

Youth Suicide Attempter: What You Should Know

Our Story

Our story begins when our son took his life in 2004. He was 21 years old and at college. He had never been diagnosed with a mental health condition. We do not believe anything prepares a parent for the loss of their child to suicide. It is natural for a healthy person to view suicide as unthinkable. You may not recognize what is behind behavior changes you are seeing. However parents can be trained to recognize when their child is struggling with thoughts of suicide. Education about suicidal thinking, behaviors, and what to do is available. We provide some of this information here.

Lessons Learned From Our Son's Suicide

- ▶ What happened:
 - Stopped attending class
 - Started drinking alcohol more
 - Sleep issues, sleeping less
 - Harder to contact, did not return calls
 - Seemed somewhat despondent
 - Fifth student to die of suicide on his campus and the third in his department
 - School never informed anyone about this suicide cluster
- ▶ Comments made in aftermath of his death:
 - What was he thinking
 - How could he do that to you
 - But you have a good family
 - He was always quiet (as if that in and of itself means something)
- ▶ What was happening at the time:
 - California had the now desired gun safety measures -- a background check and 10 day waiting period
 - California colleges and universities had ongoing, sustained budget cuts to mental health services
 - Hard to know when and how to get mental health help

What does suicide deaths and suicide attempts data show?

- ▶ Looked at San Mateo County adolescents and youth (0 –24 years old) for suicide attempts (2006 –2015) and for suicide deaths (2006–2017):
 - Suicide attempts far exceed suicide deaths
 - Male suicides significantly exceed female suicides, but not as significant in the younger age category
 - An average of seven suicides annual for 0 –24 year olds with the most recent year (2017) the highest with eleven suicides
 - No trend in suicide deaths increasing or decreasing
 - Means of suicides: hangings/suffocation and firearms
 - Suicide attempts predominantly by females, similar to national and California data.
 - An increase in suicide attempts in recent years, mainly by females, not male
 - Most common mean for suicide attempts are poison followed by cutting/ piercing
 - Often it is stated that less 50% of those dying by suicide had a diagnosis mental health condition. What is less emphasized is how many don't get an evaluation.

Source: California Epicenter <http://epicenter.cdph.ca.gov/ReportMenus/CustomTables.aspx>

What should you know?

- ▶ Certain behaviors, if an individual has them, may indicate suicidal intentions. Called warning signs they include:
 - Suicidal threats in the form of direct (e.g., “I want to die”) and indirect (e.g. “I wish I could go to sleep and not wake up”) statements
 - Suicide notes, plans, online postings
 - Making final arrangements
 - Preoccupation with death
 - Giving away prized possessions
 - Talking about death
 - Sudden unexplained happiness
 - Increased risk taking
 - Heavy drug/alcohol use

- ▶ Take all warning signs seriously and take action

Source: NASP—National Association of School Psychologists

http://briefings.dadeschools.net/files/97265_Preventing_Youth_Suicide.pdf#:~:text=Preventing%20Youth%20Suicide%3A%20Tips%20for%20Parents%20and%20Educators,suicide%20frequently%20give%20warning%20signs.%20Do%20not%20be

What To Be Concerned About?

- ▶ Specific behaviors or conditions that an individual displays indicates a greater risk of suicide. These are called risk factors.
 - Previous suicide attempts
 - History of substance abuse
 - History of mental illness (e.g., depression, anxiety, bipolar, PTSD)
 - Relationship problems (e.g., conflict with parents and/or boy/girlfriends)
 - Legal or disciplinary problems
 - Access to a gun or other harmful means (e.g., pills)
 - Recent death of a family member or a close friend
 - Ongoing exposure to bullying
 - Losing a friend or family member to suicide
 - Physical illness or disability

Source: It's Time to Talk about it A Family Guide for Youth Suicide Prevention

<https://www.sprc.org/sites/default/files/resource-program/Time2TalkAboutItFamilyGuide.pdf>

What To Hope For?

- ▶ There are specific conditions that help protect against suicidal thoughts and intentions. Called protective factors they include:
 - Effective clinical care for mental, physical, and substance abuse disorders
 - Easy access to a variety of clinical interventions and support for help seeking
 - Family and community support (connectedness)
 - Support from ongoing medical and mental health care relationships
 - Skills in problem solving, conflict resolution, and nonviolent ways of handling disputes
 - Cultural and religious beliefs that discourage suicide and support instincts for self-preservation

Source: Risk and Protective Factors

<https://www.cdc.gov/violenceprevention/suicide/riskprotectivefactors.html#:~:text=Risk%20Factors%20for%20Suicide%201%20Family%20history%20of,and%20substance%20abuse.%206%20...%20%28more%20items%29%20>

What To Do?

- ▶ Means restriction:
 - Works because it puts time between the decision to kill ones self and the action. Suicidal urges come and go. The time between the urge and the action is most frequently less than 10 minutes. Putting time between the thought and the act is life saving particularly when the means is very lethal. In these cases there is no second chance. Most who have attempted suicide once and have not died do not go on to die of suicide.

