

Preventing teen suicide so teens have the opportunity to live to their full potential

A comprehensive school-based suicide prevention approach

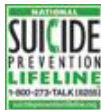
Illinois Youth Suicide Prevention Project

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Today's Presentation

We want a society where people can live to their full potential; however, the reality is that a variety of circumstances can lead a person to feel helpless, even attempt to take one's life.



1-800-273-TALK (8255)
suicidepreventionlifeline.org

This training is made available by the Illinois Department of Public Health through funding from grant number 1U79SM060429-01 awarded by the Substance Abuse and Mental Health Services Administration (SAMHSA), U.S. Department of Health and Human Services (HHS). The views, policies, and opinions expressed are those of the authors and do not necessarily reflect those of SAMHSA or HHS.

Suicide is a public health problem.

- Complex problem associated with multiple factors:
 - Individual (biological, psychological)
 - Environmental (physical, interpersonal, community, societal)
- Requires a community-wide effort, across disciplines

Today's Presentation

- The reality of youth suicide
- Risk factors and warning signs
- What can school personnel do to prevent suicide
- Illinois Youth Suicide Prevention Project (e.g., Statewide "Gatekeeper" Training for Educators)
- Resources
- Q&A

THE REALITY OF YOUTH SUICIDE

The reality of youth suicide

Fact Finding and Sharing - Quiz

Suicide is the _____ leading cause of death for adolescents and young adults in Illinois.

- a) 8th
- b) 2nd
- c) 1st
- d) 3rd

In Illinois, approximately _____ young lives ages 10-24 are lost per year to suicide.

- a) 403
- b) 200
- c) 125
- d) 80

The number of youth who attempt suicide annually in Illinois is _____.

- a) 300
- b) 700
- c) 1500
- d) 3000

A person who attempts suicide is at greater risk for repeat attempts with increasing lethality.

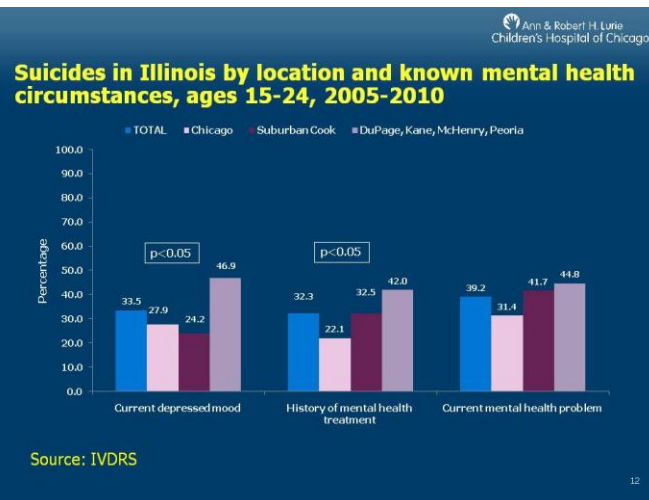
- a) True
- b) False

The reality of youth suicide

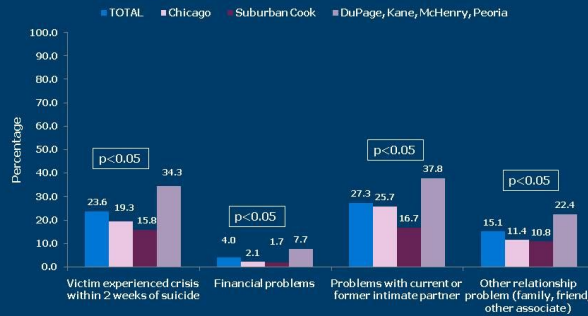
Illinois Data

Youth – ages 10 to 24

- Suicide
 - Suicide is the third leading cause of death
 - Approximately 125 young lives lost each year in Illinois
- Suicide attempt
 - Approximately 3,000 youth receive medical care for self-inflicted injuries at Emergency Departments in Illinois
 - In an average classroom of 30 high school students, two students will have attempted suicide in past 12 months
- Suicide Ideation
 - Based on a 2011 Illinois survey of youth in grades 9-12 – “in the 12 months preceding the survey”
 - 14.3 percent of students reported seriously considering suicide
 - 13.1 percent reported creating a plan
 - 8 percent reporting trying to take their own life
 - 2.6 percent received medical care following the attempt

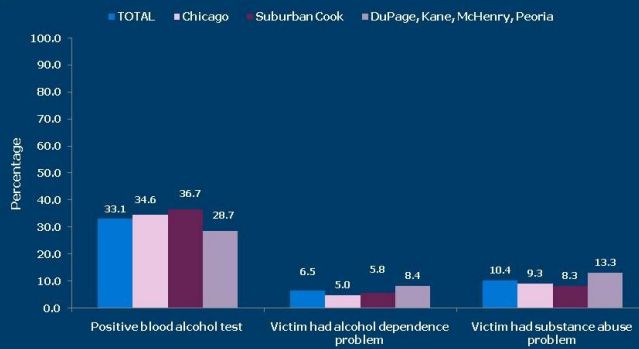


Suicides in Illinois by location and known precipitating circumstances, ages 15-24, 2005-2010



