to take notes. After the client completes the Work Card, the employee answers questions. If the employee does not know the answer to the questions asked, he informs the client about it, indicating the time and manner of the answer.



## Meeting 2

Testing and discovering self-destructive functions.

The main aim of this stage of work is to make the person aware of the direct relationship between situations, emotions, thoughts that activate the need for self-harming and undertaking self-harming behaviour.

Asking for a very precise, detailed description of the situation when self-harm occurred. Asking questions:

- How did you feel at that moment?

- What came to your mind at that moment?

What kind of images, images appeared in your head? What were they about?

- What thoughts came into your head just before you cut yourself?

Description of behaviour, what I do:

Activating factors for impulsive behaviour	Impulsive behaviour inhibitor
<ol style="list-style-type: none"><li>1. Why am I doing this? What do I achieve by this behavior?</li><li>2. What would be wrong if I didn't do it?</li><li>3. Why am I still doing it?</li><li>4. Why me?</li></ol>	<ol style="list-style-type: none"><li>1. What did I lose and what i will Lose because of this behavior?</li><li>2. What would be good if I stopped doing it?</li><li>3. Why do I want to stop doing it?</li></ol>

YOUR EXAMPLES / CONCLUSIONS / COMMENTS

### Meeting 3

The social worker / specialist summarises the previous meeting; answers questions, if any.

It then provides the clients/customer with information on how to get help and discusses it in detail.

Answers to questions that arise

After summing up the initial stage of the meeting, the employee moves on to the practical part, which is working with an individual work card "Replacing risky behaviours with safer ones".

Replacing risky behaviour with safer behaviour - depending on the function of the behaviour.

The aim of this stage is to reduce the potential negative consequences of teenage mutilation. It is worthwhile to establish a plan with the adolescent to deal with situations of increased risk of self-destructive behaviour.

It is also helpful to discuss and agree on alternative, safer forms of behaviour.

INDIVIDUAL WORK CARD - EMERGENCY PLAN

WHEN I IMAGINE MYSELF MUTILATING, WHICH PARTS OF MY BODY I'M PLANNING TO MUTILATE, I REACH FOR THE EMERGENCY PLAN

Holding ice cubes in your hands, in your mouth	Ice-cold shower
Clapping your hands until they're tired	Massage
Biting pepper, allspice or other bitter spices	„Shaking' with a rubber band in the wrist
Rinsing with strong mouthwash	Haggling newspapers, papers
Sticking plasters in places where mutilation is planned	Writing on the body with a red pen, a marker
Moje sposoby	

## OWN THOUGHTS AND COMMENTS

Once the task is completed, the employee and the client create a support and assistance plan. It is worth discussing difficulties related to the use of forms of assistance, both technical (e.g. distance of the place of assistance, unfavourable working hours, etc.) and emotional (fear, shame). Together, you can identify the most priority actions to start with and who can help (extended family, social workers, etc.).

S WHAT'S BOTHERING YOU - CALL IT A SINGLE SENTENCE.	M How long has it been bothering you? Since when? Give a specific date	A What do you want? What's your plan to do that? Specifically, write down step by step	R Is this plan real?	T When do you want to do it? Give a real date and time

- COMMENTS AND CONCLUSIONS

After the end of this difficult part of the sentence, it was time to train to deal with stress.

Dealing with stress, with emotions, with difficult states/situations, communication training.

## INDIVIDUAL WORK-CARD

The aim of this stage of work is to teach socially acceptable forms of coping with difficulties and communication.

During conversations it is worthwhile to talk about what it is and what it is about:

Taking care of your body

*Do you think your body is important? Is it worth taking care of?*

Self-care

*What can you do to take better care of yourself, both physically and mentally? Do you respect your time, your well-being, your needs?*



Accepting yourself, your mistakes

*Do you feel you have the right to make mistakes? What do you feel when something goes wrong? Do you accept yourself?*



Praise yourself

*When was the last time you thought of yourself positively? Do you happen to be proud of yourself? For which someone once praised you?*

At this stage, you should also use any known "coping with..." training. Science is particularly important:

- Recognizing, naming emotions
- Communication with your family, your peers
- Dealing with stress, discharging tension

COMMENTS AND REFLECTIONS. What surprised you in this task?