

Youth Suicide: Keeping Kids Safe

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Act 71 of 2014

- Why necessary?
 - Many schools not doing anything related to suicide prevention.
 - Generic crisis plan does not address specific nuances of suicide prevention, intervention, and postvention

Act 71

Beginning with 2015-2016 school year

- Each school entity SHALL:
 - Adopt an age appropriate youth suicide awareness and prevention policy, inform each school entity employee and parent of each student, and post policy on website. Policy may be based on policy developed by PDE
 - Include in professional development plan four hours of training in youth suicide awareness and prevention every five years for professional educators in school buildings serving students in grades 6-12

Act 71

Department of Education SHALL:

- Develop a model youth suicide awareness and prevention policy
- Compile, develop, and post on its website
 - Recommended guidelines and educational materials for training of educators
 - Recommended resources and age-appropriate educational materials on youth suicide awareness and prevention
- Develop a model youth suicide awareness and prevention curriculum and make such curriculum available to all school entities. A school entity MAY incorporate it into its existing instructional program

Act 71

Model policy developed by PDE shall include

- Statement on youth suicide awareness and prevention
- Protocols for administering youth suicide awareness and prevention education to staff and students
- Methods of prevention
- Methods of intervention
- Methods of responding to student or staff suicide or suicide attempt
- Reporting procedures

PDE's Priority Teacher Training Topics

1. Suicide Prevention 101 and Debunking Myths
2. School-Related Epidemiology
3. Risk Factors vs Warning Signs
4. Risk and Protective Factors
5. Warning Signs
6. Review of School District Policies and Procedures
7. How Educators Can Respond to Youth about Whom They are Concerned
8. Safe Messaging
9. Postvention

Why does it matter?

Understanding the National Problem of Youth Suicide

- 4,874 people under age 25 died by suicide (12.7% of total).
- 1 young person dies by suicide every hour and 47 minutes.
- **Suicide is the 2nd leading cause of death for youth ages 12-18 years (CDC, 2013 data).**
- In 2013, 179 children age 15 and younger died by suicide.

Pennsylvania Statistics

- 14.5% of high school students seriously considered suicide
- 11.3% had a suicide plan
- 6.9% of youth attempted suicide
- 29% sometimes thought life was not worth living

- 2nd leading cause of death in high school students in PA
- LEADING cause of death in 10-14 year-olds in PA (37% of all deaths in 2013)

Warning Signs for Youth Suicide

Risk Factors vs. Warning Signs

- Risk Factor:
 - A measurable characteristic, variable, or hazard that increases the likelihood of the development of an adverse outcome
 - A risk factor precedes the outcome in time
 - Examples: mental illness (especially depression and other mood disorders), victimization, LGBTQ, being male?
- Warning Sign:
 - A measurable change in behavior, thoughts, feelings, or other indicators in the near future (e.g., minutes, days, up to 1 week) prior to a life-threatening suicidal behavior
 - Relates to current, episodic functioning with proximal relationship to behavior
 - This is what clinicians want to know

Risk Factors vs. Warning Signs

- Key difference = warning signs are near-term risk factors with the greatest available evidence suggesting the highest likelihood of a suicidal behavior occurring in the immediate future

So What Happens if We Search the Internet for “Youth Suicide Warning Signs?”

- Google search found “about 241,000” sites (in 0.4 secs)
- Yahoo found 31.2 million results
- Bing found 37.2 million results
- Sites for participating members in the National Council for Suicide Prevention have more uniformity
- Among the warning signs on display for the public are:
 - Visiting or calling people one cares about
 - Accident-prone (carelessness)
 - Neglecting schoolwork
 - Confusion
 - Neurotransmitter problem



SUICIDE

It's the only way out.

So What is the Message to the Public?

- Vague, inconsistent, non-observable, lacked empirical support
- Even the leading organizations have some level of disagreement
- Perhaps anything could be a warning sign, so
 - A) worry about everything
 - B) worry about nothing
- There is no consensus on what to do
 - Exception = call the Lifeline

Youth Suicide Warning Signs

1. Talking about or making plans for suicide
2. Expressing hopelessness about the future
3. Displaying severe/overwhelming emotional pain or distress
4. Showing worrisome behavioral cues or marked changes in behavior, particularly in the presence of the warning signs above. Specifically, this includes significant:
 - Withdrawal from or changing in social connections/situations
 - Recent increased agitation or irritability
 - Anger or hostility that seems out of character or out of context
 - Changes in sleep (increased or decreased)

If you notice warning signs for suicide in anyone, you can help!