Source: IVDRS

Suicides in Illinois by location and substance use, ages 15-24, 2005-2010

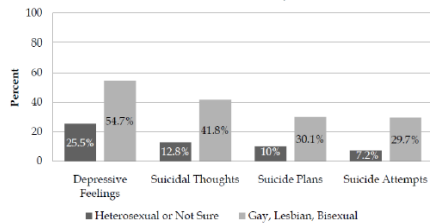


Source: IVDRS

The reality of youth suicide

At-Risk Population – LGB Youth

Depressive Feelings and Suicide-Related Questions of High School Students by Sexual Orientation, 2009



Source: 2009 Youth Risk Behavior Survey Results; Children's Memorial Research Center, Child Health Data Lab

- In 2009, Illinois YRBS data found when lesbian, gay and bisexual youth are compared to their non-gay peers they are more than three times more likely to report considering suicide in the past 12 months and to have made a suicide plan in the past 12 months. Additionally, they were almost five times more likely to have attempted suicide in the past 12 months.

RISK FACTORS

Risk Factors

Several factors can put a young person at risk for suicide. However, having these risk factors does not always mean that suicide will occur.

The most significant ones are:

- Prior suicide attempt(s)
- Substance abuse
- Mood disorders
- Access to lethal means

Risk Factors

Other risk factors include the following circumstances and problems:

- Recent death of a friend, especially if by suicide
- Recent death of or separation from a family member
- Engaging in self-harm
- Problems in school (academic and/or discipline)
- Relationship problems or breakups
- Bullying or other forms of violence
- Discrimination based on sexual orientation or gender nonconformity
- Family problems or abuse, current or in the past
- Legal issues
- Serious illness or injury
- Other stressful events

WARNING SIGNS

Warning signs and corresponding action steps

Call 9-1-1 or seek immediate help from a mental health provider when you hear or see any one of these behaviors:

- Someone threatening to hurt or kill themselves
- Someone looking for ways to kill themselves: seeking access to pills, weapons, or other means
- Someone talking or writing about death, dying, or suicide

Seek help by contacting a mental health professional or calling 1-800-273-TALK for a referral should you witness, hear, or see anyone exhibiting any one or more of these behaviors:

- Hopelessness
- Rage, anger, seeking revenge
- Acting reckless or engaging in risky activities, seemingly without thinking
- Feeling trapped—like there's no way out
- Increasing alcohol or drug use
- Withdrawing from friends, family or society
- Anxiety, agitation, unable to sleep, or sleeping all the time
- Dramatic mood changes
- No reason for living; no sense of purpose in life

PROTECTIVE FACTORS

Protective Factors

Protective factors are not just the opposite or lack of risk factors. Rather, they are conditions that promote strength and resilience and ensure that vulnerable individuals are supported and connected with others during difficult times, thereby making suicidal behaviors less likely.

- Effective clinical care for mental, physical and substance use disorders
- Easy access to a variety of clinical interventions and support for helpseeking
- Restricted access to highly lethal means of suicide
- Strong connections to family and community support
- Support through ongoing medical and mental health care relationships
- Skills in problem solving, conflict resolution and nonviolent handling of disputes
- Cultural and religious beliefs that discourage suicide and support self preservation

However, positive resistance to suicide is not permanent, so programs that support and maintain protection against suicide should be ongoing.

Connectedness as a Protective Factor

The degree to which a person or group is socially close, interrelated, or shares resources with other persons or groups. Connectedness occurs within and between multiple levels of the social ecology that is between individuals, families, schools and other organizations, neighborhoods, cultural groups, and society as a whole

- Connectedness between individuals
- Connectedness of individuals and their families to community organizations
- Connectedness among community organizations and social institutions

However, positive resistance to suicide is not permanent, so programs that support and maintain protection against suicide should be ongoing.

SCHOOL'S ROLE

Why address suicide?

Four reasons why schools should address suicide

1. Maintaining a safe school environment is part of a school's overall mission.
2. Student's mental health can affect their academic performance.
3. A student suicide can significantly impact other students and the entire school community.
4. Schools have been sued for negligence (e.g., failure to notify parents, get assistance, adequately supervise)

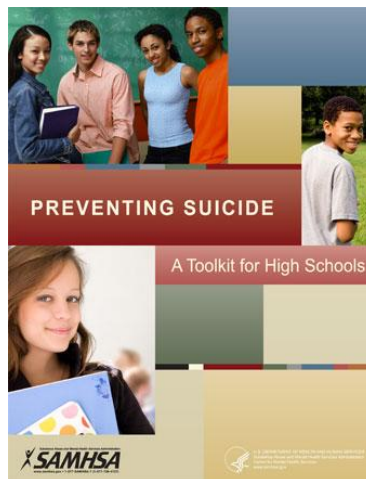
School Code Requirement

- **School code requirement**
 - School guidance counselors, teachers, school social workers and other school personnel who work with students in grades 7th through 12th are required to receive training to identify the warning signs of mental illness and suicidal behavior in adolescents and teens and shall be taught appropriate intervention and referral techniques.
 - Participating in or presenting at in-service training programs on suicide prevention is included in the list of possible professional development activities for teacher certification.

