Stress...the Silent Killer Affecting Our Environment

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Someone somewhere dies by suicide every 40 seconds. About 45 percent of those who die by suicide saw a healthcare professional in the 30 days prior to their death, and a quarter of all individuals who died by suicide received mental health care in the year or two before their death.

Stress can kill you! It killed Matt, who saw a healthcare provider within 48 hours of his death!

This is a story that I have never shared and am now compelled to tell. Matt never wanted to die; he simply wanted to remove the pain. Stressed, and distressed, he grew more and more depressed. He sought help from professionals, but their help was not enough. Sadly, they were unprepared, and Matt was desperate for relief. He purchased a gun and shot himself. We missed the signs and the warnings. We thought that his care was in competent hands and minds. Guilt followed – what could we have done? As a nurse, why was I not more involved? Why was I so absorbed with my own hectic life that I ignored his threat of suicide? The ‘whys’ remain unanswered, but stress killed Matt!

I wish that I had been there, to hold a hand, to wipe a brow, to offer support. On February 18, 2011, a phone call from my sister changed my life. At a car dealership, purchasing a car with automatic transmission in lieu of my stick shift, I sat in front of the salesman with my purple cast and a black eye to match it. I had fallen on ice a month before, and the healing process was slow.

Time stood still as my sister said, “Something happened to Matt.” Matt was her 40 year old son and first-born child, a prominent Seattle-based attorney, a husband and father to 2 young children. Anticipating news about an injury, illness, or accident, I listened, stunned, as she said, “Matt is gone.”

“Gone, I asked?” Yes, gone. Matt took his life that afternoon. Why? He had everything going for him – a promising future and a wonderful family. He was a brilliant corporate attorney committed to his clients and to building relationships between the US and China. He traveled frequently and worked long hours, like many of us do – stressful? Of course, it was. Triggered by the downturn in the economy and the implication for his practice, Matt became depressed and an acute anxiety disorder deprived him of the ability to sleep or to concentrate on his work. Stressed to the limit, he sought treatment for these problems from mental health professionals. “Stress” is a well-known contributor to mood, mental disorders, and suicide risk.

After months of trying new medications, none of which seemed to help, he felt hopeless. He took a disability leave from work, and then he stressed about his eventual ability to re-enter his profession. He lost his sense of self-worth and felt ashamed. He withdrew from his family and friends. The mental health professionals Matt was seeing were not prepared to manage or to treat his suicide risk. Knowing of Matt’s suicidal intent, they had an obligation to act decisively, empathically and collaboratively to ensure his safety.

Sadly, most health care professionals receive little or no training in how to assess, manage and treat suicidal individuals. This is clearly a public safety issue. The suicide rate increased by nearly 30% in the last 12 years; many of the victims are our nursing peers, family members, or friends.

The "Matt Adler Suicide, Assessment, Treatment and Management Act of 2012“ is the first of its kind in the nation. A Charitable Giving Fund has helped to launch Forefront: Innovations in Suicide Prevention at the University of Washington. Forefront tackles hard lessons learned from Matt’s death to save
lives. Health professionals need more training in the assessment, management and treatment of clients who are suicidal. No other lesson is clearer from Matt’s story. The conversation about stress management, mental health and suicide needs to change. Matt had a serious medical condition yet, he felt ashamed to take time off to recuperate from it. Suicide prevention is a community responsibility and a nursing imperative! Most people who die by suicide talk about their pain and suicidal thoughts. Matt’s family and friends wish they had this awareness.

Bereavement from suicide is an especially difficult type of trauma to experience. Matt did not want to die. Rather, he saw suicide as the only way to end his pain. The Act requires State Board of Psychology licensees and State Board of Social Workers Marriage and Family Therapists, and Professional Counselors licensees to complete at least one hour of their already existing continuing education requirements in the assessment, treatment and management of suicide risks. Why not include nurses and others who provide direct care? Recently passed in Pennsylvania, I am working to pass a similar bill in Maryland. Meanwhile, suicide remains a potentially preventable public health problem. Suicide is the second leading cause of death in people from age 10 to age 34.

And, our young people, our future, are at risk! Adolescent depression is increasing at an alarming rate. Teens are prone to stress, and depression stemming from bullying, academic requirements, relationships, and pressure – often placed on themselves by themselves.

I wish that I had been there…to hold a hand, to offer comfort, to understand the stress, the risk, and the outcome! I’m a nurse, and I could have done better!

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Abstract Summary:
Stress can kill you! Matt never wanted to die; he simply wanted to remove the pain. He sought help from professionals, but their help was not enough. In this compelling session, attendees will gain knowledge of current initiatives to ensure professional competencies in suicide prevention and awareness.

Content Outline:
1. Introduction
   1. Awareness
   2. Incidence...numbers matter
      1. Historical Perspective
         1. All lives matter
         2. Why
      2. Healthy Environments
         1. AACN Initiatives
         2. The Joint Commission
         3. The ANA
   3. Why Stress is a Factor
      1. Good or bad
      2. Link to depression
      3. Impact of environment
   4. Nursing Role
      1. Education
         1. Mandates for competency training
         2. Academia
      2. Clinical
         1. Safety is our imperative
         2. The environment is a critical factor
      3. Leadership
         1. Prevention
         2. Professional help
      4. Research
         1. Descriptors
         2. Timing
         3. Monitoring
         4. Metrics

• Conclusion
  1. Nurses and nursing can make a difference
  2. Next steps and our future in a stress-less environment

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**Professional Experience:** As founder and president of the Global Education Development Institute (gedinfp.com), the presenter has extensive experience in international health. She developed the International Nursing Leadership Institute (INLI), and was instrumental in the creation of multiple nursing associations and nursing programs throughout the NIS/CEE countries. She speaks and writes globally on sustainability and the environment.

**Author Summary:** Sharon is one of 2 nurses in the world to hold the Certified Speaking Professional (CSP)/FAAN credential. Author of B is for Balance, 2nd edition, she speaks and writes about the impact of the environment on health and safety. She brings over 40 years of nursing experience in all clinical and academic settings to the program. She is Immediate Past President of the National Speakers Association-DC and Vice-Chair of the Certification Council.