

## National Suicide Prevention Week

*September 9th through the 15th is National Suicide Prevention Week. Its purpose is to raise awareness of and to prevent suicide, the third leading cause of death of United States children and young people, ages 10 – 24.*

Because many causes already have a ribbon color, the American Association of Suicidology decided on using two! Purple and turquoise are both healing colors. The color combination stands for survivors of suicide and suicide itself. The ribbon serves as a reminder that suicide is an issue we need to talk about. You can download a ribbon image for your website or FaceBook page at



<http://www.suicidepreventionlifeline.org/GetInvolved/AwarenessRibbons>. You can also visit the Association for Suicide Prevention to find simple ways to show your support for World Suicide Prevention Day on September 10: <http://www.iasp.info/wspd/>

While teachers, school administrators, and school counselors are not trained to provide treatment to students who are considering or who have attempted suicide, they can be aware of warning signs so that parents or caregivers can be notified. Silence about suicide is dangerous, and parents, teachers, counselors and students can all be important in recognizing and reporting threats of suicide. Included in this packet is information for parents, teachers, and students. The material is free for distribution, and more information is available on the websites cited.

### FOR PARENTS AND TEACHERS:

**Not MY Kid**

What Every Parent Should Know About Teen Suicide.



**Watch Our 17 Minute Video**

[Click Here](#)

Parents, teachers, counselors and others who care for young people can benefit from the information in the video “Not MY Kid.” It is provided by the Society for the Prevention of Teen Suicide. ([www.sptsusa.org](http://www.sptsusa.org))

In the video, you will learn **FACTS** about the warning signs of suicide: **Feelings, Actions, Changes, Threats.**

## Warning Signs

Warning signs can be organized around the word **FACTS**:

### Feelings:

- Hopelessness-feeling like things are bad now and they won't get any better
- Fear of losing control, going crazy, harming yourself or others.
- Helplessness- a belief that there's nothing you –or anybody- can do to make your life better
- Worthlessness- feeling like an awful person and that people would be better off if you were dead
- Hating yourself, feeling guilty or ashamed
- Being extremely sad and lonely
- Feeling anxious or worried or angry all the time

### Action:

- Drug or alcohol abuse.
- Talking or writing about death or destruction.
- Aggression – getting into fights or having arguments with people
- Recklessness- doing risky or dangerous things.

### Changes:

- Personality- behaving like a different person- becoming withdrawn, tired all the time, not caring about anything, or more talkative, outgoing.
- Behavior-can't concentrate on school, regular tasks.
- Sleeping pattern-sleeping all the time or not being able to sleep at all, or waking up in the middle of the night or early in the morning and not being able to get back to sleep
- Eating habits-losing appetite and or overeating and gaining weight.
- Losing interest in friends, hobbies, and the way you look or in activities or sports you previously enjoyed.
- Sudden improvement after a period of being down or withdrawn.

### Threats:

- Statements- like "How long does it take to bleed to death?"
- Threats- "I won't be around much longer." Or "Don't tell anyone else...you won't be my friend if you tell!"
- Plans- giving away favorite things, studying about ways to die, obtaining a weapon or a stash of pills- \*\*\*the risk is very high if a person has a plan and the means to carry it out!!
- Suicide attempts- overdosing, wrist cutting.

### Situations

- Getting into trouble at school, at home or with the law
- Recent loss- through death, divorce or separation, the break-up of a relationship, losing an opportunity or a dream; losing self-esteem
- Changes in your life that you feel you can't cope with
- Being exposed to suicide or the death of a peer under any circumstances

# Key Points of Discussion Regarding Suicide

Parents and other adults are critical in helping children and youth understand and deal with issues related to suicide and suicidal ideation. Several key points may be useful in considering discussion regarding suicide:

- **Acknowledge the serious nature of suicide as a public health issue and both a personal and national tragedy.** Suicide should not be sensationalized and it should not be normalized when it is discussed. Approaching it from a straightforward and fact-based perspective that emphasizes causes and consequences is most helpful.
- **Directly and sensitively discuss suicide as a problem issue in a responsible way and help individuals process their feelings.** Approach the topic with the use of good information and available professional resources. Research has shown discussion of suicide with teens does not lead to any increased thinking about suicide or to suicidal behaviors. Responsible discussion can allow peers to identify others who may exhibit suicidal thinking or behaviors and give them support.
- **Identify clearly the factors that can make an individual more vulnerable to the risk of suicide.** The notion that a person who talks about suicide is unlikely to make an attempt at suicide is not true. Thoughts often lead to intentions and eventually to acts. Often a person who is vulnerable to the possibility of suicide does not have the emotional resources and support to cope with their challenges. Identifying and assisting individuals who are vulnerable is an important element of suicide prevention.
- **Take each person's feelings and actions regarding suicide seriously and assist individuals in getting support if needed.** Help children and youth realize that getting help from mental health professionals or other sources may be needed. Also, provide support, care and listening as needed to help individuals deal with personal challenges. Inform yourself and others about local and national resources you may access to assist someone.

