

Section 2: Get Educated

Introduction

You have put together a group of concerned citizens who are willing to donate time and resources to help prevent youth suicide in your community. Pat yourselves on the back for getting involved and getting organized!

Before you can start to do something about it, your team needs to build understanding of the issue and of prevention techniques.

Each week, an average of two young people complete death by suicide in Washington state. Each week, another 14 youth make suicide attempts that result in hospitalization. One out of 6 sixth graders acknowledge seriously considering suicide. 32% of 10th graders reported feeling 'depressed or sad MOST days in the past two weeks'*

While these facts are disturbing, there is hope. Rates for youth suicide have gone down in Washington (see page 3). Still, there is much more that can be done.

YSPSP makes a long-term commitment to changing behaviors and attitudes in individuals, families and communities. We believe that every citizen of the state should understand that while youth suicide is a problem, there is something that can be done about it.

By educating ourselves and others, we can make a difference in preventing youth suicide.



The goal of this section is to:

2.1 Understand the issues

To share the research and make it more fun, 'divide and conquer' to research several topics and bring the results back to the group.

- Scavenger hunt: topics and resources for research

2.2 Share experiences

Learning from others' experiences can be a powerful motivation.

- Questions for a Listening Circle

2.3 Get a Snapshot of the Local Picture

Research facts and statistics about your community's population, deaths, health care resources, risk factors and protective factors.

- Local Data Worksheet: Forms to gather information about your area

2.4 Get Training

- Gatekeeper Training and ASIST workshops

*SOURCE: 2004 Healthy Youth Survey, WA State Department of Health

Fast Facts and Myths about Suicide

- Between 1998 and 2002 there were 517 suicides of young people ages 10 to 24 – an average of nearly 2 per week
- Between 1998 and 2002 there were 3,793 hospitalizations of young people between the ages of 10 and 24, an average of 14 ½ per week
- In 1996 alone, an estimated \$22,000,000 dollars were spent on medical costs for completed and medically treated suicide acts for youth ages 0-20
- Over 32% of 10th graders indicated that they felt sad or hopeless almost every day in the past two weeks
- 17.8% of 10th graders had seriously considered suicide in the past 12 months (one out of 6)
- 13.7% of the 10th graders indicated that they had made a plan about how they would attempt suicide in the past 12 months
- Youth suicides outnumber youth homicides in Washington State
- A 50% reduction in current rates of youth suicide behaviors would save approximately \$12 million a year in hospital-based health care expenses alone*

Myth:

A youth threatening suicide is really not serious about completing suicide.

Fact:

Those youth who talk about suicide or exhibit suicidal behaviors are serious suicide risks. As a friend, parent or professional caregiver, it is better to overestimate the risk of suicide and intervene than to ignore or minimize the behaviors.



Myth:

Suicide cannot be prevented because, somehow, a suicidal youth will find a way to do it.

Fact:

The majority of the time youth who kill themselves have given definite signs or talked about suicide. The keys to prevention are recognizing the warning signs and knowing what to do to help. Remember that most suicidal youth do not really want to die, they just want their pain to end.

Myth:

Talking about suicide will cause someone to attempt suicide.

Fact:

Talking about suicide does not create or increase risk; it actually reduces it. If you have observed any of the warning signs, chances are the youth is already thinking about suicide. Be direct in a caring, non-confrontational way; ask the question, "Are you thinking about suicide?" Open talk and genuine concern are sources of relief and key elements in preventing the immediate danger of suicide.

"Until my son killed himself, I believed suicide was a rare occurrence. As long as we believe that it happens only to others and not to people like us, we can ignore this problem and children will continue to kill themselves at an alarming rate."

— Editorial, The Spokesman Review

*SOURCES: WA DOH Injury Prevention Program, Children's Safety Network, 2004 Healthy Youth Survey

Know the Warning Signs

Most suicidal young people don't really want to die; they just want their pain to end. About 80% of the time, people who kill themselves have given definite signals or talked about suicide. The key to prevention is to know these signs and what to do to help.

Watch for these signs:

They may indicate someone is thinking about suicide. The more signs you see, the greater the risk.

- A previous suicide attempt
- Current talk of suicide or making a plan
- Strong wish to die or a preoccupation with death
- Giving away prized possessions
- Signs of depression, such as moodiness, hopelessness, withdrawal
- Increased alcohol and/or other drug use
- Hinting at not being around in the future or saying good-bye



What to do if you see the warning signs?

