

Oregon Trail Wagon Ruts

## **Jensen Suicide Prevention Peer Protocol - The JSP3<sup>©</sup>**

*Working together to keep people alive until they can keep themselves alive.*

JSP3<sup>®</sup> found in ***Just Because You're Suicidal  
Doesn't Mean You're Crazy: The Psychobiology of Suicide***  
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The JSP3<sup>®</sup>, The Jensen Suicide Prevention Peer Protocol, is a copyrighted title and program for prevention of suicide. It is not meant to take the place of medical or psychiatric attention for the suicidal individual. Proper psychological evaluation and treatment should be pursued as soon as possible in each case dealing with impending life-threatening behavior.

[Note: In this booklet, the term “suicidality” refers to suicidal thoughts, warnings, attempts and death by suicide.]

### REMEMBER THE **RED FLAGS**: ***IS PATH<sup>2</sup> WARM<sup>2</sup>?***

**IDEATION** – threatened or communicated thoughts of killing oneself

**SUBSTANCE ABUSE** – excessive or increased use

**PURPOSELESS** – no reason for living

**ANXIETY** – agitation, insomnia

**TRAPPED** – feeling there is no way out

**H<sup>2</sup>OPELESSNESS & H<sup>2</sup>ELPLESSNESS** - believing that the situation won't improve & a feeling of helplessness to make any difference at all in changing the situation.

**WITHDRAWING** – from friends, family, society, isolating

**ANGER (UNCONTROLLED)** – volatility, rage, seeking revenge

**RECKLESSNESS** – self-endangering, risky acts

**M<sup>2</sup>OOD CHANGES &/or M<sup>2</sup>EDICAL CHANGE (DRAMATIC)** - depression followed by calm or unusual happiness, mood shifts &/or unremitting pain or unresolved medical issues or functional impairment.

Be sure to *take action*. Do not leave the person alone. Seek help by calling the National Suicide Hotline at **1-800-273-8255 (for Military dial “1”)**

The JSP3<sup>®</sup> is a coalition consisting of the suicidal person and approximately three trusted concerned individuals who join together to keep the suicidal person alive until the suicidal person can keep him/herself alive. **The JSP3<sup>®</sup>** requires mutual and total **COOPERATION** and **HONESTY**.

**If you are the suicidal person...realize that your suicidality is not your fault.** Suicidal thought is basically a neural pathway that has developed in your brain as a result of being overwhelmed with untenable situations that seemingly have no resolution. Thinking about “not being here” (freedom from the pain of hopelessness) releases reinforcing endorphins in the brain. You automatically feel better and continue to form a deeper pathway each time you return to the thoughts of taking yourself out of the unrelenting problem(s). Just as the Oregon Trail wagon ruts (see front cover photo) were formed by repeatedly taking the same route over time - the suicidal neural pathway with each thought pattern becomes deeper and deeper over time. **It is not your fault. You did not know what was happening** – until now. Your brain has been hijacked by a purely neurological reinforcing chemical process.

You may now have developed a deep depression. You may benefit from an antidepressant to think better and advocate for yourself. However, not everyone who is suicidal is depressed. Suicidality can inadvertently become an effective but eventually a very deadly coping mechanism.

Now that you know this, to save your own life you must relinquish your isolation to let others who understand this neurobiological phenomenon help you retrain your brain. You will come to understand what is going on in your head. You'll find approximately three people who are willing to help you retrain your brain. Everyone will commit to **telling**

**the truth and doing what the combination of you agree to do.** You are now on the road to recovery.

This is your life we're talking about.

***This is your chance to get control over your hijacked brain.***

Here is what you do to help yourself stay alive. You are forming a confidential coalition, an alliance. You choose people who you can trust and who fit the following criteria.

***Members of your JSP3<sup>®</sup> are:***

- ***Honest and compassionate***
- ***Nonjudgmental and understand the process of suicidal thinking***
- ***Confident and know what steps to take to safeguard a life***
- ***Able to hold healthy and firm boundaries***
- ***Trustworthy and respectful of confidentiality***
- ***Positive and supportive of even the smallest move towards healthful change***
- ***Hopeful and able to convey hope by building self-efficacy (discussed later)***
- ***Willing to work with the suicidal individual to problem-solve with reciprocity***

**If you are the concerned other**, the friend or relative of the suicidal person and the suicidal person has stated s/he will accept your help, this is what you do.