Your role

- **Student Assistance Programs understand**
 - The need for a comprehensive approach
 - The need for collaborative efforts among students, parents, schools and community resources
 - The benefits of empowering staff in identification and intervention for barriers to learning,
 - The benefits of creating an early identification and intervention system and of developing support systems
 - The need for connecting with community resources

Toolkit



Download at <http://store.samhsa.gov/product/SMA12-4669>

How schools can help prevent suicide.

Key components of a comprehensive school suicide prevention program:

- School wide programs that promote connectedness and emotional well-being
- Policies and procedures for helping students at risk and in crisis
- Protocols for responding to suicide death
- Postvention
- Staff education and training
- Parent/guardian education and outreach
- Student programs
 - Curricula for all students
 - Skill-building for students at risk
 - Peer leader programs
- Screening for at-risk students

How schools can help prevent suicide.

The two essential components that every school should have in place are:

- Protocols for helping students at risk of suicide
- Protocols for responding to a suicide death (and thus preventing additional suicides)

*Guidance in creating these protocols can be found in
Chapter 2 and 3 of the Prevention Suicide: A High School Toolkit.*

How schools can help prevent suicide.

After developing the previous two critical components, all staff should be engaged in suicide prevention. This should include the following:

- Educating all staff about the importance of suicide prevention
- Training all staff to recognize suicide risk
- Training selected staff to assess and refer students at risk of suicide to appropriate services

Guidance in creating these protocols can be found in Chapter 5, 6 and 7 of the Prevention Suicide: A High School Toolkit.

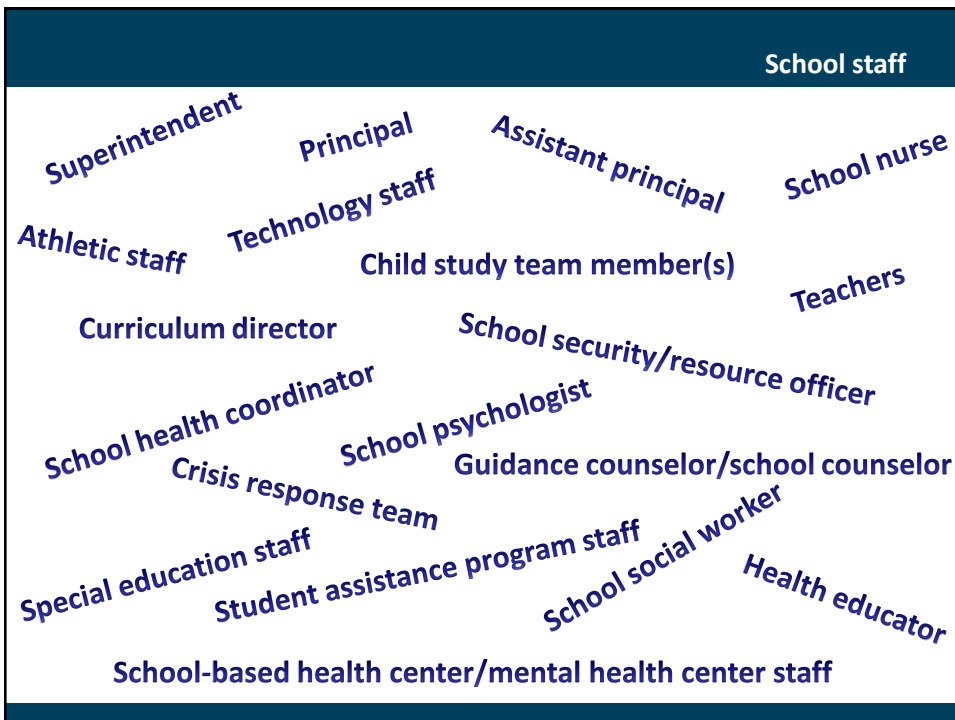
How schools can help prevent suicide.

After a school has created and implemented these three components (the two essential protocols and the staff education and training outlined above), it is ready to implement additional suicide prevention strategies, including:

- Educating parents about behavioral health promotion and suicide risk
- Educating and involving students in behavioral health promotion and suicide prevention
- Screening students for suicide risk

Guidance in creating these protocols can be found in Chapter 5, 6, and 7 of the Prevention Suicide: A High School Toolkit.

STEPS FOR GETTING STARTED



Community Partners

EMTs, fire and rescue personnel, and first responders

Leaders representing the cultural communities of your students

Mental health providers/
community mental health agency staff

Substance abuse counselors
Juvenile justice professionals

County social services staff

Hospital staff,
including emergency department staff

Immigrant and refugee organization staff

LGBTQ youth-serving program staff

Healthcare providers

Youth development professionals
(e.g., YMCA, Boys and Girls Club, community youth center)

Media representatives

Police

Coroner

Community health department staff (including injury and violence
Prevention and maternal and child health professionals)

How to get started.

These steps for getting started are not entirely sequential. You may want to complete them in a different order—or carry out several of them at the same time.

- Step 1: Engage administrators, school boards and other key players
 - Explain why it is important to address suicide risk among students
 - Highlight data and information specific to your district
- Step 2: Bring people together to start the planning process
 - Engage school staff
 - Engage community partners
- Step 3: Provide key players with basic information about youth suicide and suicide prevention
- Step 4: Develop your overall strategy
 - Assess your current policies, programs and school culture
 - Select components of a comprehensive approach

How to get started.

