

November 2022

WE CARE COMMUNITY SERVICES

WE CARE News



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Substance Use and HIV



HIV or Human immunodeficiency virus is an infection and subsequent destruction of the T-cells which are white blood cells of our immune system.

In Singapore, 95% of HIV transmissions in 2020 were through sexual contact, while the rest were being infected through other modalities such as shared needles. Worldwide, people who inject drugs are disproportionately affected by blood-borne infectious diseases such as HIV and Hepatitis C. In addition, with substance use, poor judgement is endemic, and inhibition is lowered, which is a sure path to risky behaviour and unsafe sex.

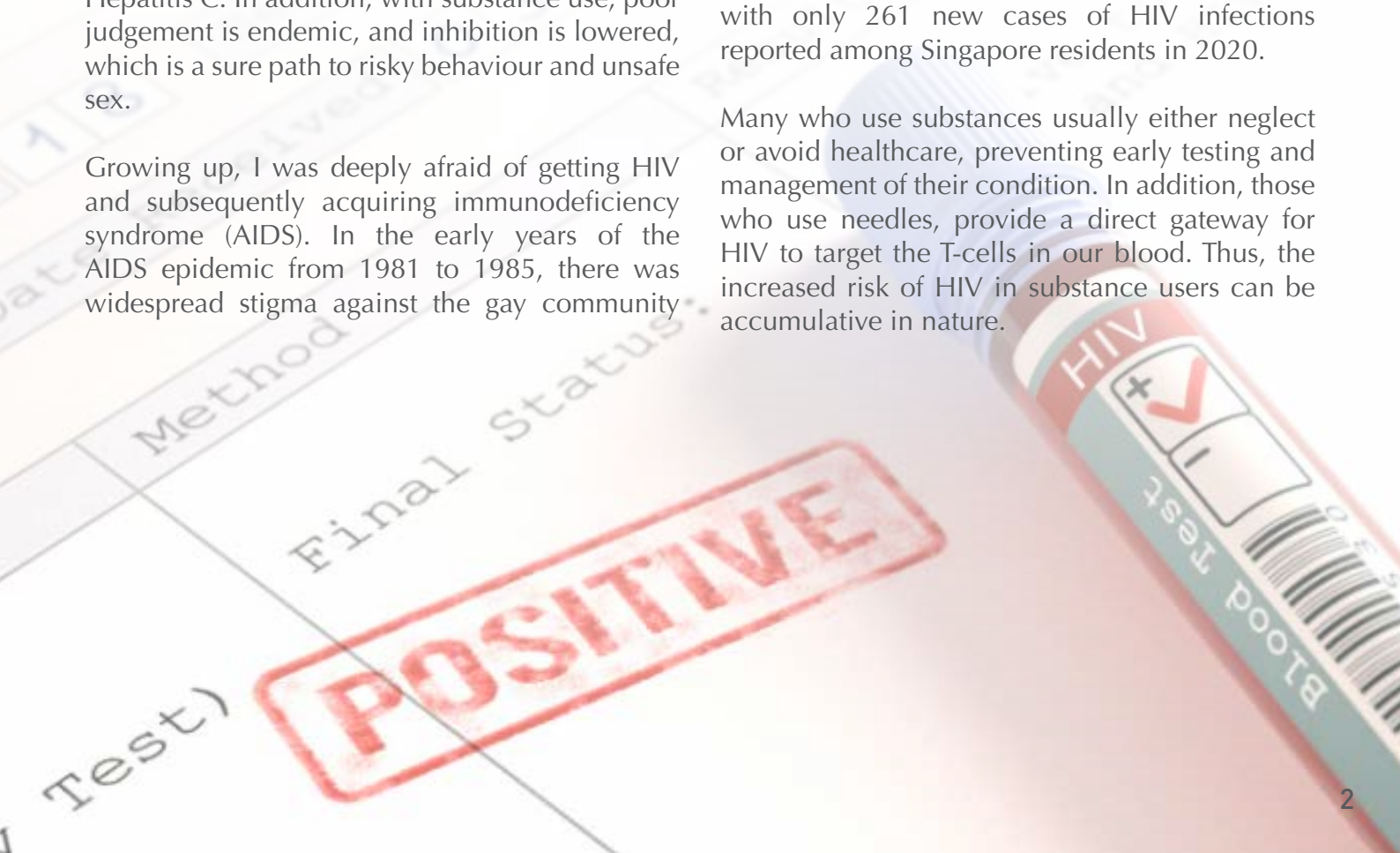
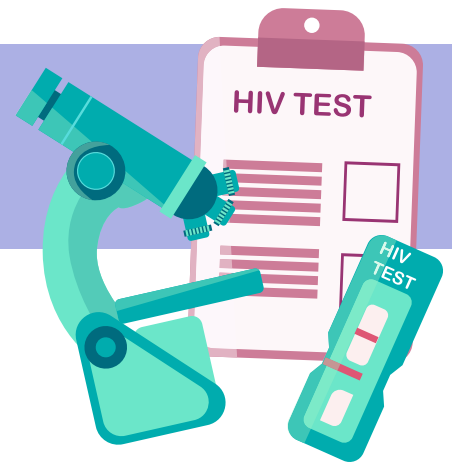
Growing up, I was deeply afraid of getting HIV and subsequently acquiring immunodeficiency syndrome (AIDS). In the early years of the AIDS epidemic from 1981 to 1985, there was widespread stigma against the gay community

