From Hopelessness to Hope

A Recovery Lesson
Today we will explore how hopelessness affects us and our society.

This topic is important because having a successful recovery starts with hope.

Hopelessness can lead to overwhelming distress, self-harm, and suicidal thoughts - but it doesn’t have to.

We want to prevent the negative affects of hopelessness.
Goals and Objectives

- To increase awareness of risk factors for suicide and to promote hope
  - To explore irrational thoughts that could lead to hopelessness and self-harm
  - To describe a protective factor or strength you have
  - To describe a way to help yourself become more hopeful
  - To list a warning sign that may be seen before a suicide
  - To list a phone number that people can call if they are feeling hopeless or suicidal
Hope

- I believe that in life there is always hope – but sometimes you have to change what you are hoping for.
- Finding a more positive outlook is possible if you have the right kind of help and support.
- Hopelessness is a very negative emotion that can cause people to be at risk of self-harm.
- It’s hard to be hopeful when you have long-lasting sadness or depression.
- Hopelessness can also happen with irrational, distorted, or negative thinking.
Irrational Beliefs

Are these irrational beliefs? Discuss why or why not:

• I shouldn’t make any mistakes.
• I shouldn’t get angry.
• I shouldn’t get sick.
• People shouldn’t die.
• Things shouldn’t change.
• Relationships should be easy.
• If I’m not in control of everything in my life, I’ve failed.
• Everyone has abandoned me - They just don’t care.
Hopelessness can increase the risk for depression and suicidal thoughts.

Sometimes deepening depression can lead to self-injury, like cutting, scratching, burning, bruising, picking at hair or scabs, or refusing to take prescribed medicines.

People may try to harm themselves to try “to cope with unbearable emotions,” “release tension,” or to “feel alive again”.

Self-harming behaviors may sometimes be used to get attention, get revenge, to manipulate, or to control others.
What is the difference between self-harm and suicide?
- Self-harm/self-injury is when the person wants to live.
- A suicide attempt is when the person wants to die.
- Do you know anyone who died because of impulsive, dangerous actions, but didn’t intend to kill themselves? How did that make you feel?
- People who are hopeless may think their family and friends would be better off without them. Are they?
  - No! That is an irrational thought.
- Do you believe that suicidal thoughts are temporary? Yes. People can overcome them. But suicide is permanent.
Discuss the following statements:

- “If I hurt myself, it will hurt them.” Yes, it might hurt them. But it will hurt you more.
  - “Suicide is an act of courage.” No. It takes more courage to ask for help, to fight the depression, and to win.
- Suicidal people always give warning signs. No, but they often do.
- Suicidal gestures are very dangerous. Yes. Help may not arrive in time.
Suicide is the 8th leading cause of death in the U.S. - more than 1% of all deaths.

30,000 Americans commit suicide each year, with 500,000 more attempting suicide.

People who talk about suicide, or threaten to commit suicide are 30 times more likely than average to kill themselves.

30-70% of suicide victims suffer from major depression or bipolar (manic-depressive) disorder.

Many people feel guilty, thinking “I should have known.” or, “I should have been able to stop him.”

However, people often hide suicidal thoughts and some may not give any warning signs.

- Don’t blame yourself!
- The only person you have control over is yourself. - You can’t control what other people do.
- If they are suicidal, you should try to quickly get them to professional help, but sometimes they refuse.
- Forcing someone to go to treatment is not easy to do, but sometimes law enforcement officers can help with that.
Discussion

Discussion: How could you stop a suicide attempt if you didn’t know? Often, you can’t. That’s why it is best to get treatment before it gets that bad.

- Even when someone feels hopeless, family and friends may have no idea that they would actually try to kill themselves.
- Sometimes suicidal gestures go too far and no one finds them in time.
- Although you keep guns away from people who are depressed or suicidal, they may find other ways.

Do you know anyone who committed suicide? How did it affect you? You did your best, but it went badly. You need support. Don’t let yourself feel guilty or ashamed.
People may feel both anger and grief after a loved one commits suicide because:

- They left you in a shocking, traumatic way.
- It may be seen as “a selfish act” to those left behind.

Huge emotional scars and negative feelings can make it much harder to cope and grieve in a healthy way.

- It is more difficult to talk about a loved one who committed suicide.
- Survivors may have less support because people “don’t know what to say”.