1. Ask if they are ok or if they are having thoughts of suicide
2. Express your concern about what you are observing in their behavior
3. Listen attentively and non-judgmentally
4. Reflect what they share and let them know they have been heard
5. Tell them they are not alone
6. Let them know that there are treatments available that can help
7. If you are or they are concerned, guide them to professional help

Homepage

Page for youth

YOUTH SUICIDE WARNING SIGNS

SUICIDE PREVENTION CENTER
1-800-273-TALK

YOUTH HEALTHCARE PROFESSIONALS PARENTS/CAREGIVERS GATEKEEPERS ABOUT

NO ONE WANTS TO LOSE A YOUNG PERSON TO SUICIDE

There is hope and there is help.

For more information on the warning signs of suicide and what you can do to help, click on the image that best describes you.

YOUTH



HEALTHCARE PROFESSIONALS





PARENTS & CAREGIVERS





GATEKEEPERS

NO ONE WANTS TO LOSE A YOUNG PERSON TO SUICIDE

There is hope and there is help.

What are the warning signs?

Click [here](#) to find out..

The Warning Signs on this site apply up to the age of 24. Click [here](#) for adult warning signs.

If you are concerned about someone, ask yourself the following questions. Has your friend or family member shown or shared any of the following:



1. Talking about wanting to die, be dead, or about suicide, or are they cutting or burning themselves?
2. Feeling like things may never get better, seeming like they are in terrible emotional pain (like something is wrong deep inside but they can't make it go away), or they are struggling to deal with a big loss in their life?
3. Or is your gut telling you to be worried because they have withdrawn from everyone and everything, have become more worried or on edge, seem unusually angry, or just don't seem normal to you?

WHAT YOU CAN DO TO HELP **HOW TO RESPOND**

if you know someone who has any of the warning signs, there are things that you can do to help:



1. Ask them if they are okay and listen to them like a true friend.
2. Tell them you are worried and concerned about them and that they are not alone.
3. Talk to an adult you trust about your concerns and direct the adult to [this page](#).

DON'T KEEP SOMEONES SUICIDAL THOUGHTS AND PLANS A SECRET.

REMEMBER THAT BEING A GOOD FRIEND CAN HELP SAVE A LIFE

THANK YOU FOR CARING ENOUGH TO MAKE A DIFFERENCE



Healthcare Professionals

The following signs may mean that a youth is at risk for suicide, particularly in youth who have attempted suicide in the past:

Risk is greater if the warning sign is:

- new and/or
- has increased and
- possibly related to an anticipated or actual painful event, loss, or change.

Finally, the presence of more than one of the following warning signs may increase a youth's risk for engaging in suicidal behaviors in the near future.

[Youth Suicide Warning Signs](#) | [How to Respond](#) | [Finding Help](#)

Youth Suicide Warning Signs

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4. Showing worrisome behavioral cues or marked changes in behavior, particularly in the presence of the warning signs above. Specifically, this includes significant:
 - *Withdrawal from or changing in social connections/situations*
 - *Changes in sleep (increased or decreased)*
 - *Anger or hostility that seems out of character or out of context*
 - *Recent increased agitation or irritability*



How to Respond

If you notice any of these warning signs in anyone, you can help!

1. Ask if they are ok or if they are having thoughts of suicide
2. Express your concern about what you are observing in their behavior
3. Listen attentively and non-judgmentally
4. Reflect what they share and let them know they have been heard
5. Tell them they are not alone
6. Let them know there are treatments available that can help

7. Guide them to professional help

Pages for Professionals, Parents and Caregivers, Gatekeepers

Parents and Caregivers

If you are concerned about your son or daughter, ask yourself the following questions. Has your son or daughter shown or shared any of the following:

1. Talk about wanting to die, be dead, or about suicide, or are they cutting or burning themselves?
2. Feeling like things may never get better, seeming like they are in terrible emotional pain (like something is wrong deep inside but they can't make it go away), or they are struggling to deal with a big loss in their life?
3. Or is your gut telling you to be worried because they have withdrawn from everyone and everything, have become more anxious or on edge, seem unusually angry, or just don't seem normal to you?

