

2017 Youth Suicide Prevention Resources

More youth suicide prevention resources are available at: <http://dpi.wi.gov/sspw/mental-health/youth-suicide-prevention>
Tony Evers, PhD, State Superintendent

Know the Signs

Suicide doesn't usually happen out of the blue—there are often warning signs for others to see or hear. Get the *FACTS* and know the suicidal thinking signs of your students, friends, and family members.

Suicide Prevention: Warning Signs

Feelings

- ◆ Hopelessness
- ◆ Rage, uncontrolled anger, seeking revenge
- ◆ Feeling trapped – like there's no way out
- ◆ No sense of purpose in life

Actions

- ◆ Acting reckless or engaging in risky activities
- ◆ Withdrawing from friends, family and society
- ◆ Increased alcohol or drug use
- ◆ Giving away prized possessions

Changes

- ◆ Decline in quality of school work
- ◆ Dramatic mood changes
- ◆ Anxiety, agitation, change of eating/sleeping habits

Threats

- ◆ Threatening/talking about hurting self

From American Association of Suicidology

Suicide Is a Complex Problem

Multiple factors are involved when someone dies by suicide. Oversimplifying the reasons someone takes their own life is not helpful. For instance, saying bullying "caused" someone to end their life is not all-encompassing. Not all bullying victims kill themselves. Research suggests many factors contribute to suicide. These include: biological factors, precipitating factors, and triggering events. Examples of biological factors include mental illness or losing a family member to suicide. Precipitating factors include poor grades, attending an unsafe school, victimization, or family rejection. Crisis/triggering events include experiencing a major loss, humiliation or bullying, and having access to lethal means. Suicide is a complex problem that is often misunderstood when oversimplified.

From: American Association of Suicidology (AAS) webinar January 2011.

Identifying mental illness or alcohol/other drug abuse problem is significant.

- The most common mental illness leading to suicide is depression. It is also the most treatable!
- In the 2013 YRBS, over 25 percent of high school students experienced persistent sadness or hopelessness. About six percent of high school students attempted suicide. This shows that depression is somewhat common, but suicide is not.
- Binge drinking is highly correlated with suicide attempts. Ninety percent of people who died by suicide had some form of mental illness and/or an alcohol/other drug abuse problem.

Reducing access to lethal means can be very worthwhile. (see <http://www.meansmatter.com>)

- Limiting access to the means for suicide provides the most significant reduction in suicide rates. Most often, youth who attempt suicide use a gun kept in the home.
- Do not allow youth to have unsupervised access to firearms and certain medications. Encourage safe/secure storage of lethal means as a critical prevention strategy.

When youth are facing what they believe is a crisis and exhibit warning signs of suicide, be sure they are not left alone or sent home without supervision.

Substance Abuse and Mental Health Services Administration
<http://www.samhsa.gov/>
Suicide Prevention Resource Center
www.sprc.org
Prevent Suicide Wisconsin
www.preventsuicidewi.org
American Association of Suicidology
www.suicidology.org
FDL Comprehensive Service Integration
www.csifdl.org

Fond du Lac Area YScreen:

- Voluntary, Confidential
- Offered to all 9th graders
- Requires parent consent
- A United Way Agency
- Resources from Agnesian HealthCare
- For more information contact: Marian Sheridan, RN (920)906-6548 or Lindsey Bruins, YScreen Coordinator (920)906-6700 ext. 4705

What can you do if you are concerned about a student?

Parents are well-positioned to observe youth behavior and to **ACT** if there is a suspicion that a youth may consider self-harm. Suicide is a permanent solution to a temporary problem; but for kids, their problems can seem endless at this stage. If we get them through the crisis, there is a 90 percent chance that they will never attempt suicide. ACT stands for **Acknowledge, Care, and Tell**.

A

Acknowledge feelings rather than minimizing them. Telling a youth to “*get over it*” or “*move on*” is not a realistic outcome when dealing with a person with depression.

- “*I’m sorry to hear about this. It sounds really hard.*”

C

Show Care and Concern for the student by taking the next step.

- “*I’m worried about you. I don’t want anything bad to happen to you or for you to be hurt.*”

T

Tell a member of your crisis team. They know how to work with youth who have concerns like these.

- “*Let’s go talk with someone in the counseling office.*”

These steps (Acknowledge-Care-Tell) are central components of the “Signs of Suicide” program (SOS), an evidence-based school-wide intervention program.

Common Concerns

Does asking about suicide cause a student to attempt it?

No. This issue has been thoroughly studied. By asking a student about suicidal intent, you are offering to help them. Please do your best to reach out to students.

Seeing Urgent Warning Signs? Here’s What to Avoid

All children and adolescents can experience moodiness and will take time to ask life’s big questions. Since they lack the perspective of time, they can become overwhelmed. The best roles for parents are to support youth, and if you see the suicide warning signs, use ACT. Some of the statements below might make perfect sense for youth who aren’t suicidal; but when kids are in crisis, these things can make it worse.

Here are some things to avoid when you see the urgent warning signs:

Don’t Shame

- “*You’ve got to get over this. It’s not a big deal.*”
- “*Why are you so worried? Move on!*”
- “*You’re too sensitive. Grow up!*”

Don’t Delay

- When you see urgent warning signs, get help right away, don’t wait.

Don’t Blame

- “*If you wanted a better grade, you would have worked harder.*”
- “*You’ve got no one to blame but yourself.*”
- “*Maybe you should change your attitude if you want friends.*”

Don’t Give Up

- Suicide is NOT a destiny—when people make it through the suicidal crisis, they usually go on to live healthy, productive lives!

Don’t Do It Alone

- Consult school pupil services staff or administration to help.