as the illness was confined to mostly men who had sex with men (MSM). As it was known as the “gay virus”, I honestly assumed that it would be my inevitable fate to contract HIV.

However, a more thorough search on the internet answered many of my ill-informed woes about my risk. HIV is not something one can casually “catch” through a handshake or sharing a seat with someone. For HIV to be transmitted, there must be exposure of body fluids from someone with untreated HIV to our broken skin or tissue lining. In addition, it can only be transmitted by exchange of specific types of bodily fluids such as semen, vaginal secretions or most commonly blood. I have also learnt that HIV does not discriminate between who you love or share your life with despite its previously high representation in the MSM population.

Getting HIV is something that no one imagines themselves experiencing; even more so in Singapore with only 261 new cases of HIV infections reported among Singapore residents in 2020.

Many who use substances usually either neglect or avoid healthcare, preventing early testing and management of their condition. In addition, those who use needles, provide a direct gateway for HIV to target the T-cells in our blood. Thus, the increased risk of HIV in substance users can be accumulative in nature.





When I started addiction recovery, the topic of HIV began to creep into my support group discussions. I only tested for HIV when I started my recovery in 2019. Having spent much of my life self-medicating, my last HIV screen was during my national service time. In addition, I came to share meetings with peers living with HIV and had started to advocate for their health. Coming from a traditional Asian household, the “birds and the bees” was something that I had to discover on my own. Along with making mistakes along the way, it was only after some work with recovery that I found the courage to know my status. During the screening, the anticipation of the result was the worst of it, even though the process was surprisingly straight-forward and required only a drop of blood from a finger.

Today, with the availability of antiretroviral treatment, HIV is no longer a death sentence. Modern medication has allowed persons with HIV to manage their viral load and live long meaningful lives. However, HIV transmission is still a danger in Singapore and the world at large as many are still living undiagnosed, untreated, and unaware. Thus, I prefer to remain updated on the risks and challenges it presents, and not become complacent.

From August 2022, affordable self-test kits have become available for purchase from DSC (the Department of Sexually Transmitted Infections Control) Clinic and AFA (Action for Aids). In addition, free anonymous testing is available in Singapore for those under the age of 21 at 10 locations. Thus, testing for HIV has become more accessible for my peers struggling with addiction.

For more information on HIV/AIDS, please reach out to **Action For AIDS at 6254 0212**. If you are a person with addiction, you should contact **WE CARE at 3165 8017** or email us at help@wecare.org.sg.

About the writer:

Since finding about WE CARE earlier in 2022, Bear (who uses they/them pronouns) has been recovering and volunteering at WE CARE while maintaining active participation in the local SLAA LGBT group. Even though they are easily distracted, they are an energetic presence at our centre. Their interests have recently extended to crocheting and fishkeeping.

subject such as exercise by a
a short piece of writing such a

HIV

human immunodeficiency virus
the cause of AIDS

Sands for Singapore Charity Festival 2022

Over 3 days from Thurs Sep 8th through Sat Sep 10th, Marina Bay Sands resumed its Sands for Singapore Charity Festival 2022, after a 2-year break.

The festival featured free performances every night, including Spectra – Marina Bay Sands' light and water show – and the all-day Giving Marketplace. The Marketplace provides an opportunity for non-profit organisations, social enterprises, as well as local businesses to raise awareness and funds for charity.

As the festival coincided with the Mid-Autumn festival, Sands gave out free lanterns for those participating in the Heartstrings Walk, and also at its Mooncake booth. The Lily Pond at the ArtScience Museum was also lit with 500 lanterns. The festival culminated in the Community Chest Heartstrings Walk and Vertical Marathon, which is co-organised by Sands. **WE CARE** participated in the 4-km walk around Marina Bay and fielded almost 30 participants.

Sands reported that roughly 5,000 visitors attended the 3-day festival, which raised S\$4 million, taking the total funds it has generated, since the festival began in 2013, to over \$31 million.

WE CARE had a distinctive booth next to the Society for the Prevention of Cruelty to Animals (SPCA), and all our artwork and handicrafts were donated by our community of beneficiaries, volunteers and staff. There were paintings, scented candles and painted stones; and we also raised funds for our Charity Movie here. All in all, over \$4,000 was collected.