## Talking to Young Children (ages 4 to 8)

When talking to young children from ages 4 to 8 it is not necessary to introduce or define the word "suicide." However, children this age need to learn to express their feelings and to seek help in solving problems. They can be taught that harming oneself is not a solution to times of sad or angry feelings.

### What to Say and Do

- Talk with young children about their feelings. Help them label their feelings so they will better understand and be more aware of what is going on inside them. You might ask: "How are you feeling? Are you feeling sad or angry? Do you feel sad or angry only once in awhile or do you feel it a lot of the time?"

- Encourage young children to express their feelings. Talking to them helps to strengthen the connection between them and you. It also lets them know they can share feelings safely with adults they know. Teach that feelings of hurt and anger can be shared with others who can understand and give support.
- If a child does not seem to feel comfortable expressing feelings verbally, support other ways to express feelings, such as writing, drawing or being physically active. Give young children healthy ways to express themselves and work through feelings.
- Explain to young children that being sad from time to time is normal. Sadness is the emotion people feel in times of loss, disappointment or loneliness. Teach children that talking about feeling sad or angry, and even shedding tears or being upset, is OK. Be clear that they should talk to others or do something else when feeling sad, but should not seek to harm themselves in any way.
- Take steps to ensure that young children do not have easy access to materials they could use to harm themselves. Be certain knives, pills and particularly firearms are inaccessible to all children.
- Focus on active involvement with young children that provides them with a focus for their feelings and energies. Play games, participate in sports, visit playgrounds and do other activities together. Stay closely connected to them so you can intervene and provide support if necessary.

## **Talking to Adolescents (ages 9 to 13)**

When talking to adolescents from ages 9 to 13:

### **What to Say and Do**

- Be aware of depression and its symptoms in adolescent children. Depression often does not go away on its own and is linked to risk of suicide when it lasts for periods of two weeks or more. Talk with individuals who have knowledge of depression in children to further understand the symptoms and how to intervene.
- Adolescents have many stressors in their lives and sometimes consider suicide as an escape from their worries or feelings. Be aware of your adolescent's stressors and talk with him or her about them. Let your child know you care and emphasize that "suicide is not an option; help is always available." Suicide is a permanent choice.
- Assist adolescents so they don't become overwhelmed with negative thoughts, which can lead to thoughts of suicide. Help them learn to manage negative thinking and challenge thoughts of hopelessness. If needed, treatment or therapy can help an adolescent deal with negative thoughts.

- Emphasize that alcohol and drugs are not a helpful source of escape from the stressors of an adolescent's life. An adolescent who is suffering from depression and also turns to alcohol and drugs is at a greater risk of attempting suicide.
- Be attentive to risk factors in an adolescent's life, as suicide is not always planned at younger ages. Recognizing the warning signs that might be leading to suicide is important.
- Encourage adolescents to talk about and express their feelings. Provide a listening ear and be a support so they can visit with you about how they feel. Adolescents deal much better with tough circumstances when they have at least one person who believes in them.

## **Talking to Teens (ages 14 to 18)**

When talking to teens from ages 14 to 18:

### **What to Say and Do**

- Recognize the signs and symptoms of depression in teens. These may include feelings of sadness, excessive sleep or inability to sleep, weight loss or gain, physical and emotional fatigue, continuing anxiety, social withdrawal from friends or school, misuse of drugs or alcohol and related symptoms. Intervene and get professional help and resources if necessary.
- Ask teens about what they are feeling, thinking and doing. Open communication helps teens talk freely about their concerns and seek support. Make yourself available to talk with teens often. Avoid being critical or judgmental; listen, don't immediately "fix" the problem.
- Provide support if a teen expresses thoughts related to suicide or shares stories of suicide attempts. Stay with him or her and seek additional help. Guide the teen to professional therapists who can give assistance.
- Listen to teens and pay attention to language related to hurting themselves or others, wanting to "go away" or "just die," or similar ideas. Such expressions always should be taken seriously. Respond with support for the teen and access resources to provide further counseling or guidance.
- Encourage teens to be attentive to their peers and quickly report to a respected adult any threats, direct or indirect, that suggest the possibility of suicide. Teens often are aware of such threats among their peers before others and can serve to support peers and provide resources. Talk about the idea that being a true friend means not keeping secrets that could prevent someone from getting hurt.