- You help identify two other concerned people besides yourself and get them together at the same time and in the same place with the person who is suicidal. From this list you derive a resource list of names and numbers to call when in crisis. Every JSP3<sup>®</sup> member has a copy of this list and the

suicidal person keeps it on his person at all times. It is helpful if there is a designated point man who takes charge of getting all resources listed correctly.

*Note: The suicidal act does not have to be imminent before forming a JSP3<sup>®</sup>. As a matter of fact, it is easier if it isn't and you are able to do this at the first sign of admitted or suspected suicidal thought.*


- You make it clear this is NOT a pity party or “let’s all get together and feel sorry for the suicidal person”. Suicidal people are very sensitive to that pity-attached blame and shame. Keep it above sentimentality. This is serious and compassionate business. You are helping someone retrain his or her brain, don’t forget that.
- **COMMUNICATION** - If the suicidal person does not understand what is going on in his/her brain, it is your job as a concerned other to educate. It is not their fault. It is a matter of **EDUCATION** that brain chemistry is hijacking the thought processes and is preventing problem-solving. You must understand the psychobiology of suicide to explain it to others – so learn it and fully understand it. A more in depth explanation of the psychobiology of suicide can be found in the book, ***Just Because You’re Suicidal Doesn’t Mean You’re Crazy: The Psychobiology of Suicide***. (See booklet back page for further information on how to order the book.)


*NOTE: The suicidal thought pattern can be very long-term. It is appropriate to form a JSP3<sup>®</sup> at the initial disclosure of suicidal thought. As a matter of fact, an expedient JSP3<sup>®</sup> formation can save a life, bring recovery and save years of isolation and anguish.*

*You can go no further until everyone is on board understanding the brain process involved with suicidal thought patterns.*

- It is understood that you are in this life-saving protocol together. However, you are not signed on for life. There may be situations in a JSP3<sup>®</sup> member's life that prevent him or her from attending to the needs of anyone else. That must be honored. Another person can come on board temporarily or even permanently. Life happens and all JSP3<sup>®</sup> members need to know everyone can tend to their own needs first. AND the suicidal person must know that your help is NOT causing you undue hardship. The greatest benefit of this being an alliance of a minimum of three is you have others equally in this with you to rely on and consult with.

### **A JSP3<sup>®</sup> Member's Main Job is**

 **Tell the truth. HONESTY** is always the best policy. Trust is ultimate. You cannot have it unless everyone is genuine and everyone is being honest.

 **Maintain CONFIDENTIALITY.** You must not discuss the JSP3<sup>®</sup> alliance outside of the JSP3<sup>®</sup> group. The suicidal person must know that this arrangement is fast and solid. Loose lips sink more than ships, they can destroy an alliance from the inside and do more damage than you can imagine. Do not confide in anyone who does not absolutely need to know and reveal only with the permission of the suicidal person. It is an infinitely small world, made even more intimate by social networking. **Do not post** JSP3<sup>®</sup> info or post thoughts or directions on any

social networking site or application. Trust is vital. It is maintained by confidentiality. Be wise.

👏 Harbor, instill and encourage hope, point it out and celebrate it.

👏 Be a good example of critical thought process in

## **PROBLEM-SOLVING.**

*Critical thinking in problem-solving means you look for alternate ways of looking at a problem, approaching it with a hopeful and positive attitude. You look beyond the initial problem to anticipate unintended consequences and ask for help contemplating solutions. You do not stop at one answer but look to put in place contingency plans in each incidence.*

👏 Be a good example of self-reliance, encouraging self-efficacy. No matter what they have accomplished in life, suicidal people are often convinced they are inept losers. You can prevent that self-image from perpetuating by reminding that person what they CAN do and HAVE done and CAN do again. That is what improving self-efficacy means.

👏 Listen to their story as many times as they need to tell it. Nonjudgmental listening is the most valuable gift you can give. Listen carefully for any changes in it that might reveal hope. Do not be tempted to jump into problem-solving before you know that the suicidal person feels understood.

*Listen for the reasons the suicidal person will give you that have prevented them from a previous attempt. Remember that and feed that reason back to them at every turn and with every variation you can. It works even when they know you are doing it.*

👉 Encourage and help the suicidal person to get a therapist if they do not already have one and arrange to have a JSP3<sup>©</sup> member to take them to the appointments if possible.