Visitors to the **WE CARE** booth

Victor, who helps out at the centre, was impressed that “we get to keep all of the funds that we raise.” Volunteer artist Yen Phang, who helped our beneficiaries to get ready for the festival, and also curated the items on display, felt that the festival was beneficial for the centre, and also for our beneficiaries. It was “a good learning experience and it prepares **WE CARE** for future events like this.”

Another volunteer Simon was “glad to see lots of youngsters, young adults and even seniors involved in charity work.”

Beneficiary Kym who created some of the items for fund-raising was just “happy to be able to give back.”



Staff and volunteers at the Charity Festival

THE FREEDOM OF CHOICE

Recovery Gives Me The Power To Choose (Part 2)

“ Personally, **WE CARE** is very important to me. The people, the programmes, the guidelines and regulations, even simply by being there at the centre, makes me feel like I am being transported to a different place. I am not only surrounded by people who understand but also people who care. I know that I am cared for and loved because of their sincerity and genuineness. I don't think I will be able to cope and stay sane juggling my work, family, school and recovery without **WE CARE**. My counsellor allows me to go at my own pace and I can reach out or drop by whenever I need support. This trust given to me by my counsellor and the staff at **WE CARE** as well as them holding a space for me is truly significant in my recovery journey. ”

With the ongoing COVID-19 pandemic, most activities have shifted online. To Sha, there is a huge difference between physical and online activities. Sha believes that by participating in activities physically at the centre, one can truly experience the healthy and divine tradition and culture at **WE CARE**. He feels very safe when he is there physically because of the prevailing rules.

One's anonymity is protected, everyone is advised not to lend or borrow money and encouraged to be mindful and draw healthy boundaries with each other. From what Sha has seen and observed, recovery at **WE CARE** is a peaceful ongoing journey. The safe space, rules and regulations afforded by **WE CARE** makes Sha feel comfortable to come by the centre. No one at **WE CARE** is identified as “having more experience” or “knowing things better”. Everyone is treated equally and mutual respect is observed. Sha gets to experience this at the centre physically and it is also why he keeps coming back to **WE CARE**.



Sha gains inspiration from others whom he has interacted with in recovery. The journeys and stories of those in self-help groups both in the local and global setting, is a huge motivating force for Sha. When Sha gets to hear and know of people who have managed to achieve 25 years of sobriety, it becomes a self-reminder that recovery is very real.

Balancing a full-time job and part-time studies, financing his own place, having a good relationship with his family - Sha has made great progress in his recovery journey. Things are very different now and seeing these changes keeps him motivated to continue with his current lifestyle.

As human beings, we always have a choice. This is Sha's belief. We have control over the decisions we make and how we react to situations in our lives. Sha recounted a story about his time in rehab. He remembered seeing someone who was constantly checking in and out of rehab and remarked to the warden that “It must have been the drugs.” The warden changed Sha's perspective, “No, it's not the drugs. The drugs did not go to the guy, the guy went to the drugs.”. That was when Sha realised the difference and after reflecting, he learnt that he was constantly finding excuses and doing a lot of blaming. He was blaming the substances, the situation and everything else for

his choice of using. With this realisation, Sha did a very courageous thing by going on to question and confront himself.

“I am my worst enemy. I asked myself why, why am I doing this, why did I choose to use substance? Looking back, the problems had always been there since I was a child. But I never confronted these problems even when they continue to exist in different phases of my life. I chose to just exist and not live. I just wanted to numb myself and avoid acknowledging or resolving these issues. What I’ve learnt is it is not just about finding a right time to confront your problems but also about who you disclose them to. It will be better when you are approached by the right people and institution, so that they can provide a safe space for disclosure and seeking help.”

When asked about the challenges he experienced in his recovery journey, Sha recalled his early recovery days. After completing his 6 months in detention, those in his social circle were curious about his whereabouts during this period. At first, Sha was conflicted. He didn’t know if he should tell them the truth or make up some excuse.

“I shared the truth with some people who I loved and trusted. I knew some of them had gone through something similar, but when I told them, their response was ‘That was really stupid of you’. Hearing that, part of me felt that it was a setback but I also felt much lighter. Right then, I knew where I stood in their lives, I saw who truly matters and I knew that sharing with these people was no longer important. I think that before sharing something so personal, I have to be confident with the decisions I make. I know that I made the right decision for my own betterment. This also helped me learn that I don’t have to explain myself all the time. I can be honest to those who appreciate and understand my honesty and decisions.”

Today there are no regrets about the decisions he made. Sha acknowledged that understanding this took some time but sometimes all we need is time and space to figure things out.