- ▶ Means restriction approaches:
 - Secure firearms: safely store, separate ammunition from weapons, use a gun lock
 - Secure other potentially dangerous objects; like knives, ropes, etc.
 - Store safely and reduce quantity of medicines and secure chemicals and poisons. Try to make sure medications are taken, not hoarded.
 - Limit available alcohol
 - Check arms and legs for cuts

How To Support Someone You Are Concerned About

- ▶ Get suicide prevention training, including Youth Mental Health First Aid, QPR, SafeTalk, etc. These are gatekeeper trainings to help with how to ask helpful questions.
- ▶ Remember it is about overcoming the pain your loved one is experiencing
- ▶ Frequently youth say “I really did not mean it”. Remain vigilance since suicidal urges come and go.
- ▶ Behavioral approaches:
 - Remain calm, nonjudgmental and listen.
 - Ask directly about suicide (e.g., “Are you thinking about suicide”).
 - Focus on your concern for their well-being
 - Avoid being accusatory (e.g., don’t say, “You aren’t going to do anything stupid are you?”).
 - Reassure them that there is help; they will not feel like this forever.
 - Provide constant supervision. Do not leave the youth alone.
 - Remove means for self-harm, especially firearms.
 - Get help! Never agree to keep suicidal thoughts a secret. Tell an appropriate caregiving adult. Parents should seek help from school or community mental health resources as soon as possible. School staff should take the student to a school employed mental health professional.

Source:

http://briefings.dadeschools.net/files/97265_Preventing_Youth_Suicide.pdf#:~:text=Preventing%20Youth%20Suicide%3A%20Tips%20for%20Parents%20and%20Educators,suicide%20frequently%20give%20warning%20signs.%20Do%20not%20be

Be Aware of These Techniques

- ▶ Joint Commission: National Patient Safety Goal NPSG.15.01.01 (2019)
<https://www.jointcommission.org/resources/patient-safety-topics/suicide-prevention/>
 - EP 1: Environmental Risk Assessment
 - EP 2: Validated/ Evidence Based Screening Tools
 - EP 3 & 4: Validated/ Evidence Based Suicide Risk Assessment Tools
 - EP 6: Safety Planning Upon Discharge

- ▶ Hospital/emergency room discharge plan
 - After an Attempt A Guide for Taking Care of Yourself After Your Treatment in the Emergency Department <https://store.samhsa.gov/sites/default/files/d7/priv/sma18-4355eng.pdf#:~:text=A%20Guide%20for%20Taking%20Care%20of.%20Yourself%20After,S.%20Department%20of%20Health%20and%20Human%20Services%20%28HHS%29.> and <https://www.sprc.org/comprehensive-approach/transitions-linkages>

- ▶ A “Personal Safety Plan” consists of:
 1. Use when notice my warning signs (listed)
 2. List of internal coping strategies
 3. People and places that improve my mood
 4. People I trust to help in a crisis (inform them that they are part of the safety plan)
 5. Professional resources (also list crisis and text lines)
 6. Reducing access to means
 7. Complete this sentence, “The one thing that is most important to me and worth living for is...”
Can be placed in a smart phone using the My3 App: <https://my3app.org>
Resource: http://suicidesafetyplan.com/Home_Page.html

What Tools Could You Use?

- ▶ Phone applications:
 - My3App Mental Health <https://my3app.org/>
 - Virtual Hope Box. Helps with coping, relaxation, distraction, and positive thinking <https://play.google.com/store/apps/details?id=com.t2.vhb&hl=en>
 - Not Ok application <https://www.notokapp.com/>
- ▶ Be aware of compassion fatigue
 - Maintain Hope and Self-Care: support efforts can be emotionally exhausting.
 - Never try to handle this situation alone
 - Where the circumstances involve a mental health condition and drug and/or alcohol use: seek dual treatment option, possibly including an integrated treatment program like Assertive Community Treatment (ACT)

What Are The Local Resources?

- ▶ Heard Alliance: <https://www.heardalliance.org>
 - K-12 TOOLKIT FOR MENTAL HEALTH PROMOTION & SUICIDE PREVENTION <https://www.heardalliance.org/help-toolkit/>
- ▶ San Mateo County suicide prevention: <https://www.smchealth.org/suicide-prevention>
 - Suicide Prevention Roadmap (2017-2020) https://www.smchealth.org/sites/main/files/file-attachments/suicide_prevention_road_map.pdf
 - September is Suicide Prevention Month (SPM) <https://www.smchealth.org/suicide-prevention-month>
 - MENTAL HEALTH HOTLINES FOR LGBT TEENS 800-246-PRIDE (7743)
- ▶ National Alliance on Mental Illness Warm Line/Help Desk | 650-638-0800 www.namisanmateo.org
- ▶ Stigma Free (Be the One) San Mateo County <https://www.smchealth.org/bhrs/stigma>
- ▶ San Mateo County Schools Suicide Prevention Protocol (San Mateo County Office of Education) https://www.smcoe.org/assets/files/For%20Schools_FIL/Safe%20and%20Supportive%20Schools_FIL/School%20Safety_FIL/Suicide%20Prevention%20Protocol-%20Fillable.pdf
- ▶ StarVista: crisis and school services, foster youth program, presentations <https://star-vista.org/programs/> and www.star-vista.org
 - 24/7 Crisis Hotline at 650-579-0350 and office phone no. (650) 591-9623
- ▶ On Your Mind www.onyourmind.net
 - California Youth Crisis Line: 24/7 hotline: 800-843-5200

What Are Some National Resources?

