Suicide is among the few topics that almost uniformly triggers anxiety, apprehension and uncertainty. The development of a work plan that addresses suicide prevention is among the most challenging endeavors for risk management professionals. As risk managers, how do we reach out to at-risk employees while protecting your company from liability?

And for many, the underlying question is: Should we? Is it appropriate for workplaces to intervene?
For Sally Spencer Thomas, CEO and co-founder of the Carson J Spencer Foundation, the answer is a resounding yes. “People are a business’ most important asset, and it’s critical to create a culture of health and safety,” says Spencer Thomas.

Working Minds
The Foundation has developed the Working Minds program, modeled after the Air Force Suicide Prevention Program. It is the only suicide prevention program exclusively targeting the working-aged population. The program has resulted in a 79 percent reduction in suicide in five years through innovative programming like workplace guidelines for bereavement help for employees and suicide prevention system of gatekeepers at all levels of organization.

This is especially critical because the majority of people who die by suicide are of working age. Suicide is the second leading cause of death for men ages 25 to 34. Despite this, most workplaces are relatively unprepared to help team members struggling with suicidal behavior or with the aftermath of suicide.

“People spend 40 to 50 hours a week in their workplaces,” says Bob VandePol, president of Crisis Care Network, which provides critical incident response services following workplace suicides. “When somebody dies, especially by suicide, it creates a horror in that it breaks all the rules of life that we have been brought up to believe. So it’s imperative that business leaders act when suicide touches their office. Employees will scrutinize leadership to evaluate if they really do care. If leadership responds compassionately and swiftly, the employees will assume that management cares about them as well.”

There are several myths surrounding suicide that have adversely affected the extent to which companies address prevention, response and education action plans. Many individuals mistakenly believe that discussing suicide may directly lead to increased suicide risk. Additionally, many believe that people whose suicide attempts have failed really were not seriously contemplating suicide — only seeking sympathy or attention.

“There is so much misinformation and misunderstanding about this issue throughout our entire culture that these myths can prevent us from intervention,” says Spencer-Thomas. “But we’ve all heard the comments before: ‘If they really want to commit suicide, they are going to do it anyway;’ ‘Suicide is too personal – it’s not my business.’ The problem is that these beliefs allow us to remove ourselves from the problem and get in the way of thinking preventively.”

Risk Manager’s Role
To assist in the process, risk managers should be aware of the myths and misinformation surrounding suicide. By increasing their understanding of what is and is not linked to suicidal behavior, they can remain open and objective during the planning and implementation process of a work plan. To be successful, programs need the following: management commitment, education and training, an assigned team member responsible for the process, understanding of available resources and established protocols.

Spencer points to the United States Air Force Prevention Program (AFSPP) as a successful model. The Air Force has implemented 11 initiatives aimed at strengthening social support, promoting development of social skills, and changing policies and norms to encourage effective help-seeking behaviors. AFSPP’s 11 initiatives include leadership involvement, suicide prevention education, guidelines for use of mental health services, critical incident stress management, behavioral health study and more.

“Sometimes people think: ‘If I have this program, it increases our exposure and we may get sued so let’s just bury our heads in the sand,’ ” says VandePol. “But if you deal with the topic of suicide in a responsible, respectful way that confronts the issue squarely but doesn’t glamorize it, then you will have a great starting point for dialogue and intervention.”

The key, both experts agreed, is to integrate the program in a way that makes sense for your company’s culture — most often, by incorporating it into existing wellness programs.

“Just in the way you may have a lunch and learn on exercise, this is a great way to introduce the subject in a non-threatening way,” says Spencer-Thomas. “If there is an incident in which somebody has taken their own life, it is important to react swiftly while still protecting his or her right to privacy. Ask the family what their wishes are, and act accordingly. If a family chooses not to disclose, you can still have a facilitated support session about the unexpected loss of a team member and focus on the feelings that survivors may have.”

“How we react in the aftermath of a crisis affects the cycle of prevention,” says Spencer-Thomas. “If we handle an incident poorly, we increase the risk for those remaining. Fear is a very real part of the picture when it comes to suicide. It all comes to down to preparation. What are your guidelines for handling other crisis events? Start from there. This will create an upstream rather than downstream approach.”

Patricia Kagerer is the Vice President of Risk and Safety Management for CF Jordan Construction, a Texas-based construction company.