As Sha has recounted, he also felt disappointed that he received the same judgement and treatment when he surrendered on his own accord. After thinking about this experience, Sha explained how he came to accept it. He used an interesting analogy of a parent-child relationship to explain it: If he were a parent and his child had made a serious mistake, he would also put his child under probation or timeout to see if his child is reflecting on the mistake.

“As much as we don’t want to acknowledge this, we are a very judgemental society. We want to see if this person is serious about changing and making the effort before we help them.”

It’s been a very beautiful, painful and interesting journey for Sha. Sha believes that as a society, we can be a force for change and reduce the stigma associated with substance abuse. In Sha’s journey, it took time for people to trust him and understand what he went through. Some of them stayed and others left. Thanks to this, he can see things clearer. Although these are setbacks, Sha maintains that they are important checkpoints that he has to get through and he has no regrets.

The term ‘Recovery’ has many definitions depending on how one sees it. To Sha, recovery is a journey of growth. Now, Sha is no longer the 28-year-old version of himself, and 32-year-old Sha is very excited for October 2021. It will mark his 3rd year of sobriety from all substances. He has come a long way. There are many people he made miserable during his using days. In recovery he has the opportunity to approach them to apologise and give them his word that it will not happen again.

Recovery is not an easy journey and it is truly going to take some time to get there. Sha shared that the night before our interview, he had a horrible dream of using substances again. He was shaken because even after 2 years into recovery, these triggers still affect him. As tough as recovery is, it is also what brings Sha hope and motivation. He is looking forward to achieving 10 years of sobriety and ahead to 20 years, 30 years, and so on.

“Besides everyone who has played a role in my recovery journey, I really want to thank myself too. For going through all the challenges and never giving up. I am always a work in progress, I believe my experience can be inspiring and I want to pass this on.”

Moving forward, Sha is lending his voice and experience to changing society’s perception of addiction and empowering those suffering from addiction to seek help.

Sha notes that sometimes people get uncomfortable when the word ‘Addict’ is mentioned. This is an understandable response because of the stigma associated with this word. He explains that as human beings, we tend to defend habits we can relate to and that serves a purpose for us; but with addiction, it is highly misunderstood. There needs to be a gradual shift in the stigma surrounding addiction and other mental health illnesses, where we start to ask ‘Why’ and try to understand an individual’s reasons for abusing substances.

“As a young person of this generation, we are responsible for creating platforms of awareness. We can help someone feel comfortable to share their stories and respond by directing them to the relevant support avenues. We can let others know that they don’t have to bear the shame because there is nothing to be ashamed of. Addiction knows no boundaries, it can affect anyone. For everyone

who is going through and battling addiction, you are not alone. There are many places and people who are willing to hear you out as well as others who are going through the same thing. **WE CARE** is one such place.”

Sharing his experience allows Sha to reflect on his recovery journey as well and this gives him great joy. It reminds him that it is not the end of the road, he has to focus on taking things one day at a time and he will be able to see his progress.

“I used to feel very shy and was not very articulate in expressing myself. I am very proud of myself for being able to talk about these things now. In the past, after such conversations I would beat myself up, but now I don’t do that anymore because I have shared my part. It doesn’t matter how other people view me. Maybe someone out there needed motivation and encouragement today and hearing my experience gives them that.”

Sha hopes that his experience can help potential readers who are struggling with addiction, to let them know that it is not the end. “Regardless of any obstacles, don’t lose hope.” Sha also wishes that by sharing his experience, it can help to shed light on addiction.

About the writer:

Valerie is a student at NUS pursuing a Psychology degree. She interned at **WE CARE** during the pandemic and is looking forward to working in public health.



choice

How mental health is trivialised by language

“That is so autistic!”, “How OCD of him!”, “Are you bipolar? Why does your mood change so fast?” (OCD=Obsessive-Compulsive Disorder)

It is not a challenge to add on to this laundry list of the casual usage of mental health conditions as adjectives and offhand remarks in everyday discourse.

Whether in the workplace, in schools, or in conversations with friends or family members, many of these casual comments are typically not provoked by ill intent.

Yet they contribute massively to the trivialisation and subsequent normalization of serious, distressing and possibly life-threatening experiences of those actually diagnosed with these mental health struggles.

And the way various mental illness is understood by society is often shaped by ideas from mainstream as well as social media.

For instance, “Sorry, I am so OCD. Let me arrange this nicely” or “I am very OCD, I need to plan my week by the hour” perpetuate the notion that OCD is just a casual adjective used to describe people who like to be overly organised and tidy.

Yet, while a certain subset of OCD does concern itself with orderliness and tidiness, there are so many more subtypes of OCD that are unrelated, such as intrusive thought OCD, contamination OCD or even relationship OCD.

