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# Advice is offered to curb suicides

## Advance planning is called key in avoiding 'cluster' deaths of teens

Associated Press

ATLANTA - Federal health officials have issued 10 recommendations to help communities prevent "cluster" suicides, which typically occur among teen-agers. Rule No. 1 is: Get ready for quick action before the problem begins.

After months of research, the Centers for Disease Control has issued recommendations stemming from a conference in New Jersey late last year, in which members of communities that had not experienced outbreaks of suicide learned from those that had.

All of the advice may not apply to every community, a CDC specialist said Thursday. But, it added, the important point is to be ready.

"When the problem does arise with suicide clusters, there is usually a great deal of confusion," said Dr. Patrick O'Carroll, a CDC specialist in suicide research. "This confusion can lead to different sectors of the community working at cross-purposes. . . . The middle of a crisis is no time to work out who's supposed to be doing what."

An example of a suicide "cluster" occurred last year when four Bergenfield, N.J., teen-agers killed themselves in an apparent death pact. Within six days, four more teen-agers were dead in the Chicago suburbs, and officials said those suicides probably were triggered by reports of those in New Jersey.

The CDC said in its report that community agencies - public and mental health agencies, schools, government, police, suicide hot-lines and the news media - should cooperate in advance on a community plan.

Then, if a suicide cluster appears to be developing, the community should work together to cope with its grief while watching other troubled youths and trying to prevent more deaths, the report said.

Scientists have not quantified the benefits of various suicide-prevention approaches, O'Carroll said. "But I would never advocate doing nothing," he stressed, noting "extremely compelling" evidence that suicides can trigger more suicides.

Only about 5 percent of the 5,000 teen-agers' suicides a year in the United States are believed to be part of "clusters," O'Carroll said, but those clusters present the most favorable opportunity for action.

The response to suicide in a community "has got to be gauged according to the situation," he said.

For example, the suicide of a student at home during a weekend would not call for "some kind of enormous SWAT-team approach" in school Monday morning, he said. In that case, quiet discussion would be in order.

But if three or four suicides occur in a matter of days, "and the community is going crazy, in that situation you will do far more harm than good by trying to play it low-key," he said.

In general, the CDC's recommendations call for timely action to spread accurate information; programs to observe and counsel young people who might be at risk of suicide; possibly increased counseling; and efforts to try to address "long-term" issues.

The recommendations, in brief, are the following:

- Develop a community action plan before a suicide cluster begins.

- Form a committee and designate an agency to coordinate community response.

- Identify community resources that might be useful.

- Implement the plan when a cluster of suicides begins or appears to be imminent.

- Respond quickly, contacting groups crucial to community response.

- Avoid glorifying victims' or their deaths and minimize sensationalism.

- Identify those at high risk and refer them for counseling.

- Arrange for timely and accurate information flow to news media.

- Identify elements that might increase suicide attempts and alter them; i.e., block off places where suicide attempts are taking place.

- Address long-term issues suggested by the crisis.