## RESOURCES

- **American Association of Suicidology** - Web site: [www.suicidology.org](http://www.suicidology.org)
- **American Foundation for Suicide Prevention** - Web site: [www.afsp.org](http://www.afsp.org)
- **National Institute of Mental Health** - Web site: [www.nimh.nih.gov](http://www.nimh.nih.gov)
- **National Mental Health Association** - Web site: [www.nmha.org](http://www.nmha.org)
- **Suicide Prevention Resource Center** - Web site: [www.sprc.org](http://www.sprc.org)
- **National Strategy for Suicide Prevention** - Web site: [www.mentalhealth.samhsa.gov/suicideprevention](http://www.mentalhealth.samhsa.gov/suicideprevention)

## TALKING TO YOUR KIDS ABOUT SUICIDE

Every parent would like to believe that suicide is not relevant to them or their family or friends. Unfortunately, it's all too relevant for all of us. It's the 3rd leading cause of death in children and adolescents. Even more disturbing are national surveys that tell us that 25% of high school students admit to thinking about suicide and 8.5% acknowledge actually making an attempt.

The unfortunate truth is that suicide can happen to ANY kid in ANY family at ANY time! So how do you deal with this reality? Once you acknowledge that suicide is as much a risk for your child as not wearing a seat belt while driving or using alcohol or drugs or engaging in risky sexual behavior, you've taken the first step in prevention. You talk to your children about these other behaviors which can put them at personal risk and suicide is no different. It's something you CAN and SHOULD talk about with your children!

Contrary to myth, talking about suicide CANNOT plant the idea in someone's head! It actually can open up communication about a topic that is often kept a secret. And secrets that are exposed to the rational light of day often become less powerful and scary. You also give your child permission to bring up the subject again in the future. If it isn't prompted by something your kid is saying or doing that worries you, approach this topic in the same way as other subjects that are important to you but may or may not be important to your child:

- Timing is everything! Pick a time when you have the best chance of getting your child's attention. Sometimes a car ride, for example, assures you of a captive, attentive audience. Or a suicide that has received media attention can provide the perfect opportunity to bring up the topic.
- Think about what you want to say ahead of time and rehearse a script if necessary. It always helps to have a reference point: ("I was reading in the paper that youth suicide has been increasing..." or "I saw that your school is having a program for the teachers on suicide prevention")
- Be honest. If this a hard subject for you to talk about, admit it! ("You know, I never thought this was something I'd be talking with you about, but I think it's really important"). By acknowledging your discomfort, you give your child permission to acknowledge his/her discomfort, too.
- Ask for your child's response. Be direct! ("What do you think about suicide?"; "Is it something that any of your friends talk about?"; "The statistics make it sound pretty common. Have you ever thought about it? What about your friends?")
- Listen to what your child has to say. You've asked the questions, so simply consider your child's answers. If you hear something that worries you, be honest about that, too ("What you're telling me has really gotten my attention and I need to think about it some more. Let's talk about this again, okay?")
- Don't overreact or under react. Overreaction will close off any future communication on the subject. Under reacting, especially in relation to suicide, is

often just a way to make ourselves feel better. ANY thoughts or talk of suicide ("I felt that way a while ago but don't any more") should ALWAYS be revisited.

- Remember that suicide is an attempt to solve a problem that seems impossible to solve in any other way. Ask about the problem that created the suicidal thoughts. This can make it easier to bring up again in the future ("I wanted to ask you again about that situation you were telling me about...")

Here are some possible warning signs that should get our attention:

STATEMENTS that convey a sense of hopelessness, worthlessness, or preoccupation with death ("Life doesn't seem worth it sometimes"; "I wish I were dead"; "Heaven's got to be better than this")

BEHAVIORS that are different from the way your child acted in the past, especially things like talking about death or suicide, taking dangerous risks, withdrawing from activities or sports, or using alcohol or drugs.

FEELINGS that, again, seem different from the past like irritability, anxiety, sadness, hopelessness, loss of interest

SITUATIONS that can serve as 'trigger points' for suicidal behaviors. These include things like loss or death, getting in trouble at home, in school, or with the law, or impending changes for which your child feels scared or unprepared.

If you notice any of these things in kids who have always been impulsive, made previous suicide attempts or threats, or seem vulnerable in any way, you really should get consultation from a mental health professional

FROM: [www.sptsusa.org](http://www.sptsusa.org)



<http://www.suicidepreventionlifeline.org/>

Available suicide hotlines in Georgia: <http://suicidehotlines.com/georgia.html>



## FOR STUDENTS:

Lots of people think about suicide at one time or another in their lives, teens included. Usually it's because they're struggling with problems in their lives that seem overwhelming, and they feel trapped, helpless, and hopeless. It isn't that they want to die—they just want to stop feeling miserable. They may be depressed, angry, or empty- but whatever they feel, they're not thinking clearly.