These offhand remarks casually brush aside the intensity of distress felt by people diagnosed with the better-known orderliness OCD, while denying those with the unrelated subtypes recognition.

What remains unseen to the public eye are the painful moments spent ruminating about an obsession, the inner turmoil of thoughts constantly toggling between logic and feeling, the hours spent on executing irrational rituals or compulsions – just to provide a moment of respite from the loud, irrational but haunting thoughts.

Some people who suffer from OCD sometimes experience a feeling of dissociation from reality when they are so caught up in the rumination, the intrusive thoughts and anxiety.

As with OCD, a myriad of mental disorders are unjustly misrepresented today.

Many persons with bipolar disorder, schizophrenia, autism or personality disorders who want desperately to seek help, may be too afraid to do so for fear of being rejected, ridiculed or shunned by their peers. What compounds this reluctance to seek treatment – particularly for those who do not understand what is happening to them – is the irrational dread they are not “sick enough” to seek help. And this is often attributed to the fact that they assess the severity of their distress by the expectations that society sets.

To illustrate, many people use the term “anorexic” to describe someone who is physically skinny. Many subscribe to the pervasive stereotype that



to be anorexic, one has to be underweight. Someone who is genuinely struggling from an eating disorder may feel like they are not deserving of help because they do not fit into society's definition of this mental condition. The normative idea of anorexia is tied only to physical appearance and thus is misrepresented as to be solely about vanity, when in fact it is about so much more than that.

Addiction is another area of mental health disorders that is rife with stigmatization by language. The term "addicted" is itself so casually bandied about, that anyone who enjoys coffee, Netflix or Candy Crush can claim they are addicted. Yet the label "drug addict" is often associated with images of someone who is unkempt, out of control, and permissive. To this day persons with addictions, as well their family and loved ones, feel shame, humiliation and guilt when terms like junkie, alcoholic, former addict, relapse and drug abuse are tossed around.

The direct consequence of stigmatization is that people who are diagnosed with mental illnesses will continue to be seen in a negative light – and frequently perceived as weak, incapable or lacking in moral fibre. What remains unappreciated is the strength, courage and tenacity that persons with mental health issues require to cope with their daily lives.

Moreover, such labelling wrongly reduces those suffering to merely a condition. For people suffering from a physical illness, such as diabetes, we are able to separate the person from the sickness. Why the divergence and double standard when we speak of those with mental ill-health?

One does not have to live through a mental illness to empathize with those who have to navigate through life with it.

There are many ways to support those with mental health issues.

To start, the simplest and most basic of steps would be to refrain from using language that invalidates the experience of people going through life with mental illness.

If you want to show your concern to someone you know with a mental health issue, read up and learn about their condition. Let them know you are there to listen whenever they are willing to share. And ask how they would like to be supported.

A small action on your part can go a long way in making their lives better.



About the writer:

Tammy is studying psychology at NUS and aspires to be a clinical psychologist. Passionate about mental health issues, she hopes to be able to help as many as she can. She empathizes with those who are experiencing such struggles, as she herself has had to deal with ill mental health. Reading, dancing and going to the gym are activities that she enjoys, and she shares that her favourite carbohydrate is bread.



ALONE WE CAN'T, TOGETHER WE CAN.

The Importance of Community in Addiction Recovery

For as long as I can remember, I thought that it was “Me against the world”. It was a line that seemed to appear a lot in movies and songs, which I could really relate to. As I grew up, it was a concept that was reinforced (mostly by my father) again and again until it became one of my core beliefs. As I navigated through 15 years of active addiction, it was this belief, together with several other false beliefs, that formed the basis of my personality. I spent a good portion of life not fully understanding the concept of recovery - I didn't even know about the existence of a recovery community.

Loneliness and hopelessness became a recurring theme in my life because I felt like no one could ever begin to understand the things I was going through. I knew in my heart that I was an addict and I felt like I was doomed to a life of addiction, just like my father. In my mind, there was nothing I could do except to learn how to cope with it.

I spent a good portion of my life on the fringes of society and had grown accustomed to being ostracised by both family and society. Despite my best attempts, I just could not get the people around me to understand. I felt like I was on a lower social and moral standing compared to the general population, and throughout the years suffered multiple kinds of punishments - either from school or law enforcement. These punishments typically involved serving some sort of “time out”. Whether it was a suspension from school or a jail sentence – the belief that it was “me against the world” grew stronger.

From the inside looking out, removal from society may seem like the right thing to do. However, from the outside looking in, I can tell you that it's not. What I've found is that while connection isn't the only component of recovery, it plays a vital role.



Jeremy helping out with the newly installed hydroponics system

“Connection is the opposite of addiction” is a line that I hear a lot and it is precisely this connection that I was deprived of. Connecting with others, especially people who are like-minded and seemed to be telling my story through their lips, effectively ended my isolation and showed me that it was in fact not “me against the world”.