*At some early point, if possible, the entire JSP3<sup>©</sup> alliance should meet with the therapist to get everyone on the same page. Not all therapists know about the JSP3<sup>©</sup>. The coalition may have to be explained, but a good therapist who has experience in working with suicidal clients will welcome the input and marvel at the benefit. It is a hugely cohesive and powerful thing to all meet together for one unified purpose. Sometimes that meeting alone effects an amazing healing.*

👉 It boils down to **COMMITMENT** to spending time with the suicidal person doing productive or fun things. What you want to effect is a change in the endorphin-creating thought process. In other words you need to help find other rewarding activities that replace suicidal thought. Be careful to watch for and anticipate unintended consequences. For instance, video games seem like a good choice but ask yourself: Does gaming promote healthful interaction? Does it provide uplifting reward? Does it affirm life? In some instances, yes, but usually it becomes an isolative device.

👉 Do not hesitate to be **OPEN FOR RECIPROCITY**- ask the suicidal person for help on projects or for advice. Research shows a person is more likely to ask for help if they know they have a prospect to return the favor in the future. Do this in earnest, though, otherwise it will seem contrived and fake and it will achieve just the opposite effect.





## **Follow this prescription for mood elevation.**

- 1. *Read newspaper funnies or sports section (no editorials, no front section, no political exposes).***
- 2. *Watch funny movies and comedy shows.***
- 3. *Buy some joke books or comic books and read them on the toilet.***
- 4. *Play noncompetitive sports, or make up your own goofy, ridiculous rules and play by them to have fun. Or...walk! Remember, you could convince yourself to walk early in the morning before your brain figures out what you're doing!***
- 5. *If you have pets, pet them. If you don't, volunteer at the Humane Society where the animals need human interaction.***
- 6. *Hang around winners and stay away from energy vampires. Energy vampires are people who make you feel empty when you are around them. You know who they are. They're downers.***
- 7. *Spend more time with people who make you laugh, stay away from toxic environments and obnoxious people, places and things.***
- 8. *Remain alcohol free and do not use illicit drugs. Using alcohol removes inhibitions, heightens irrationality and promotes impulsivity. It lubricates the already slippery suicidal neural pathway.***
- 9. *Verbally state or journal every night what you are thankful for that day and for what you have accomplished – even for brushing your teeth.***
- 10. *Start and end every day with a laugh.***

👏 Do what you can to stay away from mind altering drugs and alcohol. NEVER take a suicidal person out for a beer! Even if they don't seem suicidal at the time. YOU CANNOT JUDGE A BOOK BY ITS COVER. You do not know anyone's inner atmosphere from their outside appearance. Mind altering drugs and alcohol remove the only stop gap measures a sober person has. Impulsive behavior is hallmark of a mind under the influence. Do not be party to it and do not tolerate it. Go for pie and coffee.

👏 **COOPERATION** means understanding that you do not have to jump to be with the suicidal person every time s/he calls. But you must be willing to tell him/her that you cannot respond now and elicit a firm promise that the caller will immediately call the next JSP3<sup>®</sup> member or resource on the list. If you are the last JSP3<sup>®</sup> member called and cannot respond, you must confirm that the suicidal person calls the next resource on the list. (You must not feel guilty if you truly cannot respond. You can ask the suicidal person to call you back if they get no one available in their search for help and you can problem-solve from there.) Never hang up without knowing for sure that call is going to be made or checking on it. Elicit honest commitment to this process.

👏 Do whatever you can to remove weapons or limit lethal means including unneeded medications.

👏 Be willing to call 9-1-1 or get them to the emergency room (ER), if no other resource is available.

### **The Indelible Neural Pathway**

One thing both the suicidal person and the JSP3<sup>®</sup> members have to understand is once a pattern of suicidality has developed, that neural pathway will always be there. Once a neural pathway is established we don't yet know a way to

eradicate it. Like those wagon ruts in the bedrock, we probably won't live long enough to see them erode away by natural elements. But if we decided to, we could build a safer road in another place that got us to our destination alive and secure without the vulnerability being caught in those ruts like our ancestors when trying to evade marauding forces.

So what it really boils down to is once that neural pathway is set and when in a vulnerable emotional dilemma, the default thought pattern will be that worn pathway.

However, if you can continually intervene with education and a committed plan, suicidal thoughts will be dismissed and averted repeatedly as productive problem-solving shifts into action and new neural pathways are forged.

Suicidal thoughts are clear signals to seek help with problem-solving, to call your JSP3<sup>®</sup> members and get advice on the current situation.

The upside is once you begin a pattern of problem-solving, you will turn to that neural pathway instead. You must use the resultant muscle memory and make that pathway as reinforcing and endorphin-creating as possible until you can collapse the darkness of hopelessness and helplessness into a nanosecond.