If a young person mentions suicide, take it seriously. If he or she has expressed an immediate plan, or has access to a gun or other potentially deadly means, **do not leave him or her alone. Get help immediately.**

Follow the 3 action steps "What You Can Do" on the next page.

Warning signs are especially noteworthy in light of these Risk Factors:

- A recent death or suicide of a friend or family member
- A recent break-up with a boyfriend or girlfriend, or conflict with parents
- News reports of other suicides by young people in the same school or community
- Readily accessible firearms
- Impulsiveness and taking unnecessary risks
- Lack of connection to family and friends (no one to talk to)

Protective factors can help reduce the risk of suicidal behaviors:

- **Family:** Encouraging parents, family support, someone who is available, siblings or extended family who are involved
- **Community:** Neighbors who praise accomplishments, supportive church members, family friends who listen
- **School:** Friends to talk to, a teacher or coach who notices progress, Somebody who believes in the youth
- **Individual/peer:** Prayer, self-esteem, sense of control, guilt, sense of responsibility, problem-solving, coping skills, friends, fear of dying, ability to express one's self with poetry, artwork, or music

What You Can Do

Show You Care

Often, suicidal thinking comes from a wish to end deep psychological pain. Death seems like the only way out. But it isn't.

Let the person know you really care. Talk about your feelings and ask about his or hers. Listen carefully to what they have to say.

- "I'm worried about you, about how you feel."
- "You mean a lot to me. I want to help."
- "I'm here, if you need someone to talk to."



Ask the Question

Don't hesitate to raise the subject. Talking with young people about suicide won't put the idea in their heads. Chances are, if you've observed any of the warning signs, they're already thinking about it. Be direct in a caring, non-confrontational way. Get the conversation started.

- "Are you thinking about suicide?"
- "Do you really want to die?"
- "Do you want your problems to go away?"



Get Help

Never keep talk of suicide a secret, even if they ask you to. Do not try to handle the situation on your own. You can be the most help by referring your friend to someone with professional skills to provide the help that he or she needs, while you continue to offer support.

- "I know where we can get some help."
- "Let's talk to someone who can help...let's call the crisis line, now."
- "I can go with you to get some help."



Resources for Help

- School counselor, teacher or coach
- Crisis telephone hotline [local, 1-800 SUICIDE 1-800-273-TALK]
- Private therapist or counselor
- Mental health agency
- Hospital emergency room
- Clergy or religious leader

2.1. Research Scavenger Hunt

To make the learning process more interactive, try this scavenger hunt:

1. Divide the topics among members. Sign up names on the form below.
2. Team members find information on their topic, using the resources on the following pages. Provide a certain amount of time for research (until the next meeting).
3. Schedule an education session. Each member summarizes and shares information with the group. Bring printouts, notes or mini-reports with basic facts.
4. Remember that each of these topics could be the basis of a book. The idea is to digest the information and present a high-level overview to educate your team.

Suggested Scavenger Hunt Topics	Person to research and summarize for group
Risk Factors: List several factors that, in combination, could increase the risk of suicide.	
Protective Factors: List some of the factors that can help protect youth from risk of suicide.	
Warning Signs: list several.	
Depression and Youth: list some signs of depression and its role in youth suicide.	
Anxiety: list some signs of anxiety and its role in youth suicide.	
Prevention Steps: <ul style="list-style-type: none"> ▪ Show you Care: suggest ways to show you care. ▪ Ask the Question: offer ways to ask the question. ▪ Get Help: What is the local crisis hotline number? 	
Prevention Strategies: <ul style="list-style-type: none"> ▪ Name some Universal strategies that target the public at large. ▪ Selected strategies are for those who work with youth. Name a few. ▪ Indicated strategies are aimed at high-risk individuals. Name a few. 	
Postvention: What should be done after a suicide?	
Children and Grief: how do young people react differently to grief?	

Scavenger Hunt: web research resources

Many of these websites contain vast amounts of information. "About Suicide" or "FAQs" (Frequently Asked Questions) sections are good areas to begin. These websites also have resource links to take you further.

The Bibliography on page 27 lists books and videos you may find in your local library.