Being a part of a community has benefited me in many ways but the greatest thing it has provided is support - especially in my moments of weakness where relapse seemed like the only option. In early recovery, I found sobriety to be extremely daunting because essentially, I had to find a new way to live. I would have to let go of my past life which included friends or family that had played a big part in my life when I was in active addiction. The idea of admitting that most of what I previously thought was right was in fact wrong, was not only overwhelming but left me feeling hopeless and lonely.

Repeated failures in life had led me to conclude that every decision I made or every endeavour I pursued would inevitably end in failure, so why would recovery be any different?



Well, knowing that I am not alone has made all the difference. Previously, I perceived that asking for help was a sign of weakness. What I did not realise was that it took even more courage and strength to admit that I needed help and that everything was not okay. By being able to tap on the experience and support of a community that consisted of people who were also in recovery, I am rewarded with different perspectives on how a problem can be tackled or in certain situations even the solution to my problem. Those around me are able to see my blind spots and guide me accordingly.

At certain stages, the level of motivation to stay in recovery has wavered greatly. The benefits of a clean and sober life are at times not enough for me to keep going - this is where a community has helped immensely. I have encountered individuals who have had substantial lengths of clean time, who speak with a sense of joy, freedom and peace that I find very attractive. I desperately want the liberation from pain, guilt and remorse that they seemed to have attained - if they succeeded in finding a new way to live, then why not me?

One of the biggest “benefits” that I derived from active addiction was a mental “crutch” that enabled me to function in society. Without this “crutch” that I relied on for so long, I was left feeling lost and precarious, incapable of functioning normally in society. Again, this is where being part of a community proved invaluable. It offered me an avenue to not only relearn social skills but also to develop and reinforce positive habits. In the short term, support from the community acted as the “crutch” which enabled me to walk again. Eventually, I came to the realisation that I never needed a “crutch” in the first place.

Recovery is a tough and demanding journey but with the support and encouragement of a community, I know that the chance of arresting my addiction increases greatly. As I slowly integrate myself more with a community, no longer do I think that I need to fight my battles alone. Instead, I have come to believe that what we cannot do on our own, we can achieve as a group.



At the top of Marina Bay Sands

About the writer:

Jeremy has been recovering at WE CARE since June 2022. His has become a regular face at our drop-in centre, and he is active in 12-step groups. He has helped the centre to adopt a hydroponics system, and when not here, enjoys playing soccer.



Participating in the Heartstrings Walk around Marina Bay

NOCOSO:

The **Non-Contact Sexual Offending** therapy programme



The **Non-Contact Sexual Offending (NOCOSO)** therapy programme combines both individual counselling and groupwork to help clients abstain from non-contact sexual offending behaviours such as voyeurism, exhibitionism, or even non-consensual sharing of sexually explicit material, such as revenge porn.

The intention to start a targeted programme for non-contact sexual offending issues stems from **WE CARE**'s observations that individuals seeking help for sexual offending behaviours often present with symptoms and antecedent behaviours similar to those of clients presenting with Sex/Porn/Love addictions.

WE CARE sees an opportunity in using our experience in process addictions such as sex/love/porn to engage in working with individuals towards preventing future offending.

While punishment and incarceration work to deter individuals from offending/reoffending, they do not necessarily change an individual's predisposed view on offending behaviours/habits, nor do they realign their beliefs on what is acceptable. Interventions such as counselling and groupwork provide clients with an opportunity to work on and discuss issues such as trauma, attachment issues, life-stressors and cognitive distortions that perpetuate the need to engage in maladaptive coping behaviours. (Cooley, 2022; Marshall, 2021; Gannon et al., 2012). The goal of the NOCOSO programme is to help reduce reoffending through these interventions.

The programme also helps offenders to increase awareness of their behaviours, learn about triggers, develop healthy coping mechanisms, establish accountability for their own actions, and develop empathy for victims and other persons harmed by their behaviours.

For more information about the programme, call our hotline at **3165 8017**.

In addition to our in-house programmes, many have also found it helpful to attend autonomous support groups such as *Sexaholics Anonymous (SA)* or *Sex and Love Addicts Anonymous (SLAA)*.

Sexaholics Anonymous (SA)

Sexaholics Anonymous is a recovery program based on the principles of Alcoholics Anonymous and received permission from AA to use its Twelve Steps and Twelve Traditions in 1979.

Sexaholics Anonymous is a fellowship of men and women who share their experience, strength, and hope with each other that they may solve their common problem and help others to recover. The only requirement for membership is a desire to stop lusting and become sexually sober. Their primary purpose is to stay sexually sober and help others to achieve sexual sobriety.

Sexaholics Anonymous meets at 7.30pm on Tuesdays at **WE CARE**. Please email **sasingapore@gmail.com** for more information.