Tools in the *Preventing Suicide: A High School Toolkit* to help you get started

- Suicide prevention: facts for schools
- Chart of school staff responsibilities
- Chart of community partners
- Risk and protective factors and warning signs factsheets
- Data on youth suicide
- Suicide and substance abuse information sheet
- Suicide and bullying information sheet
- The implications of culture on suicide prevention information sheet
- Checklist of suicide prevention activities
- Matrix of school-based suicide prevention programs
- Suicide prevention registries information sheet

Tools found in *Prevention Suicide: A High School Toolkit* -
<http://store.samhsa.gov/shin/content//SMA12-4669/SMA12-4669.pdf>

Checklist of suicide prevention activities

Tool 1.J: Checklist of Suicide Prevention Activities

Suicide Prevention Activities	Yes	No	Not Sure	If no or not sure
Protocols for helping students at risk of suicide				
We have a written protocol for helping students who may be at risk of suicide that is consistent with the guidelines in Chapter 2 of this toolkit.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review and implement steps in Chapter 2
We have a written protocol for responding to students who attempt suicide at school that is consistent with the guidelines in Chapter 2 of this toolkit.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review and implement steps in Chapter 2
We have established agreements with outside providers to provide effective and timely mental health services to our students.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review and implement steps in Chapter 2
Protocols for after a suicide				
We have a written protocol for responding to the suicide of a student or other member of the school community that is consistent with the guidelines in Chapter 3 of this toolkit.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review and implement steps in Chapter 3
Staff who will implement the suicide response protocol are familiar with this protocol and the tools that will help them fulfill their responsibilities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review and implement steps in Chapter 3
We have identified community partners to help us in the event of a suicide.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review and implement steps in Chapter 3
Staff education and training				
All professional and support staff have received information about the importance of school-based suicide prevention efforts, as described in Chapter 4 of this toolkit.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review and implement steps in Chapter 4
All professional and support staff have been trained to recognize and respond appropriately to students who may be at risk of suicide, as described in Chapter 4 of this toolkit.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review and consider implementing steps in Chapter 4
Our school has staff who have been trained to assess, refer, and follow up with students identified as at risk of suicide, as described in Chapter 4 of this toolkit.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review and consider implementing steps in Chapter 4
Parent/guardian education and outreach				
We educate the parents of our students about suicide and related mental health issues, as described in Chapter 5 of this toolkit.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review and consider implementing steps in Chapter 5

Suicide Prevention Activities	Yes	No	Not Sure	If no or not sure
We have a sufficient level of participation in our programs to educate parents about suicide.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review and consider implementing steps in Chapter 5
Student education				
We have implemented at least one type of program to engage students in suicide prevention.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review and consider implementing steps in Chapter 5
Suicide prevention is integrated into other student health/mental health courses and initiatives.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review and consider implementing steps in Chapter 6
Screening				
We have implemented a suicide screening program, as described in Chapter 7 of this toolkit.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review and consider implementing steps in Chapter 7
We have the support of parents, school staff, and community mental health providers for our suicide screening program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review and consider implementing steps in Chapter 7

Developing protocols for helping students at risk of suicide

Steps to develop protocols to help students at risk of suicide

- Step 1: Convene a group to create protocols for helping students at risk of suicide
- Step 2: Identify the suicide risk response coordinator
- Step 3: Identify and involve mental health service providers to whom students can be referred
- Step 4: Develop a protocol to help student at risk of suicide
- Step 5: Develop a protocol for responding to a suicide attempt in the school or on the school campus
- Step 6: Plan for managing a student's return to school
- Step 7: Help staff understand the protocols

Tools found in Prevention Suicide: A High School Toolkit –

- Chart of school staff responsibilities
- Chart of community partners
- Questions for mental health providers
- Protocol for helping a student at risk of suicide
- Suicide risk assessment resources
- Self-injury and suicide risk information sheet
- Guidelines for notifying parents
- Parent contact acknowledgment form
- Guidelines for student referrals
- Student suicide risk document form
- Protocol for responding to a student suicide attempt
- Guidelines for facilitating a student's return to school

Developing protocols for responding to a suicide

Steps to develop protocols for responding to a suicide

- Step 1: Convene a group to create protocols
- Step 2: Identify community partners who can help
- Step 3: Create a protocol for your school's immediate response to a suicide
- Step 4: Include the immediate response protocol in your school's crisis response plan
- Step 5: Create a protocol for the long-term response to a suicide
- Step 6: Help staff understand the protocols
- Step 7: Update the protocols

Tools found in Prevention Suicide: A High School Toolkit –

- Chart of school staff responsibilities
- Chart of community partners
- Immediate response protocol
 - Sample script for office staff, announcements, letters to families
 - Sources of postvention consultation
 - Guidelines for working with the family, notifying staff, memorialization, working with the media
 - Talking points for students and staff after a suicide
- Long-term response protocol
 - Guidelines for anniversaries of a death

Staff education and training

Steps to choosing and implementing suicide prevention education and training for staff