If you or any of your friends are feeling this way and have had thoughts of suicide, the most important thing to do is to talk immediately with an adult you trust. Sometimes friends tell us things in confidence and make us promise not to tell anyone else. You may have done this yourself. But keeping the secret of suicide doesn't help anyone—it can actually make things worse. Secrets can take on a life of their own and become even more powerful because they're private. The last thing you want to do is keep a secret that will harm you or others. Instead of ignoring thoughts of suicide, get help to make those thoughts go away. If you don't know an adult who would be helpful, call the national hotline number **1-800-273-TALK** and ask them to help you figure out what to do.



# A First-Person Message for Teens

by Stacy Hollingsworth, College Student

I used to think that depression and suicide were things that happened to other people, that the way I approached my life somehow prevented me from becoming a victim of mental illness. I realized just how incorrect that assumption was when my own life was turned upside down by major depression.

I first noticed that something was wrong in 8th grade. Apparently, so did one of my teachers, because she asked me if anything was wrong. Unfortunately, she did so in front of the whole class. From that day on, I put up a wall to protect myself from the embarrassment of having a stigmatized illness. I wore a mask—a façade—to cover up what I was actually going through. I didn't feel comfortable sharing my feelings with any adults in my life at that time.

My depression continued in high school. I was hoping that someone—anyone—would bring up the topics of depression and suicide, so that I wouldn't have to. In school, there were always lessons about alcohol, drugs, and safe sex—but never ONCE were depression or suicide mentioned. Maybe, just maybe, if the adults in my life had been educated in these topics, I would have felt comfortable asking for help, and I would have been spared years of suffering.

But I'm one of the lucky ones. I did get help. I'm here today as the voice of those who are not yet being heard - the child who's sitting in a class full of students thinking he or she is the only one feeling this way...or the teen who can't focus in school because he or she is trapped by the isolation and pain of depression.

Help IS available—ask your friends, your counselors at school, your parents, or call the suicide hotline at **1-800-273-TALK (1-800-273-8255)**. The right resources are there—look for them—because they CAN save your life!



# When a Friend is Talking About Suicide

by Christine Henderson

Time is the crucial thing when dealing with a friend who is having suicidal thoughts. It is important that once you hear your friend talking about these feelings, to recognize them for what they are: a serious threat to your friend's life. Don't ignore them and assume the person is just being dramatic. If your friend is talking about killing him or herself, you just can't handle it on your own- you HAVE TO tell a trusted adult! This may seem like something you hear all the time: tell an adult. But in this case, we're talking about someone's existence on earth, someone's life. That is something that should grab your attention and motivate you to tell someone immediately. Don't be a fool and think you can take care of this yourself- you can't!

You may be nervous that this person will be upset with you if you tell someone. To be honest, that is a risk you are going to have to take. You have to understand that having this person alive and on earth is more important than having them for a friend. You are going to have to risk sacrificing the friendship and get up your courage or else your friend might lose his or her life. This fact may seem scary and daunting, but having that person kill themselves will make that fear seem like a walk in the park. Feeling suicidal is indescribable pain that no one should have to deal with, and the pain of losing someone to suicide is just as bad, trust me. You don't want to look back and wish you had told someone. You will carry that regret with you for the rest of your life, so please, do something about it! Tell an adult you trust will know what to do in the situation.

Acting like an adult yourself and asking for help is a big step and can be quite overwhelming and stressful. However, you need to think about this situation in the grand scheme of things – like how will you feel if you keep this information to yourself and your friend dies? This can be difficult to think about, but challenge yourself to think about this very real reality. And if you do decide to tell someone, and your friend's distress is caught early enough, then your friend can get help. The point is: the ability of your friend to have the option of living a happy life can ultimately depend on your telling someone. You will be making a proactive and potentially life-saving decision to intervene at the right moment.

One last time I want to remind you, time is of the essence. Maybe your friend will ultimately thank you, and maybe not. But in the big picture, that really doesn't matter. If you get the slightest inkling that someone might not be okay, do something about it! Don't wait around. And don't try to be a rescuer and take care of it on your own to save the friendship. Act on your instincts, trust your gut, be a grown-up, and tell! It could save the life of someone very dear to you.

*Christine is a college freshman whose personal experience with the suicide of her mother has inspired her to become an advocate for youth suicide prevention.*