Sex and Love Addicts Anonymous (SLAA)

Sex and Love Addicts Anonymous, or SLAA, is a program for anyone who suffers from an addictive compulsion to engage in or avoid sex, love, or emotional attachment. They use the Twelve Steps and Twelve Traditions adapted from Alcoholics Anonymous to recover from these compulsions. Focusing on their addictive sexual and emotional behaviour, they find a common denominator in their obsessive/compulsive patterns, which transcends any personal differences of sexual orientation or gender identity.

Please email **SLAASG.Recovery@gmail.com** for more information.

Sources:

Cooley, B. (2022). *Desistance from Sexual Offending or Not Reoffending? A Taxonomy of Contact Sex Offenders*. *Journal of Criminology, Criminal Justice, Law & Society*, 23(1), 68–84

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Understanding Suicide

There were 378 deaths in Singapore due to suicide in 2021, down 16.4% from 452 in 2020. Against this overall decline, there was an increase in those aged 10 to 29 who took their lives – and was the leading cause of death for this age group. They make up almost a third of all lives lost to suicide in 2021.

Suicide is a conversation that many Singaporeans find uncomfortable to bring up.

For many of us, it has strong associations with individuals experiencing conflict, disaster, violence, abuse or loss or mental disorders. There is a strong correlation between suicide and mental disorders such as depression and alcohol abuse.

For those who self-harm as a means to cope, they may begin to consider suicide as an option, when the cutting and the burning no longer work as coping mechanisms.

Any one can be at risk of suicide. Among vulnerable groups such as migrant workers, LGBT individuals and those affected by mental disorders, the risk is especially high.

Other risk factors would include previous attempts to take their life, a history of suicide within the family, severe health conditions, distressing life

events (such as a loss of a job, a breakup, death of a close person), family dysfunction, bullying, abuse or unemployment.

How does one know if a person is contemplating suicide?

There are usually warning signs, but not in every case.

“My family will be better off without me”.

“My life is meaningless. No one cares about me”.

Such talk is usually symptomatic of persons with suicide ideation. They will speak of wanting to die, that their lives are meaningless, or that they are a burden to others. They may express thoughts of emptiness, anger, hopelessness, humiliation, being trapped, being unloved, and that life holds no meaning for them.

However, not everyone who is considering suicide will say they are doing so; likewise, not everyone who threatens suicide will follow through with it.

Nevertheless, every threat of suicide should be taken seriously.



Other than talking about it, the person may display signs of considering suicide by their actions and by the way they behave.

They may start to give away their treasured possessions and say goodbye.

They are likely to research different ways of ending their lives.

They may start writing suicide notes in their diaries, in emails and on social media platforms.

They will be moody and will experience outbursts of emotion such as anger, anxiety, humiliation, sadness, irritability or recklessness.

They will lose interest in activities, in socializing, ... and the pursuits which used to give them pleasure.

If you suspect someone may be thinking of ending their life, there are resources you can reach out to after the end of this article.

Remember that more often than not, individuals don't want to end their lives – they just want to get out of the overwhelming situation they find themselves in.

But they can't do it alone.

We close this article with this sobering reminder:

For every person who takes their own life, they will leave behind at least 6 suicide survivors who will have to cope with the life that has been lost.



This article puts together the series of posts that **WE CARE** published on social media to mark World Suicide Prevention Day, which was on 10th September.

Resources

Samaritans of Singapore	1800-221-4444
Singapore Association for Mental Health	1800-283-7019
Institute of Mental Health	6389 2000
SAF Counselling Hotline	1800-278-0022
Tinkle Friend (children)	1800-2744-788
CHATS@ *SCAPE (teens/adults)	6493 6500
Silver Ribbon	6386 1982

In an emergency situation, if an individual is in danger of harming themselves or others, call the following:

Singapore Police Force	999
(SMS 71999 if unsafe to talk)	
Singapore Civil Defense Force	995
Ambulance Medical Service AMS	
6281 8111 / 6206 1188	

Misconceptions

about

ADDICTION

Misconception:

People are only addicted to drugs and alcohol.

Truth:

The most well-known of addictions are often with drugs and alcohol. But there are also other types of addictions around behaviour, such as gambling, gaming, shopping, sex, as well as eating. Regardless of the type of addiction, the issue arises when the person becomes dependent on the behaviour / substance, thereby affecting the individual's life and those around them.

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Misconception:

The addiction is only in the mind, it is a choice.

Truth:

Although it may be an individual's choice to take the first step to consume a drug, the process of becoming addicted is not by choice. The drug creates a powerful chemical reaction in the mind that signals the body to crave it. Thus, the individual develops a need for the drug. This also applies to alcohol or behavioural addictions as the neurotransmitters in the brain create the urge to repeat the behaviour.