It takes knowledge and unyielding vigilance but the neural pathway loses its potency simply from lack of use. Much like a resolute person in recovery from any addictive process, a person who suffers from suicidal thoughts can intervene on themselves and save their own life. You see it in Twelve-Step meeting rooms every hour of every day. It can be done. And forming a JSP3<sup>®</sup> can help.

## **For the suicidal person:**

Don't panic the first time the thoughts emerge – you know what is happening in your brain and you now have the control you have prayed for. You know what to do. Contact your JSP3<sup>®</sup> members.

## **For all members of the JSP3<sup>®</sup>:**

Remind the suicidal person of the agreement that they must do this in order *to* begin to extinguish addictive suicidal thinking and start being receptive to other alternative problem-solving techniques. Remind the suicidal person that getting out of the rut by consciously stopping suicidal thinking is essential to finding other solutions to his or her problems. As long as suicide is on the table, there is no room for other solutions.

Agree to tell the suicidal person the truth if you are not in a position to help at that time and to agree that the suicidal person requesting help will follow the agreed upon plan, and contact the next resource person on the list.

Advocate for them or ask a more informed person to do so. Do not accept their worry of annoying you. Remind him/her there is no need to worry because you are not the only one advocating for him or her. The suicidal person must accept the same help for themselves that they would have so readily afforded you.

**REPEAT:** It is essential that you elicit the firm and honest agreement to call the next resource on the list if you are otherwise engaged and cannot respond at length.

Ask the suicidal person to identify, commit to and always keep approximately 3 people on board with whom he or she can be totally honest.

Ask the suicidal person to try to understand what is going on inside his/her brain – that it is not his/her fault and consider the biology of acclimation and addiction to the endorphins that suicidal thought engenders.

Ask them to talk about the pain when they are ready, whether it is post-traumatic stress, grief, physical pain, relational or some other combination. Remind them they not only can but should talk about it. Assist the suicidal person to work out of the suicidal rut by listening, being proactive in checking in, being active in spending time with the individual. In addition, get them to a psychologist, psychiatrist or therapist for evaluation and treatment.

Listen for and find the key to what has prevented the suicidal act in the first place. That's the hook. Use the hook every time you can. Remind the suicidal person of it at every turn. Perhaps there is a sense of responsibility to children. Sometimes just a reminder of how it would affect you is powerful enough to stop the thought pattern if only temporarily.

There are a minimum of three JSP3<sup>®</sup> members on board at all times even though they may change over time. It takes time and effort and sometimes the JSP3<sup>®</sup> safety net people have their own challenges to deal with.

The suicidal person must respect the plan and the commitment of the members of the JSP3<sup>®</sup> to help pursue a healthful life and new solutions. No one walks out – ever. Even though some shouting may occur. No one brandishes weapons – ever. Remember words can cut deep, so think first. If you shout, shout how much you care. This is agreed to. Everyone is working towards the same successful life-affirming solution.

Whenever the suicidal person is having suicidal thoughts or feeling like hurting themselves through passive means (death by risky behavior or not trying to avert a deadly situation), s/he must contact the first JSP3<sup>®</sup> member on the list. The calls must continue following the established list until a real, human, able safety net resource is reached. No excuses.

**The absolute agreement between the JSP3<sup>®</sup> members and the suicidal person:**

The last contact on the list is the closest emergency room (ER) or 9-1-1. Commit to it if needed. Do not be afraid. Many people who overdose call 9-1-1 on themselves when they know they are getting ready to make the biggest mistake of all. Agree to do it ahead of time. Take it out of anyone's hands in the heat of the moment. The decision and agreement is already made and confirmed. Everyone knows what they must do. Worry about the consequences later.

Finally, to help you remember the protocol, think  
**“Foresee Hope” = 4C-HOPE**

**4C = COMMITMENT, COMMUNICATION,  
COOPERATION, CONFIDENTIALITY**

**H =** Honesty is the key all around.

**O =** Open to Reciprocity – Asking the suicidal person for help in turn helps them to ask for help.

**P =** Problem-Solving – Working together to identify problems and create solutions

**E =** Education – Understanding and being able to explain what is really going on in the suicidal brain (the psychobiology of suicidality).

When you really think about it, the JSP3<sup>®</sup> is friends getting together with the agreement to help for a specific purpose in specific ways. Very simply, it is structured to help someone retrain his or her brain. You'd help someone if they had traumatic brain injury or post-traumatic stress. This is the same thing.