- Step 1: Convene a group to assess your staff's education and training needs
- Step 2: Provide all staff with information and awareness about suicide and the school's role in suicide prevention
- Step 3: Train staff to identify suicide risk factors and warning signs among students and to take appropriate action
- Step 4: Train selected mental health staff to assess suicide risk in individual students

Tools found in Prevention Suicide: A High School Toolkit –

- *Chart of school staff responsibilities*
- *Suicide prevention: facts for schools*
- *Risk and protective factors and warning signs factsheets*
- *Matrix of staff education and training programs*
- *To live to see the great day that dawns*

Best Practices Registry

The screenshot displays the Best Practices Registry website. The top navigation bar includes 'Home', 'All Listings', and 'All Program Listings'. A sidebar on the left contains various menu items such as 'Using the BPR', 'Section I Evidence-Based Programs', 'Section II Expert/Consensus Statements', 'Section III Adherence to Standards', 'All Listings', 'BPR FAQs', 'How to Apply', 'Marketing Materials', and 'BPR Search'. The main content area shows a table of program listings with columns for 'Type of Program' and 'Organization'. One entry is highlighted: 'After a Suicide: A Toolkit for Schools' by the American Foundation for Suicide Prevention. To the right of the table, a URL is provided: <http://www.sprc.org/bpr/all-listings>. Below the table, a detailed view of the 'After a Suicide: A Toolkit for Schools' program is shown, including its description, settings (Middle & High Schools), and a list of program components such as 'Introduction and Executive Summary', 'Get the Facts First', 'Crisis Response', 'Tools for Crisis Response', 'Helping Students Cope', 'Working with the Community', 'Memorialization', 'Social Media', 'Suicide Contingency', and 'Going Forward'.

Parent/Guardian education and outreach

Steps for developing suicide prevention education and outreach for parents

- Step 1: Convene a group to plan an implement parent education and outreach activities
- Step 2: Select or develop parent education and outreach programs
- Step 3: Identify ways to increase participation among parents at events and activities
- Step 4: Integrate parent education into existing program

Tools found in Prevention Suicide: A High School Toolkit –

- *Chart of school staff responsibilities and chart of community partners*
- *Matrix of parent/guardian education and outreach programs*
- *Suicide prevention and schools: facts for parents*

Student programs

Steps for developing suicide prevention education and outreach for parents

- Step 1: Convene a group to plan and implement student programs
- Step 2: Determine which type(s) of student program(s) will fit the needs of your school
- Step 3: Choose or develop the specific program(s) you want to implement at your school
- Step 4: Adapt student programs for your school community
- Step 5: Integrate suicide prevention programs into other initiatives to improve behavioral health

Tools found in Prevention Suicide: A High School Toolkit –

- *Chart of school staff responsibilities*
- *Types of student programs information sheet*
- *Matrix of student programs*
- *To live to see the great day to dawn*

Screening

Steps for developing suicide prevention education and outreach for parents

- Step 1: Convene a group to plan and conduct a screening program
- Step 2: Secure support from administrators and staff for a screening program
- Step 3: Determine which community mental health providers to use for referrals
- Step 4: Select a screening program to use for the students at your school
- Step 5: Engage parents in the screening program

Tools found in *Prevention Suicide: A High School Toolkit* –

- *Chart of school staff responsibilities*
- *Chart of community partners*
- *Matrix of screening program*
- *Ideas to maximize parental consent response rate*

**ILLINOIS YOUTH SUICIDE
PREVENATION PROJECT**

Illinois Youth Suicide Prevention Project

- 3-year grant-funded program – SAMHSA 1U79SM060429-01
- Targets youth ages 10-24
- Purposes of IYSP include
 - Advancing the state suicide prevention strategic plan
 - Enhancing Primary Prevention
 - Increasing Linkage to Services
 - Increasing Protective Factors/Decrease Risk Factors for students
 - Promote National Suicide Prevention Lifeline
- Core Activities include
 - **Kognito Gatekeeper Training in Secondary/Post-Secondary Systems**
 - Expand the “It Only Takes One” website (suicide prevention campaign)
 - Promote the National Suicide Prevention Lifeline
 - Professional Development
 - Stakeholder Meetings



Role of School Personnel

- On the front lines with students every day.
- May notice worrisome behavior and appearance.
- Have existing relationships with students, and they care.
- School personnel can be the “eyes and ears” - not mental health experts, but can take small steps to a big difference.
- Goal is to **Connect with students** and then **Connect the Right students to the Right resource**: crisis team, counseling, psychologist, nurse, social worker, ally

Benefits of “Gatekeeper” Training

- A key strategy for prevention/early intervention and part of the national strategy for suicide prevention.
- Reduces the number of undetected students in schools and moves them into treatment as early as possible.
- Reduces the anxiety about responding to an at-risk student.
- Reduces stigma associated with mental illness.
- Enhances safety for individual student, school and community.

A “gatekeeper” is any individual (i.e., not necessarily a mental health professional) trained to identify individuals at risk of psychological distress and connect them to treatment or supporting services as appropriate.

