

United Way workshop offers profile of suicide-prone teens

By Jeanne Gehret

How does a parent or counselor decide whether a young person's depression will pass or whether he's suicidal? What should concerned adults say or do when a child or teenager confesses she's tried to commit suicide? Does talking about suicide really encourage more young people to attempt it?

Is suicide among the young as prevalent as television would have us believe?

"Completed suicide is rare, but the rate has risen in the last decade," said Christopher H. Hodgman, M.D., at a United Way workshop entitled "How to be Helpful Before It's Too Late."

"In Monroe County, which has 10,000 teenagers, there are 10 to 12 completed suicides a year. But for every completed suicide, there are at least 300 attempts and many more who threaten to kill themselves," the psychiatrist said. That translates into about 250 teenagers a month who try or succeed at suicide.

"Don't believe the myth that children don't commit suicide. They do," he added.

Hodgman, who specializes in child and adolescent psychiatry at the University of Rochester Medical Center, said researchers have identified two different types of child and adolescent suicides. Fifty-five percent result from sustained depression, although he hastened to add that depression does not always result in suicide. The remaining 45 percent are products of impulsiveness.

Depression manifests itself somewhat differently in children and adolescents than it does in adults. Hodgman identified the following characteristics in young people that should alert adults to depression:

- Withdrawal.
- Attempts to physically hurt themselves.
- Skipping school or a sudden decline in grades.
- The onset of sleep disorders. Unlike adults, children and teens sleep more when depressed.
- Alcohol or drug abuse. Such abuse can cause depression, Hodgman said, or it can result from the young person's attempts to medicate himself.

"Para-suicide" is the term professionals use to describe the other 45 percent of young people who kill themselves impulsively, said Hodgman. The term implies that these victims did not act from a desire for self-destruction but simply from the heat of passion. "These are the kids who get in fatal accidents after arguments with their parents or break up with their girlfriends," he said.

Common characteristics of impulsive suicide victims include short tempers, frequent anger and related outbursts, self-destructive tendencies and tendencies to act without thinking.

Hodgman does not believe, however, that impulsive suicides are unintentional. "The common denomination in both types of young suicides is hopelessness. The kid killed in a car after a fight is as hopeless as the depressed kid, he said.

An attempted or completed suicide is often the youngster's communication of an unpleasant fact: a C on his report card, the fact that he's committed a crime, the inescapable reality that she's pregnant. It may be flight from an intolerable reality like rejection or sexual abuse, or a way to hurt someone without fear of retaliation.

Younger children may use suicide to control others, not realizing that its effects are irreversible. "The young child will think, 'Boy, will this make them sorry,' and relish the discomfort they'll cause someone. They never stop to think that they won't be there to witness that discomfort; they deny the finality of death," said the doctor.

When a child seems prone to suicide, Hodgman recommends the following course of action:

• Don't hide from the issue. "'Did you want to kill yourself?' is a life-saving question," said Hodgman. "Discussing suicide doesn't cause fatalities; it means 'Hey, I've read your message.'

"It's appropriate to ask the question any time you suspect a young person is thinking about suicide, even if you're not a professional therapist," he continued. "In fact, psychiatrists are not usually the first to find out — it's usually a parent, teacher or guidance counselor — any adult who feels he is his brother's keeper."

• Take every threat seriously. Don't minimize the seriousness of the young person's hopelessness. "Avoid reassuring the kid that everything will work out or saying, 'Oh, it can't be that bad.' Such responses diminish the youngster's self-respect further

and only serve to make the adult more comfortable," Hodgman said.

"Instead, listen carefully and say, 'I'll try to help you work things out, but easy answers may not be available.'"

• Share the burden with others who can help. If the child is not your own, contact the parents, said Hodgman, except in the rare circumstances where the parents' reaction would be violently counterproductive.

• Call the child's pediatrician. "A pediatrician is dedicated to the best interest of the child and does not have the stigma of being a 'shrink,'" Hodgman said. "The pediatrician's presence lowers the parents' guilt in handling the problem."

• Be careful of medications. "If a drug is prescribed for depression, the staff at Strong almost always hospitalize the child because that medication is also conducive to suicide," he said.