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Misconception:

Addicts are easy to identify from the way they look.

Truth:

We often assume people with addiction have poor personal grooming, tattoos and / or are unemployed. This is a common misconception; addicts do not have a "typical" look. In fact, anyone can be addicted without others realising it. A large percentage of people who have addictions are considered "high functioning" by today's standards. They are able to conceal their addictive behaviours but often suffer alone.

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Misconception:

You can overcome your addiction with strong willpower.

Truth:

Addicts are not weak-minded. On the contrary, people with addiction can often be very strong-willed and one cannot overcome an addiction with willpower alone. When a person becomes addicted (to a substance or behaviour), it creates a chemical imbalance in the brain and causes physical and psychological change. Thus, recovering from addiction without professional and long-term help is extremely difficult. It is also important to develop other coping skills and support networks to lead a sober life.

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About the writer: At the time of writing, **Tiernan** is an intern at **WE CARE**. Embracing a mid-career switch, he also volunteers his time by manning the helpline while he pursues his Masters in counselling.



EVENTS HIGHLIGHTS

Recovering together one day at a time.

A snapshot of some of our awesome events in the recent past!



“Batik Kita” Exhibition at Asian Civilisations Museum

Beach Clean-up
@ East Coast Park



Nature Hike @ Fort Canning



National Day Durian Party



The LKY Musical
@ Sands Theatre, MBS



Singapore Garden Festival @ Botanic Gardens



NFT Hydroponics System



SPCA Visit



WE CARE Charity Movie

SEA Aquarium



Sands for Singapore Charity Festival 2022



Weekly Workouts


WHAT'S HAPPENING @ WE CARE

Join us for a fun-filled line-up of upcoming celebrations and activities!

JOURNEY TO THE SOUTHERN RIDGES


Tuesday, 8 November 2022

Meet at: We Care Community Services
Time: 3.00 pm - 6.00 pm
Register your interest with any of our RG's / Khairi.



CHUA 蔡名智
MIA TEE
DIRECTING THE REAL

Experience the Beauty of Singapore's Leading Realist Artist



Venue: National Gallery Singapore
Date: Wed, 16 Nov 2022
Time: 9.30am - 12pm

For My Highness

Join us at a post-show dialogue on substance abuse and mental health.

Saturday, 26 Nov 2022
Time: 4.30 PM - 5.00 PM | 9.30PM - 10.00 PM



WE CARE COMMUNITY SERVICES

What should we do when the time comes?

Hear from Ms. Shannon Chua, Senior Associate, KALCO LAW LLC on preparing for end of life matters for ourselves and our loved ones.

3.00PM - 4.30PM | DECEMBER 2022
WE CARE (SERENITY ROOM)

Topics include: Wills, Lasting Power of Attorney (LPA), Advance Medical Directive (AMD) and Do-Not-Resuscitate (DNR).



Merry Christmas and happy new year!

2023



福兔迎祥
WISHING YOU A PROSPEROUS
2023



Transforming Lives. Restoring Families.

Counselling | Therapy Programme | Drop-in Centre | Recovery Support Group | Events & Activities



WE CARE COMMUNITY SERVICES

We are located at:

Kembangan-Chai Chee

Community Hub

11 Jln Ubi #01-41, Block 5

Singapore 409074

Tel : 3165 8017

Fax : 6491 5338

E-mail: help@wecare.org.sg



Help is just a phone call away

If you have a problem with addiction, or if you know someone who has issues, call us at **3165 8017**. Or email help@wecare.org.sg

The first step in getting better is to ask for help

WE CARE aims to be a leading centre for the transformation of persons with addiction.

We treat all forms of addictions, including alcohol, drugs, pornography, sex, gaming, internet and compulsive behaviour like shoplifting.

Our core services are:

- Counselling for recovering addicts and their families
- Educational and therapy programmes
- A drop-in centre
- A hub for recovery support groups
- Community outreach

For more information on what we do, please go to: www.wecare.org.sg

Counselling sessions are private and confidential.



WE CARE needs your help.

WE CARE Community Services Ltd is a registered charity.

We provide treatment for all forms of addictions and our services are open to persons of all races, cultures and religion.

To fund our programmes and services, we depend mainly on donations from individuals and corporations.

Your support enables us to provide quality care to individuals and families affected by addictions and compulsive behaviours.

As we are an approved Institution of Public Character (IPC), donations to **WE CARE** are tax deductible.

To make a donation:

Write a cheque payable to "**WE CARE Community Services Limited**". Alternatively, go online to make a donation at:

- [Giving.sg/we-care-comunity-services-limited/](https://giving.sg/we-care-comunity-services-limited/); or
- [Wecare.give.asia](https://wecare.give.asia)