- Youth Suicide Prevention Program of Washington State: www.yspp.org
- American Association of Suicidology (AAS): www.suicidology.org
- Suicide Prevention Resource Center:
www.sprc.org
- National Institute of Mental Health
www.nimh.nih.gov/suicideprevention
- SAVE: Suicide Awareness Voices of Education (resource on suicide and depression)
www.save.org
- The Dougy Center for Grieving Children & Families
www.dougy.org



Bibliography

Books for Parents about Adolescent Depression & Suicide

Title	Author
A Parent's Guide for Suicidal & Depressed Teens	Kate Williams
Lonely, Sad & Angry: A Parent's Guide to Depression in Children & Adolescents	Barbara Ingersoll & Sam Goldstein
Understanding Your Teenager's Depression: Issues, Insights & Practical Guidance for Parents	Kathleen McCoy
Help Me, I'm Sad, Recognizing, Treating, And Preventing Childhood And Adolescent Depression	David Fassler and Lynne Dumas
Helping Your Child Cope with Depression & Suicidal Thoughts	Tonia Shamoo & Philip Patros
Coping with Depression in Young People: a guide for parents	Carol Fitzpatrick & John Sharry

Books for Teens about Depression, Suicide & Self-Injury

Title	Author
When Nothing Matters Anymore, A Survival Guide For Depressed Teens	Bev Cobain
Living When a Young Friend Commits Suicide or Even Starts Talking About It	Earl A. Grollman & Max Malikow
Life Happens	Kathy McCoy & Charles Wibbelsman
Conquering the Beast Within	Cait Irwin
When Living Hurts	Sol Gordon
Recovering from Depression: A Workbook for Teens	Mary Ellen Copeland & Stuart Copans
The Power to Prevent Suicide: a guide for teens helping teens	Richard Nelson & Judith Galas
Self-Mutilation: a helping book for teens who hurt themselves	Alicia Clarke

Books about Suicide and Suicide Prevention

Title	Author
Night Falls Fast - Understanding Suicide	Kay Redfield Jamison
No One Saw My Pain: Why Teens Kill Themselves	Andrew Slaby and Lili Garfinkel
Suicide The Forever Decision - For those Thinking About Suicide And For Those Who Know, Love, Or Counsel Them,	Paul Quinnett
Making Sense of Suicide: An In-Depth Look At Why People Kill Themselves	David Lester
Adolescent Suicide Assessment & Intervention	Alan Berman & David Jobes
Waking Up Alive	Richard Heckler
The Suicidal Mind	Edwin Shneidman
Adolescent Depression & Suicide	John Wodarski, Lois Wodarski & Catherine Dulmus
Suicide Intervention in the Schools	Scott Poland

Books about Self-Injury

Title	Author
Self-Mutilation: Theory, Research & Treatment	Barent Walsh & Paul Rosen
A Bright Red Scream	Marilee Strong
Bodies Under Siege	Armando Favazza
Skills Training Manual for Treating Borderline Personality Disorder	Marsha Linehan
Depressed & Anxious: the Dialectical Behavioral Therapy Workbook for overcoming depression & anxiety	Thomas Marra
The Anxiety & Phobia Workbook	Edmund Bourne
Don't Shoot the Dog - the new art of teaching & training	Karen Pryor

Books about Surviving the Loss of a Loved One to Suicide

Title	Author
My Son, My Son...A Guide To Healing After A Suicide In The Family	Iris Bolton
Singing Lessons	Judy Collins
His Bright Light	Danielle Steel
Prayers for Bobby: A Mother's Coming to Terms With the Suicide of Her Gay Son	Leroy Aarons
After Suicide	John Hewett
Helping Children Grieve	Theresa M. Huntley
A Special Scar: the experiences of people bereaved by suicide	Alison Wertheimer
But I Didn't Say Goodbye	Barbara Rubel
After a Suicide: A workbook for grieving kids	The Dougy Center
After Suicide Loss: Coping with your grief	Bob Baugher & Jack Jordan
No Time to Say Goodbye	Carla Fine

Videos

Title	Produced By
Depression: On the Edge	"In the Mix" 114 E. 32nd Street #903 New York, New York 10016
Fatal Mistakes: Families Shattered By Suicide	American Foundation for Suicide Prevention 120 Wall Street, 22nd Floor New York, New York 10003
Day for Night: Recognizing Teenage Depression	DRADA (Depression & Related Affective Disorders Association) Meyer 3-181, 600 Wolfe Street Baltimore, Maryland 21287-7381
A Cry for Help	Paraclete Press 39 Eldridge Road Brewster, MA 02631

2.2 Listening and Learning

Youth suicide is a multi-faceted, charged emotional issue with a long tradition of silence. Perhaps we have the hope that if we don't bring it up, maybe it will go away. It is important to begin to break down the stigma associated with talking about suicide.

