

Protecting Our School Community

Essential
Information
about Youth
Suicide
for Students,
Families, and
Trusted Adults

PRESENTERS:

- ▶ TODD A. SAVAGE, PH.D., NCSP
- ▶ SCOTT A. WOITASZEWSKI, PH.D., NCSP
- ▶ ANNE ZASLOFSKY, PH.D., NCSP

MOUNDS PARK ACADEMY

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Objectives

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- ▶ To raise awareness about youth suicide and related issues
- ▶ To recognize the critical role of “gatekeepers” in suicide prevention
- ▶ To discuss MPA’s commitment to suicide prevention and mental health education

Check your
knowledge
about
suicide



We will use Pollev.com/scottwoitaz206

Three Questions - Quick
Optional
Anonymous

If you talk to people about their suicidal feelings, you will probably increase their likelihood of completing suicide.

True

False

I'm not
really sure

When people talk about suicide, they're usually just looking for attention. Ignoring them is the best thing to do.

True

False

I'm not
really sure

All suicidal people want to die and there is not much than can be done about it.

True

False

I'm not
sure

An Evidence-Based Framework for Preventing Suicide (American Foundation for Suicide Prevention, 2011)

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- ▶ Gatekeeper training
- ▶ Suicide education
- ▶ Restriction of lethal means
(e.g., guns, illicit substances)
- ▶ Provide mental health
intervention to individuals
with, or who are at-risk for,
depression and/or anxiety
disorders



Magnitude of the Problem

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(2019 National Data – Latest available as of February 2021)

- ▶ Suicidal Ideation and Related Behaviors in 2019₁
 - ▶ 18.8% seriously considered suicide (up from 17.2% in 2017)
 - ▶ 15.7% made a suicide plan (up from 13.7% in 2017)
 - ▶ 8.9% attempted suicide (up from 7.4% in 2017)
 - ▶ 2.5% of attempt required medical attention (up from 2.4% in 2017)
- ▶ Youth Suicide Deaths in 2019₂
 - ▶ 10-14 yr. olds = 3rd leading cause of death
 - ▶ 15-19 yr. olds = 2nd leading cause of death
 - ▶ For 12-18 years old, the suicide rate increased with age from about 2 to 12 per 100,000
 - ▶ While rare, children as young as 8 years old died by suicide in 2019
- ▶ 100 to 200 attempts for each completed suicide₂

¹CDC (2020): https://www.cdc.gov/healthyyouth/data/yrbs/2019_tables/pdf/2019_MMWR-SS_Tables.pdf

²CDC (2021): <https://webappa.cdc.gov/sasweb/ncipc/leadcause.html>

Firearms and Suicide

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- ▶ About 2/3 of all gun deaths (all ages) are completed suicides
- ▶ In 2019, Minnesota ranked 22nd in overall suicide rate among all states (Alaska, South Dakota, and Montana were 1-2-3). Often, where there are more guns per capita there are more suicides.
- ▶ In 1994 Walmart ended handgun sales. Suicide rates dropped significantly (about 3-7%) between 1994 -2005 in counties with Walmarts¹.
- ▶ When a person uses a firearm in an attempt to die by suicide, death is the result 85% of the time (compared to 3% of fatalities that follow a drug overdose; Drexler, 2017).
- ▶ Cause of death by suicide - 2019²:
 - ▶ 46% of all 14-18 year old suicides are by a firearm
 - ▶ 51% of 14-18 year old male suicides are by a firearm
 - ▶ 25% of 14-18 years old female suicides are by a firearm

¹Ayers, Shelley, & Vars (2021). [The Walmart Effect: Testing Private Interventions to Reduce Gun Suicide | Journal of Law, Medicine & Ethics | Cambridge Core](#)

²CDC (2021): <https://webappa.cdc.gov/sasweb/ncipc/mortrate.html>

Completed Suicide Rates Over Time

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- The rate of completed suicide among youth aged 10 to 24 increased nearly 60% between 2007 and 2018. The rise occurred in most states, with 42 states experiencing significant increases¹
- Hypothesized factors:
 - Economic downturn of 2007
 - Climate change an increasing concern for young people
 - Fear of school shootings
 - Prohibitive cost of college
- **Possible common thread:** Young people may be at higher risk when they struggle to imagine their future

¹CDC (2020). [National Vital Statistics Reports Volume 69, Number 11 September 11, 2020 State Suicide Rates Among Adolescents and Young Adults Aged 10–24: United States, 2000–2018 \(cdc.gov\)](#)

Considerations for Special Populations

- Special populations often are at higher risk¹:
 - ADHD
 - Bulimia, Anorexia, and other eating disorders
 - LGBTQ++
 - Depression
 - Anxiety

¹Cruz & Gesmondi (2017)

► **Given the data trends:**

- Suicide education and prevention should be priorities for schools
- Discussion opportunities for families

► **Let's turn our attention to prevention and intervention...**

- Be aware of risk factors
- Be aware of warning signs
- Be aware of protective factors
- Be aware of resources
- Be proactive

OK... so what now?