Kognito At-Risk Suite for Educators

- Suite includes 9 courses:
 - 3 for middle and high school personnel
 - 6 for higher ed personnel & students
 - Special modules for LGBTQ and Veterans
- Award-winning **online** training platform
- Listed in NREPP* & SPRC/AFSP Best Practices Registry**
- Research Proven
- Broad Adoption
 - 10 State Agencies – AZ, CA, NY, OH
 - 400 Institutions of Higher Ed



Middle and High School



Higher Ed Faculty & Staff



Higher Ed Students

* 1 listed, 1 pending

** 5 programs listed

What Makes Kognito Trainings Special?

- **Fun, engaging, effective**
- Designed especially for **education community**
- Hands on **practice**
- Private **role play** with intelligent avatars
- Individualized, real-time **feedback**
- ISBE **CE credit**
- **Easy to implement** district, or school-wide, or in higher ed



at-risk

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How do Kognito trainings work?

- **Assume a role**
- **Engage in virtual conversations** with At-Risk student avatars with memory and emotion that **respond like real students**
- Navigate conversations using **dialogue options**: topics (blue) and tactics (grey)
- Hear your character speak and **experience the student's response**
- **Pitfalls and best practice options** – learn from mistakes, forge new patterns based on what works



Screenshot from course: *At-Risk for Middle School*

- Links to national and local **resources**
- Print **certificate**, course **summary** and link to supplementary information

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At-Risk for Middle School



Learning Objectives

1. **Recognize warning signs** that a student may be suffering from psychological stress.
2. **Initiate a conversation** with a student to build resiliency and help the student identify sources of support.
3. Upon discovering that a student experiences anxiety, depression, substance abuse or other concern, **refer the student to appropriate support.**
4. **Ask a student about possible suicidal thoughts and plans, and connect the student to the appropriate support immediately.**

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Assume a Role



Learners assume the role of Mr. Bauer, an English teacher. Jackie Torres, a child psychologist, provides background information, best practice guidance and real-time coaching.

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Student Avatars



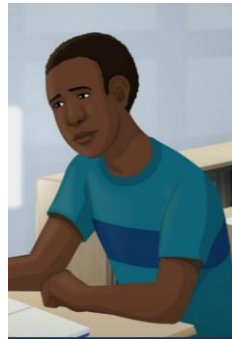
MARIAH

New to the school
Teased by popular girls
Cyber-bully victim
Ran out of class upset



JEN

Popular but rude
Angry outbursts
Teased another student
Conflict at home



MICHAEL

Losing a loved one
Worrisome journal entry
Sometimes withdrawn
Thoughts of suicide

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Practice Conversation



Mr. Bauer talks to Mariah a new student who is having a number of challenges.

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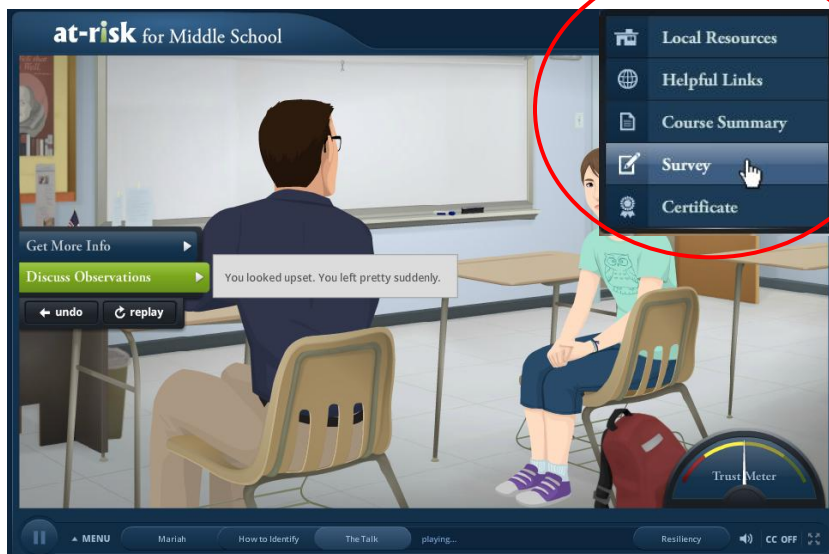
Individualized, Real-Time Feedback



Depending on the user's decision, Ms. Torres may offer positive or corrective feedback

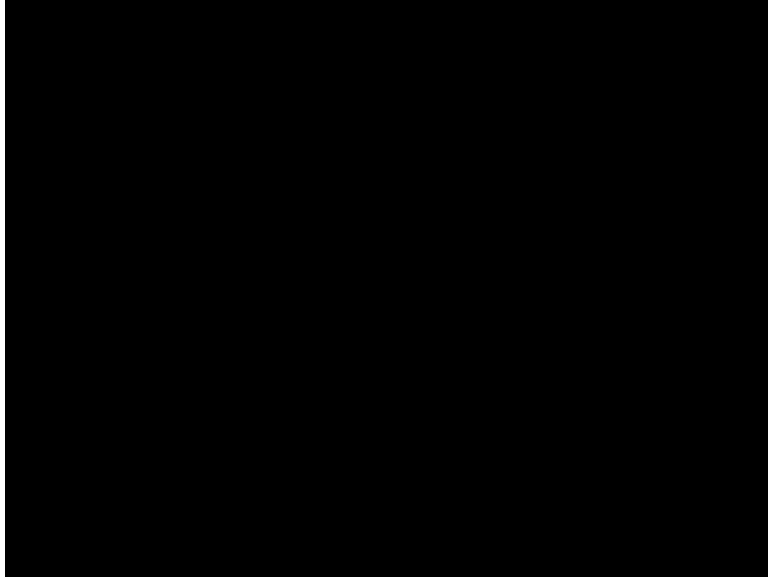
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Additional Features