- ▶ National Suicide Prevention Line: 1-800-273-8255 (TALK) Live chat: www.suicidepreventionlifeline.org
- ▶ Crisis Text Line (CTL) send to “BAY” or “START” 741741
- ▶ Veterans Crisis Line and Military Crisis Line: 1-800-273-8255 (press 1). Text to 838255. Live chat: <http://www.veteranscrisisline.net>
- ▶ The Trevor Project: 1-866-488-7386. For lesbian, gay, bisexual, transgender, and questioning (LGBTQ) young people. <http://www.thetrevorproject.org>
- ▶ Teen and Youth Hotline: 800-TLC-TEEN (852-8336)
- ▶ Suicide Prevention Resource Center (SPRC): federal government suicide prevention response, including free online trainings, a free weekly online newsletter (Weekly SPARK), etc. <http://www.sprc.org/>
- ▶ American Foundation for Suicide Prevention (AFSP) does nationwide community suicide prevention work, including research, education, and advocacy. <https://afsp.org/>
- ▶ Project Safety Net (Palo Alto): community response to youth suicide prevention and mental wellness <http://www.psnpalalto.com/>
- ▶ American Association for Suicidology, includes an “Attempt Survivor/Lived Experience” division, <http://suicidology.org/suicide-survivors/suicide-attempt-survivors>
- ▶ National Action Alliance for Suicide Prevention: a public/private partnership promoting the National Strategy for Suicide Prevention. Its Suicide Attempt Survivors Task Force wrote The Way Forward: Pathways to hope, recovery, wellness with insights from lived experience. <http://actionallianceforsuicideprevention.org/task-force/suicide-attempt-survivors/>

What Should Be Read?

- ▶ **A JOURNEY TOWARD HEALTH AND HOPE Your Handbook for Recovery After a Suicide Attempt**
<http://store.samhsa.gov/shin/content//SMA15-4419/SMA15-4419.pdf>
- ▶ **Preventing Youth Suicide: Tips for Parents and Educators**
http://briefings.dadeschools.net/files/97265_Preventing_Youth_Suicide.pdf#:~:text=Preventing%20Youth%20Suicide%3A%20Tips%20for%20Parents%20and%20Educators,suicide%20frequently%20give%20warning%20signs.%20Do%20not%20be
- ▶ **It's Time to Talk about it A Family Guide for Youth Suicide Prevention**
<https://www.sprc.org/sites/default/files/resource-program/Time2TalkAboutItFamilyGuide.pdf>
- ▶ **A Parent's Guide to Recognizing and Treating Depression in Your Child**
http://www.yspp.org/downloads/resources/YSPF_depression_Final_low.pdf
- ▶ **AAS Recommendations for Inpatient and Residential Patients Known to be at Elevated Risk for Suicide.** http://www.suicidology.org/c/document_library/get_file?folderId=231&name=DLFE-106.pdf
- ▶ **About Teen Suicide** <http://kidshealth.org/en/parents/suicide.html> (Provides a listen mode for information, in both English and Spanish)

What Should Be Read?

- ▶ After an Attempt: A Guide for Taking Care of Your Family Member After Treatment in the Emergency Department <http://store.samhsa.gov/shin/content/SMA08-4357/SMA08-4357.pdf>
- ▶ After an Attempt: A Guide for Taking Care of Yourself After Your Treatment in the Emergency Department <http://store.samhsa.gov/shin/content/SMA08-4355/SMA08-4355.pdf>
- ▶ After a Suicide Attempt: What Now? <http://www.everythingaddiction.com/science-of-addiction/co-occurring-disorders/after-a-suicide-attempt-what-now/>
- ▶ After An Attempt: The Emotional Impact of a Suicide Attempt on Families http://www.feelingblue.org/uploads/documents/AFTER_AN_ATTEMPT_BOOKLET_1.pdf
- ▶ Taking Action to Prevent Suicide (A Kids Matter! Parent Message) http://www.moundsviewschools.org/cms/lib010/MN01909629/Centricity/Domain/1086/prevent_suicide.pdf
- ▶ After an Attempt: A Guide for Medical Providers in the Emergency Department Taking Care of Suicide Attempt Survivors <http://store.samhsa.gov/shin/content/SMA08-4359/SMA08-4359.pdf>

Never allow a person to tell you No who doesn't have the power to say Yes. – Eleanor Roosevelt

Thank You!