Keynote address considers the state of the American family

Listeners at the November 13 United Way conference could not agree whether the keynote speaker's message conveyed hope or gloom.

But they all enjoyed her jokes. Gretchen Johnson, executive director of Family Services of America, introduced her keynote address on the state of the American family with the following anecdote:

On a trip to China, Vice President George Bush was delighted to see a familiar face and asked the man to dinner. "Sorry, but I just don't have time," the man replied. "I just arrived yesterday and I'm leaving tomorrow. I want to soak up as much Chinese culture as I can in that amount of time."

Bush asked why the man had traveled all the way to China for only a three-day visit. "I'm writing a book," came the answer, "on China yesterday, today and tomorrow."

Similarly, Johnson's remarks encompassed the American family yesterday, today and tomorrow. The statistics she cited depressed some in the audience, but she managed to inject a message of hope through her analysis of those facts and her challenge for the future.

Before she became executive director and president of Family Services of America, Johnson held several United Way posts locally and nationally. The

night before the conference at the Geneva Plaza Hotel in St. Paul, she married the Rev. Dr. and Marie Stuever, Distinguished Service Award. She was introduced as a deeply religious woman, a champion of social justice and a proponent of minority rights.

One culture shock she experienced was on individuals, Johnson said, especially when they are removed from "strong family ties, a closely knit community, secure beliefs and a feeling for the past — all those things that once lightened the burden the individual had to bear. We are faced with many choices in society and family life, and life has become a Rubik's cube of complexity; we can't get it back to its original shape."

Whether we view the American family as fatally ill depends on which statistics we emphasize, she continued. There's no denying that half the marriages in the '80s end in divorce, that the number of unmarried couples has doubled since the '70s, and that more teenagers are giving birth.

Still, she said, one survey reported that 78 percent of all adults get a great deal of satisfaction from family life, two-thirds of the married adults rated themselves as "very happy" and 71 percent of the children described their family lives as close and intimate.

"Family ties are still important and strong," said Johnson. "Optimists argue

that predictions of the demise of the family are greatly exaggerated."

Good examples of hope have been placed on the "perfect family" ideal. "When these ideas were first put forth, they were actions were linked to strong Judeo-Christian values," she said.

For a clear remembrance of the Bible about every family, Johnson said, vulnerable Johnson cited Abraham and Sarah, who chased away Hagar and Ishmael to feed for themselves, or the sons of Jacob, who would have killed one of their own because their father favored their brother Joseph, or Rebecca, who deceived her husband Isaac because he did not prefer her favorite son.

"Biblical families teach us how not to behave," she added. "From them we get great ideas, but no family is shown whole. Therefore, each generation must search for its own survival kit of values and apply them. We must pass our strength to the following generation."

Johnson challenged listeners to identify future problems and provide a social context in which the family can seek its own identity and survive. Following her talk, the audience of more than 600 clergy, public officials, educators and human service employees attended a choice of workshops on topics ranging from suicide (see related article) to public policy to changing roles in marriage.

Order to cap celebrations with December 7 liturgy

The final local event in the year of celebration commemorating the arrival of the Sisters of St. Joseph on the North American Continent is scheduled for Sacred Heart Cathedral on December 7. Bishop Matthew H. Clark will preside at a liturgy of the Eucharist beginning at 2:30 p.m.

The Sisters of St. Joseph arrived at Carondelet near St. Louis, Missouri, in 1836. From that foundation, they branched out to form several federated groups of women religious. The Sisters of St. Joseph arrived in the Rochester area in 1868. Since that diocese's inception, they have served in many kinds of ministry, mainly in the fields of education, health care and social services.

The congregation, however, has never limited its members to one particular work; since their origin in France in 1650, the SSJs have aimed to serve their neighbors without distinction and to undertake all the works of which a woman is capable in her particular time and place.

Current membership in the Rochester Sisters of St. Joseph is approximately 550 women, whose headquarters are at the congregation's motherhouse, 4095 East Avenue, Rochester.

Sister Elizabeth Anne LeValley, superior general of the congregation, invites all who wish to join the sisters in "this moment of remembering the past and looking with hope to the future" to attend the Dec. 7 liturgy.

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