Emotional Effects
Family & Community Effects

- **Discussion:** Why is there a higher suicide risk when other family members, relatives, or friends have died from suicide?
  - When someone close to you dies, it is natural to think about them and to want to be with them.
  - It may be seen as an option in the minds of those left behind. (You might think they would avoid it at all costs because of the pain it caused, but it doesn’t seem to be that way.)
  - Suicide risk increases with each suicide in your community (even more among young people).

- An important goal of a healthy community may be to increase awareness and to prevent suicides.
Case Study: Hopelessness

- Carol (not her real name) was a young woman in the hospital with depression.
- Looking back at a past suicide attempt as a teenager, she said, “I was too sick to even care how my family and friends would be affected by it.”
- Recently she started to have suicidal thoughts again.
- She came to the hospital saying, “It’s like a circle. Every day I wake up hopeless and I go to bed hopeless.”
- “I can’t go on like this. I need help!”
She said, “I was mad at my family for calling 911 and saving me when I overdosed. I didn’t want to be alive. But this time, I came here to get the help I need. I’m feeling better now.”

To increase hope in her life, she began learning about her risk factors and preventative factors:

- **Stage-setting factors** that make her at risk for suicide
- **Contributing factors** that make risk higher
- **Trigger factors** that leads to risky or self-harming behaviors (along with other risk factors for suicide)
- **Protective factors** that can decrease risk for suicide
Stage-Setting Factors

- Mental illness and distress
- Family history or personal history of a suicide attempt
- Having a friend that committed suicide
- Loneliness, social isolation, separation, unresolved grief
- Discussion - How could you control these risk factors or make them have less of an impact?
  - Follow your medication and treatment plan for mental or physical illness.
  - Use crisis lines or other community resources if needed.
  - Use “talk therapy” or counseling to resolve unhealthy grief, anger, or stress after loss of friends or loved ones.
  - Improve relationships, or become more socially active.
Contributing Factors

- Substance abuse
- History of physical or sexual abuse
- Poor coping skills, or low self-esteem
- Impulsiveness, or conflict with the law
- Unstable family
- Excessive media reporting of suicidal acts
- Rigid, narrow thinking (all-or-nothing, black-and-white)
- Perception of poor control in life, or poor general health
- Access to guns, pills for overdoses, or other ways to hurt self
- Not seeking professional help
Control Your Risk Factors

- Avoid alcohol or substance use. Get treatment if needed.
- Learn how to think positively, and be more flexible.
- Develop new coping skills for anxiety and depression.
- Be accountable for what you have done, and take the consequences (so the problem can be put behind you).
- Keep your home safe, without hazards.
- Have regular appointments with your primary care provider and mental health professionals.
- Decrease TV time in your home and spend more time talking to each other.
Trigger Factors

- Conflict, bullying, cruelty, or rejection
- Trauma, personal failure, or humiliation
- A significant loss, or the death of a loved one
- Discussion - How can you decrease these contributing factors?
  - Get the help you need for the problem – Use conflict resolution, counseling, or other resources.
  - Learn new coping skills, stress, or anger management.
  - Be kind to yourself. You have permission to be emotional.
  - Resolve anger or grief without “stuffing it inside” and try to be assertive, not aggressive.
Case Study: Protective Factors

- Even if you have risk factors, you can still have some control.
- People have protective factors and strengths that can help increase feelings of hope.
- Carol’s strengths were:
  - “Every Sunday, my son takes me to church and then to his house for a visit.”
  - “I have a pet cat. Even when I’m too tired to do anything, I can spend time with my cat.”
  - “I try to keep busy. I like doing crafts and baking.”
Protective Factors

- Spirituality
- Strong family connectedness, warmth, and belonging
- Social support and acceptance
- A positive attitude toward education
- Good communication skills and discussing problems with family or friends
- Good physical and mental health
- Using available resources
- Creative problem solving and a sense of humor
- Seeing adults or peers who have healthy lifestyles
- Realistic expectations
Take a Mindfulness Break

- Practice deep breathing and listen to relaxing music called **Hope - Yiruma** (2:49 minutes) on YouTube at [http://www.youtube.com/watch?v=MG0AjpzqWo8](http://www.youtube.com/watch?v=MG0AjpzqWo8)