Risk Factors

(Factors that may make someone more vulnerable to consider or to attempt suicide)

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Internal

- ▶ Perceptions of isolation or aloneness
- ▶ Expressions of hopelessness, significant impulsivity, hallucinations, delusions
- ▶ Substance use/abuse
- ▶ LGBTQ+ identity
- ▶ Being male
- ▶ Physical health problems
- ▶ Previous episodes of self-harm



External

- ▶ Access to means, including firearms in the home
- ▶ Interpersonal conflict (break-ups, peer group issues, other rejections)
- ▶ Bullying, cyberbullying
- ▶ Family conflict or dysfunction
- ▶ Changes in personal security (e.g., threat of deportation)
- ▶ Increased community violence

Warning Signs of Suicidal Ideation

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- ▶ Warning signs are clues that suicidal ideation may already be present regardless of risk factors
- ▶ Four out of five suicide victims display warning signs, often providing verbal clues

Examples of Verbal Warning Signs

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1. *"Everybody would be better off if I just weren't around."*
2. *"I'm not going to bug you much longer."*
3. *"I wish I would just go to sleep and never wake up."*
4. *"I've tried everything but nothing seems to help."*
5. *"Nobody can help me."*
6. *"I want to kill myself but I don't have the guts."*
7. *"I'm no good to anyone."*
8. *"If my (father, mother, teacher) doesn't leave me alone I'm going to kill myself."*
9. *"Don't buy me anything. I won't be needing any (clothes, books)."*

NOTE: These are just examples. Not an exhaustive list.

Examples of Behavioral Warning Signs

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General

- ▶ *Writing of suicidal notes (posting on social media)*
- ▶ *Making final arrangements*
- ▶ *Giving away prized possessions*
- ▶ *Reading, writing, and/or art about death*
- ▶ *Increased risk-taking*
- ▶ *Increased heavy use of alcohol or drugs*

Symptoms of Depression

- ▶ *Sudden loss of interests*
- ▶ *Increased withdrawal*
- ▶ *Increased irritability*
- ▶ *Change in self-esteem*
- ▶ *Difficulty concentrating*
- ▶ *Sleep difficulties*
- ▶ *Sudden changes in appetite*
- ▶ *Abrupt changes in personality or attitude*
- ▶ *Social withdrawal and isolation*

Key Protective Factors

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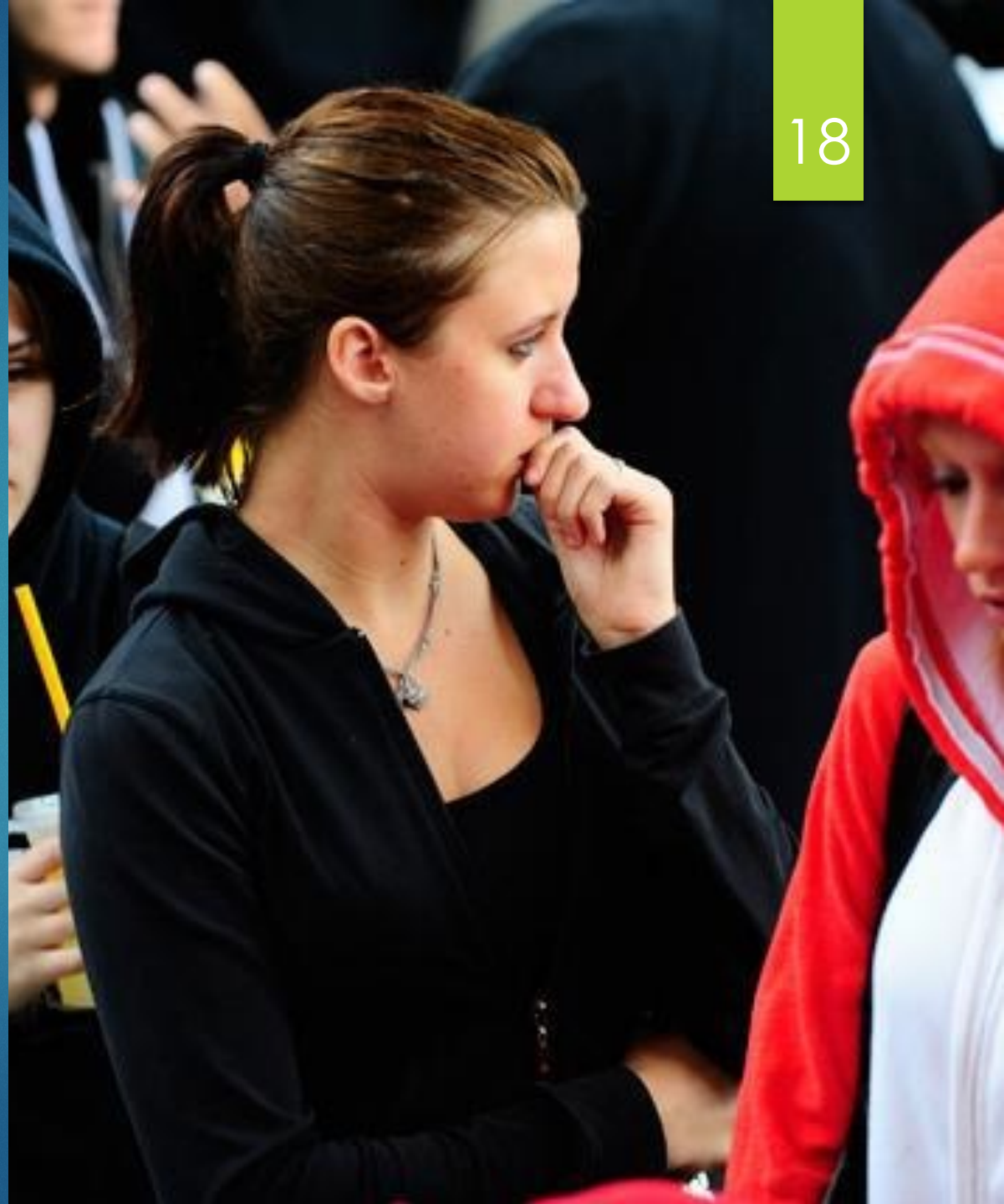
- ✓ Caregiver willingness to convey empathy while talking about challenging issues such as mental health and bullying
- ✓ Caregiver awareness of risk factors and warning signs
- ✓ School emphasis on a positive school climate and “psychological safety” (e.g., connectedness, collaboration, resiliency, respect for diversity)