[How to Respond](#) | [Are you Still Concerned?](#) | [Finding Help](#)

How to Respond

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Gatekeepers

Gatekeepers are anyone who has a meaningful and important role may include grandparents and other relatives, neighbors, teacher pastors, coaches, mentors, etc. Gatekeepers generally have prof experience with the young people in their lives, either from regular interaction with them on a routine basis such that they would recognize changes for that young person.

If you are concerned about someone, ask yourself the following questions:

1. Talk about wanting to die, be dead, or about suicide, or are they cutting or burning themselves?
2. Feeling like things may never get better, seeming like they are in terrible emotional pain (like something is wrong deep inside but they can't make it go away), or they are struggling to deal with a big loss in their life?
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Youth Suicide

Safety Planning



Acknowledgements

Greg Brown, PhD (Penn)

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Major Challenges

1. How can a youth manage a suicidal crisis in the moment that it happens?
2. How can a clinician/counseling help the youth to do this?

Suicide Risk Assessment



Mental Health Referral/Treatment

Why We Need to Intervene Outside of Specialty Mental Health?

- Individuals often do not have a way to manage their crises
- Many of these individuals may not engage in follow-up treatment
 - Don't perceive it as problem
 - Prefer to work on it within own family

“No-Suicide Contract”

- No-suicide contracts ask youth to promise to stay alive without telling them **how** to do so
- No-suicide contracts may provide a false sense of assurance to the clinician

What is a Safety Plan?

- Prioritized written list of ***coping strategies and resources*** for use during a suicidal crisis
- Provides a sense of control/framework
- Brief process
- Accomplished via an easy-to-read format using the student's own words
- Involves a ***commitment to the treatment process*** (and staying alive)

Who Develops the Plan?

- Collaboratively developed by the clinician *and* the youth in any clinical setting
- **Youth** who have
 - made a suicide attempt
 - have suicidal ideation
 - have psychiatric disorders that increase suicide risk
 - otherwise been determined to be at high risk for suicide

When is it Appropriate and Not Appropriate?

- Usually follows a suicide risk assessment
- A safety plan may be done at **any** point during the assessment or the treatment process
- Safety plan may not be appropriate when youth are at **imminent** suicide risk or have **profound** cognitive impairment
- The clinician should adapt the approach to the youth's needs—such as involving family members in using the safety plan

How is it Done?

- Clinician and youth should sit ***side-by side***, use a problem solving approach, and focus on developing the safety plan
- Safety plan should be completed using a paper form with the youth for written documentation
- New app available – Safety Net



SAMPLE SAFETY PLAN

Step 1: Warning signs (thoughts, images, mood, situation, behavior) that a crisis may be developing:

1. _____
2. _____
3. _____

Step 2: Internal coping strategies - Things I can do to take my mind off my problems without contacting another person (relaxation technique, physical activity):

1. _____
2. _____
3. _____

Step 3: People and social settings that provide distraction:

1. Name _____ Phone _____
2. Name _____ Phone _____
3. Place _____ 4. Place _____

Step 4: People whom I can ask for help:

1. Name _____ Phone _____
2. Name _____ Phone _____
3. Name _____ Phone _____

Step 5: Professionals or agencies I can contact during a crisis:

1. Clinician Name _____ Phone _____
Clinician Pager or Emergency Contact # _____
2. Clinician Name _____ Phone _____
Clinician Pager or Emergency Contact # _____
3. Local Urgent Care Services _____
Urgent Care Services Address _____
Urgent Care Services Phone _____
4. Suicide Prevention Lifeline Phone: 1-800-273-TALK (8255)

Step 6: Making the environment safe:

1. _____
2. _____

Safety Plan Treatment Manual to Reduce Suicide Risk: Veteran Version (Stanley & Brown, 2008).