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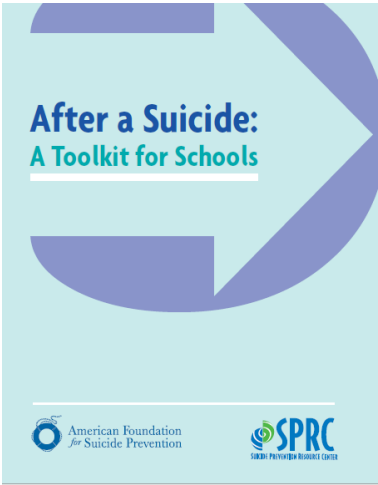
Demo



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RESOURCES

Resources



Download at
<http://www.sprc.org/sites/sprc.org/files/library/AfteraSuicideToolkitforSchools.pdf>

Resources

National Suicide Prevention Lifeline



Feeling lost, lonely, desperate?



When it seems like there's no hope, there is help.

If you feel trapped... if you feel you have no one to turn to... if you've been feeling down for a while and you're not exactly sure why... it's important to talk to someone. You can talk to someone **right now** by calling the Lifeline. Help is available at any time of the day or night—and it's completely free and confidential. We're here to listen and to help you find your way back to a happier, healthier life.

If you or someone you know is thinking about suicide, call the National Suicide Prevention Lifeline: **1-800-273-TALK (8255)**. With help comes hope.



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration
www.nimh.gov

Resources

The Lifeline is **FREE**, confidential, and always available.

HELP a loved one, a friend, or yourself.

Community crisis centers answer Lifeline calls.



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration
www.samhsa.gov

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CMHS-SVP-0126

NATIONAL
SUICIDE PREVENTION LIFELINE
1-800-273-TALK (8255)
suicidepreventionlifeline.org

Learn the Warning Signs.

Suicide Warning Signs

These signs may mean someone is at risk for suicide. Risk is greater if a behavior is new or has increased and if it seems related to a painful event, loss, or change.

- ♦ Talking about wanting to die or to kill oneself.
- ♦ Looking for a way to kill oneself, such as searching online or buying a gun.
- ♦ Talking about feeling hopeless or having no reason to live.
- ♦ Talking about feeling trapped or in unbearable pain.
- ♦ Talking about being a burden to others.
- ♦ Increasing the use of alcohol or drugs.
- ♦ Acting anxious or agitated; behaving recklessly.
- ♦ Sleeping too little or too much.
- ♦ Withdrawing or feeling isolated.
- ♦ Showing rage or talking about seeking revenge.
- ♦ Displaying extreme mood swings.

Suicide Is Preventable.

Call the Lifeline at **1-800-273-TALK (8255)**.

With Help Comes Hope



SPRC • Suicide Prevention Resource Center

Promoting a public health approach to suicide prevention

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

Resources

The Role of High School Mental Health Providers in Preventing Suicide

Ellen's English teacher told the school counselor, Ms. Thompson, that several of Ellen's class members were talking about suicide. Ms. Thompson was alarmed. She was afraid that Ellen might want to kill herself. Ms. Thompson asked Ellen to come to the counseling office for a talk with her.

Ms. Thompson talked to Ellen's parents and talked with her about her feelings and beliefs. Ms. Thompson was talking to Ellen's father, Mr. Thompson, about Ellen's situation. Ms. Thompson was talking to Ellen's mother, Mrs. Thompson, about Ellen's situation. Ms. Thompson was talking to Ellen's brother, Mr. Thompson, about Ellen's situation. Ms. Thompson was talking to Ellen's sister, Mrs. Thompson, about Ellen's situation. Ms. Thompson was talking to Ellen's friends, Mr. and Mrs. Thompson, about Ellen's situation. Ms. Thompson was talking to Ellen's neighbors, Mr. and Mrs. Thompson, about Ellen's situation. Ms. Thompson was talking to Ellen's community, Mr. and Mrs. Thompson, about Ellen's situation. Ms. Thompson was talking to Ellen's country, Mr. and Mrs. Thompson, about Ellen's situation. Ms. Thompson was talking to Ellen's world, Mr. and Mrs. Thompson, about Ellen's situation. Ms. Thompson was talking to Ellen's universe, Mr. and Mrs. Thompson, about Ellen's situation. Ms. Thompson was talking to Ellen's everything, Mr. and Mrs. Thompson, about Ellen's situation. Ms. Thompson was talking to Ellen's nothing, Mr. and Mrs. Thompson, about Ellen's situation. Ms. Thompson was talking to Ellen's someone, Mr. and Mrs. Thompson, about Ellen's situation. Ms. Thompson was talking to Ellen's no one, Mr. and Mrs. Thompson, about Ellen's situation. Ms. Thompson was talking to Ellen's everywhere, Mr. and Mrs. Thompson, about Ellen's situation. Ms. Thompson was talking to Ellen's nowhere, Mr. and Mrs. Thompson, about Ellen's situation. Ms. Thompson was talking to Ellen's everywhen, Mr. and Mrs. Thompson, about Ellen's situation. Ms. Thompson was talking to Ellen's nowhen, Mr. and Mrs. Thompson, about Ellen's situation. Ms. Thompson was talking to Ellen's everywhere, Mr. and Mrs. Thompson, about Ellen's situation. Ms. Thompson was talking to Ellen's nowhere, Mr. and Mrs. Thompson, about Ellen's situation. Ms. Thompson was talking to Ellen's everywhen, Mr. and Mrs. Thompson, about Ellen's situation. Ms. Thompson was talking to Ellen's nowhen, Mr. and Mrs. Thompson, about Ellen's situation.