- Or watch clouds on this video with relaxing music called **Yiruma - Poem** (3:18 minutes) on YouTube at [http://www.youtube.com/watch?v=0pMa6KIlcNE](http://www.youtube.com/watch?v=0pMa6KIlcNE)
Overcoming Hopelessness

- Build **self-esteem** to include a sense of security and trust.
- Improve self-image by developing **strengths** and having positive experiences.
- Learn more about ways to stop negative thinking and do more **positive thinking**.
- Recognize and **challenge irrational thoughts**.
- Attend counseling, group therapy, family therapy, or cognitive behavioral therapy (CBT) if needed.
- Take part in **education** for developing healthy relationships and **self-management**.
Improve Life Skills

- Social skills
- Problem-solving skills
- Decision-making skills
- Coping and stress management skills
- Practicing relationship and communication skills
- Suicide awareness education:
  - Learn warning signs.
  - Know what to do if a friend may be suicidal. (Do not promise to keep it a secret.)
  - Know how to get professional help for yourself or others.
Recognize Warning Signs

- Hinting or threatening to hurt or kill self
- Looking for ways to kill self (guns, pills, etc.)
- Talking or writing about death/suicide
- Giving away belongings/seeing no purpose in life
- Increased substance use (alcohol or drugs)
- Anxiety, agitation, can’t sleep, or sleeps too much
- Feeling trapped and hopeless, dramatic mood changes (or suddenly cheerful after having depression)
- Withdrawing from friends, family, and society
- Doing risky activities/having bizarre thoughts
What Can You Do?

- Trust your instincts that the person may be in trouble.
- Talk with the person about your concerns and LISTEN to them.
- Ask direct questions without judging them.
- Determine if the person has a specific plan. - Having a detailed plan means there is a greater risk.
- Get professional help, even if the person resists.
- Stay with a person who feels suicidal until professional help comes. – Don’t leave them alone.

From [www.sucidology.org/go/information/get-info/suicide](http://www.sucidology.org/go/information/get-info/suicide)
How to Get Help

- Doctor, counselor, community mental health agency
- Clergy or spiritual leader (in some cultures)
- Law enforcement (call 911 for emergency)
  - Police can take a person to the hospital involuntarily (against their will) if they are a danger to themselves or others.
- Call telephone hotlines, crisis and resource information lines (like 211), or a nurse advisor if you are not sure what to do.
  - 1-800-273-TALK or 1-800-273-8255
  - 1-800-SUICIDE or 1-800-784-2433
More Ways to Improve Hope

• Reach out to others for support. Then be willing to help others when you are feeling better.
• Identify what you feel hopeless about. - Is there any negative or irrational thinking that you can change?
• Talk about it and release blocked feelings instead of “stuffing” your emotions inside.
• Find connectedness/spirituality for the strength to “let go of old baggage” from pain in your past.
• Take control of your behaviors.
• Break down problems into smaller parts to work on.
• Recognize growth and successes, even if there are temporary setbacks.
Learning Activities

• On the Risk Factors and Protective Factors Handout, circle the ones that apply to you and then discuss them.
• How will you increase your protective factors during recovery?
• Use the Personal Strengths Checklist. Talk about or write about a strength that you have. How can that strength help you be more hopeful?
• List a phone number you can call if you or someone you know is feeling overwhelmed, hopeless, or suicidal.
Hopeless/Hopeful Expressions

- “I can’t face the mess I’ve made” / “There has to be a way out of this if I take it day by day, step by step”
- “What’s the use of trying?” / “I don’t give up easily. I will keep trying, so things don’t get worse”
- “I’ll never be happy again.” / “Even if it seems that way, I can’t predict what tomorrow will bring. I might be surprised by something good that happens.”

Discussion: Have you said or heard those hopeless statements before?

Practice saying the hopeful ones aloud.
Conclusion

• Many factors that contribute to hopelessness are within our control.
• Being more aware of our strengths can increase hope.
• Recognizing hopelessness and suicidal thoughts can help prevent suicides and their devastating effects.
• We can find help when illness, situations or trauma trigger hopelessness or suicidal thoughts.
• Ups and downs can be managed with the right help and support.
• Hope is the first step in your recovery journey.
References


This lesson was developed in 2009 and revised 6-3-15 by Mary Knutson RN.