***A personal message from the author***



*Nothing is worth making that horrific mistake of not intervening on your desperate impulse to be free of pain. Would you do it for a friend? Would you do it for your son or daughter, sister or brother? How about for a complete stranger? Get thee to safety. You have the power and the means now to do it.*

*When you really think about it, the JSP3<sup>®</sup> is friends getting together to help friends in specific and powerful ways. That's all it is. It is structured because this is an effort to help someone retrain his or her brain – to free them from that neural pathway, bringing them to a new understanding of their thought processes.*

*The difference is that no one has ever told you how to help or get the help for yourself. I've given you everything I know about surviving suicidality. I learned it out of God-directed "pure luck" and a little education. You now have the tools to save yours or someone else's life. If you know someone or you, yourself, are having thoughts of suicide – reach out. Form a JSP3<sup>©</sup> today.*

*It can be a long and arduous process as it was for my friends. I gave them a hard time and they never ran. I lost it and disappointed them and myself many times and they never gave up on me. They evoked from me honesty and gave me hope and that is what proved to be the backbone and the success of this protocol. They kept me alive until I could keep myself alive. I did not know then I would be giving back now in the only way I could – by helping others save lives.*

*With the company and support of our fellow humans, we are buoyed by a mutual cleansing, a healing spirit – by being an integral part of the whole. Know that tomorrow you may be in need of what you have given today. So, as freely as you have given at this time, may you then wisely ask and graciously receive your gift in return. For we know that...*

*No man is an island entire of itself.  
Every man is a piece of the continent,  
a part of the main.  
If a clod be washed away by the sea,  
Any man's death diminishes me,  
because I am involved in mankind.  
And therefore  
never send to know for whom the bell tolls;  
it tolls for thee.*

*--- John Donne*





*This booklet can be downloaded for free from <http://www.jsp3.org>.*

*You can read more about the psychobiology of suicide and the development of a JSP3<sup>®</sup> in the author's book:*

***“Just Because You’re Suicidal Doesn’t Mean You’re Crazy:  
The Psychobiology of Suicide”*** ©2012 Randi Jensen at  
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# ***NOTES***

Coming together is a beginning, staying together is progress...



Working together is success. *Henry Ford*

## ***Jensen Suicide Prevention Peer Protocol JSP3<sup>®</sup>***

***Easy to learn... Life-saving to implement...***

***Do it NOW... you cannot afford to wait.***

If you would like a training on the JSP3<sup>®</sup>, whether you are a counseling professional, a concerned party or an agency, you can get a four hour training on how to form, implement, maintain and support a JSP3<sup>®</sup> team. Keep individuals alive until they have the power and the knowledge to keep themselves alive.

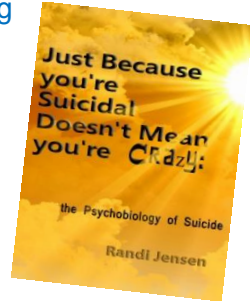
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JSP3<sup>®</sup>**

**206-719-1894 [rjjrb@comcast.net](mailto:rjjrb@comcast.net) [www.jsp3.org](http://www.jsp3.org)**

**AVAILABLE NOW!**

**“Just Because You’re Suicidal Doesn’t Mean You’re Crazy: The Psychobiology of Suicide”**

“With eloquence, compassion and a big dose of brain chemistry, Randi Jensen’s book provides a rich tapestry of information and support for those struggling to understand suicide. This is possibly the most useful self-help book ever – where else can one learn how to stay alive and help someone else stay alive? A must read for clinicians, family and friends.” – Terry Courtney, MPH, LAc, former Dean, School of Acupuncture and Oriental Medicine, Bastyr Univ.



“The formula of the Jensen Suicide Prevention Peer Protocol© (JSP3©) will save the lives of our Veterans! Finally you will understand what is happening in your brain and will move forward on a plan that works.” Rod Wittmier, founder - National Alliance to End Veteran Suicide

Download to your E-reader or as PDF to your computer at <http://www.smashwords.com/books/view/209400>

Softbound copies available now at Third Place Books in Lake Forest Park, WA.

They can also be ordered online from Third Place Books at

<http://www.thirdplacebooks.com/just-because-youre-suicidal-doesnt-mean-youre-crazy-randi-j-jensen-ma-lmhc-ccdc>

**COMING SOON!**

**“The JSP3© Field Guide for Battle Buddies”**