School Mental Health Providers:

- Understand why students are at risk for suicide.
- Identify students who may be at risk for suicide.
- Respond to students who may be at risk for suicide.
- Be prepared to respond to a suicide attempt.

The Role of High School Teachers in Preventing Suicide

Ms. Thompson, the English teacher, told the school counselor, Ms. Thompson, that several of Ellen's class members were talking about suicide. Ms. Thompson was alarmed. She was afraid that Ellen might want to kill herself. Ms. Thompson asked Ellen to come to the counseling office for a talk with her.

Teachers:

- Understand why students are at risk for suicide.
- Identify students who may be at risk for suicide.
- Respond to students who may be at risk for suicide.
- Be prepared to respond to a suicide attempt.

The Role of Teens in Preventing Suicide

If you are thinking of hurting yourself, or if you are concerned that someone else may be suicidal, call the National Suicide Prevention Lifeline at 1-800-273-TALK (8255).

Ellen was worried. Her English teacher, Ms. Thompson, was a great teacher, but she had just told her that she was thinking of killing herself. Ellen was scared. She was afraid that she might want to kill herself. Ellen was thinking about suicide. Ellen was thinking about killing herself. Ellen was thinking about dying. Ellen was thinking about death. Ellen was thinking about hell. Ellen was thinking about heaven. Ellen was thinking about everything. Ellen was thinking about nothing. Ellen was thinking about someone. Ellen was thinking about no one. Ellen was thinking about everywhere. Ellen was thinking about nowhere. Ellen was thinking about everywhen. Ellen was thinking about nowhen. Ellen was thinking about everywhere, nowhere, everywhen, nowhen.



Resources



To learn more, please visit
www.itonlytakesone.org

Are you the one person to help prevent a suicide?
Remember... *If Only Takes One.*

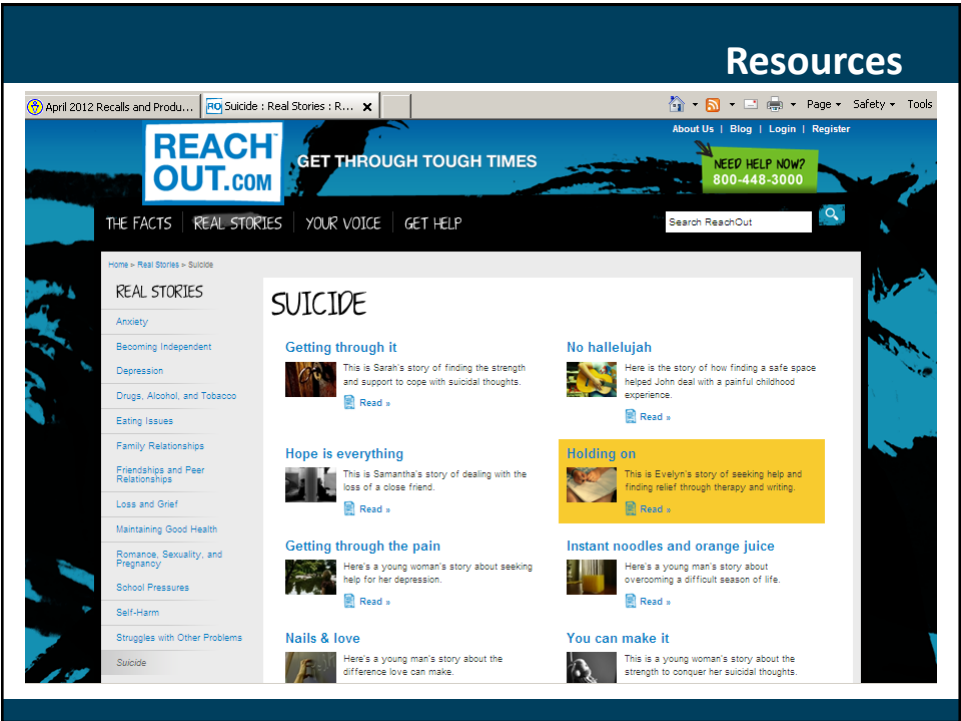
For help, call the
Suicide Prevention Lifeline at 800-273-Talk

Don't be afraid to ask about suicide.
Encourage others to get help.



It Only Takes One is a suicide prevention public awareness campaign funded by the Illinois Department of Public Health and operated by Mental Health America of Illinois.

Resources



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