" Their (survivors) personal stories make others want to get involved."

– GHCF Community Networks Report

Some communities are beginning to talk more openly about it, because they don't want to lose any more young people. We encourage frank discussion because it is a deep source of learning.

Some survivors of suicide - after a period of grieving - become active in suicide prevention, and tell the stories of their losses. Their stories engage us deeply, and create a sense of compassion and empathy. These emotions can motivate us in ways that statistics and facts cannot.

The intent of this exercise is to encourage learning through others' experiences and to clarify intentions.

A listening circle is simply a small group conversation in which only one person speaks at a time, and everyone agrees to keep all that is said confidential. The questions can be stated at the beginning, and all have a chance to answer in turn.

Questions to consider in a Listening Circle:

1. What is your motivation to work in suicide prevention?
2. Do you have any personal or professional experience with a suicide?
3. What lessons have you learned, and wish to convey in the process of education?



2.3 Gather Information About the Local Picture

You can find some of this information through the 2000 census website:

<http://factfinder.census.gov>

Death rates by age and county are found at the Department of Health website:

http://www.doh.wa.gov/cfh/Injury/data_tables/table_directory.htm

Population of youth aged 10-24 according to 2000 census: _____

Racial breakdown of youth aged 10-24: _____

Actual suicides (attempts or completed) among this population in past year(s):

Number of fatal attempts _____

Number of non-fatal attempts _____

Medical care services available: _____

Mental health services available: _____

List any or all suicide prevention services/activities/programs/plans presently taking place in the community. Any school-based programs? _____

Community Needs and Resources

You could look at the circumstances surrounding recent suicides to help identify risk factors. Consider how protective factors can be strengthened in your community, to counteract the risk factors. Examples of risk and protective factors appear on page 23.

Risk Factors:

(Examples: suicide prevention not taught in schools, access to firearms, no after-school activities)

Resources/Assets and protective factors

(Examples: a safe school environment, encouraging parents, positive self-esteem)

What can be done?

To reduce risk factors, or improve community protective factors:

(Examples: initiate school-based education program, work with Washington Cease Fire to reduce exposure to firearms)

2.4 Get Training

To ensure your group fully understands the nuances of youth suicide prevention and intervention, we recommend that at least one member of your team receive Gatekeeper Training.

Gatekeeper Training is designed for adults who work with young people on a daily basis: teachers, school counselors, mental health and social service professionals, police, clergy, health care practitioners, youth group leaders and others.

There are fees involved, so you'll have to decide how to pay for the training.



Applied Suicide Intervention Skills Training (ASIST)

ASIST is a 2-day workshop designed to teach the skills to competently and confidently intervene with a youth at risk of suicide. Developed by LivingWorks Education, Inc., the workshop prepares Youth Gatekeepers to integrate principles of intervention into everyday practice.

The curriculum is divided into 4 learning modules: connecting, understanding, assisting and networking. Skills and principles are illustrated with case studies presented in videos and live dramatizations, role-play simulations, discussions and in the Suicide Intervention Handbook.

By the end of the workshop, participants will be better able to:

- Reduce attitudinal barriers which hinder the ability to be direct and comfortable with suicidal situations
- Dispel myths about youth suicide
- Identify the indicators and assess suicidal risk
- Intervene with a youth at risk of suicide
- Engage in efforts to build collaborative resource networks for suicidal youth.

Trainers hold advanced degrees in social work, counseling or psychology, and are certified by LivingWorks Education, Inc. as accomplished practitioners in suicide prevention, intervention and postvention.

Go to www.YSPSP.org/training for information on upcoming ASIST workshops and fees.

" We all need suicide prevention training – just like CPR. "

– Executive Summary,
1995-97 YSPSP Report