What if a Suicide Does Happen?

Preventing Suicide Contagion

Suicide contagion

- ▶ "...a process by which exposure to the suicide or suicidal behavior of one or more persons influences others to commit or attempt suicide."
- ▶ "The effect of clusters appears to be strongest among adolescents."



Suicide Contagion

- **Exposure to schoolmate suicide**

- ▶ 12 to 13 years old – 5x more likely to have suicidal ideation
- ▶ 14 to 15 years old - 3x more likely
- ▶ 16 to 17 years old – 2x more likely
 - ▶ By this age, 24% had a schoolmate die by suicide

http://www.cmaj.ca/site/misc/pr/21may13_pr.xhtml (2013)

Preventing Suicide Contagion

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- ▶ Avoid romanticizing or glamorizing the victim or the suicide
- ▶ Virtual memorials must only be used with caution, with adult support included
- ▶ Contagion behaviors are not uncommon (remember the ACT model).



See *After a Suicide: A Toolkit for Schools, 2nd Edition* (2018)
<http://www.sprc.org/sites/default/files/resource-program/AfteraSuicideToolkitforSchools.pdf>

What Else Can We Do?

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▶ If you suspect your child or someone you know is suicidal...

- ▶ Provide constant supervision
- ▶ Ask directly if they are thinking about suicide
- ▶ Listen and avoid judgment
- ▶ Do not agree to keep the issue a secret
- ▶ Remove any means of self-harm
- ▶ Reassure the youth there is help
- ▶ Seek assistance from MPA or community-based mental health professionals

▶ Consider the *Preventing a Suicide Toolkit* (DiCara, O'Halloran, Williams, & Canty-Brooks, 2009)

▶ Recommendations include:

- ▶ Schools should educate school staff, students, and families on youth suicide/suicidal behaviors
- ▶ Schools should have screening programs in place
- ▶ For more, see:
<https://store.samhsa.gov/shin/content//SMA12-4669/SMA12-4669.pdf>

Wise Consumption of Media

- ▶ Take note of shows, memes, videos, etc. that...
 - ▶ Romanticize suicide
 - ▶ Portray adult ineffectiveness
 - ▶ Model ineffective coping by youth
 - ▶ Include graphic, realistic issues and imagery
 - ▶ All of these may raise contagion concerns
 - ▶ Be aware; monitor; discuss; seek help!



Publicize hotline numbers (such as Lifeline: **1-800-273-8255**) and information about school and community mental health resources

Next Steps at MPA

1

Periodic
gatekeeper
training and
depression and
suicide education

2

Depression and
suicide risk
screenings

3

Raise awareness
of your school-
based mental
health
professionals

Questions

Presenter Contacts

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Dr. Todd A. Savage, Ph.D., NCSP

Professor

School Psychology Program

University of Wisconsin-River Falls

Past President, National Association of School Psychologists

todd.savage@uwrf.edu

Dr. Scott A. Woitaszewski, Ph.D., NCSP

Professor & Director

School Psychology Program

University of Wisconsin-River Falls

scott.woitaszewski@uwrf.edu

Dr. Anne Zaslofky, Ph.D., NCSP

Assistant Professor

School Psychology Program

University of Wisconsin-River Falls

anne.zaslofky@uwrf.edu