The one thing that is most important to me and worth living for is:



Step 1: Recognizing Warning Signs

- Safety plan is only useful if youth can recognize the warning signs
- Accurate account of the events that transpired before, during, and after the most recent suicidal crisis
 - “How will you know when the safety plan should be used?”
 - “What do you experience when you start to think about suicide or feel extremely distressed?”
- Write down the warning signs (thoughts, images, thinking processes, mood, and/or behaviors) using the youths’ own words

Step 1: Recognizing Warning Signs

Examples

- Thoughts
 - “I am a nobody.”
 - “I am a failure.”
 - “I don’t make a difference.”
 - “I am worthless.”
 - “I can’t cope with my problems.”
 - “Things aren’t going to get better.”
- Images
 - Flashbacks

Step 1: Recognizing Warning Signs

Examples

- Thinking Processes
 - “Having racing thoughts”
 - “Thinking about a whole bunch of problems”
- Mood
 - “Feeling depressed”
 - “Intense worry”
 - “Intense anger”

Step 1: Recognizing Warning Signs

Examples

- Behavior
 - “Crying spells”
 - “Isolating myself”
 - “Using drugs”

Step 2: Using Internal Coping Strategies

- List activities that youth can do without contacting another person
- Activities function as a way to help youth take their minds off their problems and promote meaning in the youth's life
- Coping strategies prevent suicidal ideation from escalating

Step 2: Using Internal Coping Strategies

- It is useful to try to have youth cope on their own with their suicidal feelings, ***even if it is just for a brief time***
 - “What can you do, on your own, if you become suicidal again, to help yourself not to act on your thoughts or urges?”

Step 2: Using Internal Coping Strategies

- Examples
 - Going for a walk
 - Listening to music
 - Playing an instrument
 - Take a hot shower
 - Walking the dog

Step 2: Using Internal Coping Strategies

- Ask “How likely do you think you would be able to do this step during a time of crisis?”
- Ask “What might stand in the way of you thinking of these activities or doing them if you think of them?”
- Use a collaborative, problem solving approach to address potential roadblocks

Step 3: Socializing with Family Members or Others

- Coach youth to use Step 3 if Step 2 ***does not resolve the crisis*** or lower the risk
- Family, friends, and acquaintances who may offer support and distraction from the crisis

Step 3: Socializing with Family Members or Others

- Ask “Who do you enjoy socializing with?”
- Ask “Who helps you take your mind off your problems, at least for a little while?”
- Ask youth to list several people in case they cannot reach the first person on the list

Step 4: Contacting Family Members or Friends for Help

- Coach youth to use Step 4 if Step 3 ***does not resolve the crisis*** or lower risk
- Ask “How likely would you be willing to contact these individuals?”
- Identify potential obstacles and problem solve ways to overcome them
- **WARNING:** Always include adults on the list!

Step 5: Contacting Professionals and Agencies

- Coach youth to use Step 5 if Step 4 ***does not resolve the crisis*** or lower risk
- Ask “Which clinicians should be on your safety plan?”
- Identify potential obstacles and problem solve ways to overcome them

Step 5: Contacting Professionals and Agencies

- List names, numbers, and/or locations of
 - Clinicians
 - Urgent care centers
 - Local Crisis Number
 - National Suicide Prevention Lifeline
1-800-273-TALK (8255)
(press "1" if veteran)

Step 6: Reducing the Potential for Use of Lethal Means

- Ask youth what means they would consider using during a suicidal crisis
- Regardless, the clinician should ***always ask*** whether the student has access to a firearm

Step 6: Reducing the Potential for Use of Lethal Means

- For methods of ***low lethality***, clinicians may ask youth to remove or restrict their access to these methods themselves

-For example, if youth are considering overdosing, discuss throwing out any unnecessary medication

Step 6: Reducing the Potential for Use of Lethal Means

- For methods of ***high lethality***, collaboratively identify ways for a responsible person to secure or limit access
 - For example, if youth are considering shooting themselves, suggest that they ask a trusted family member to store the gun in a secure place

Implementation: What is the Likelihood of Use?

1. Ask: “Where will you keep your safety plan?”
2. Ask: “How likely is it that you will use the Safety Plan when you notice the warning signs that we discussed?”

Implementation: What is the Likelihood of Use?

3. Ask: “What might get in the way or serve as a barrier to your using the safety plan?”

- Help the youth find ways to overcome these barriers

- May be adapted to brief crisis cards, cell phones or other portable electronic devices, must be ***readily accessible*** and ***easy-to-use***.

Implementation: Review the Safety Plan Periodically

- Periodically review, discuss, and possibly revise the safety plan after each time it is used
 - The plan is ***not*** a static document
 - It should be revised as youth's circumstances and needs change over time

Safety Planning Resources

- Videos on How to Develop a Safety Plan:
 - <http://zerosuicide.sprc.org/sites/zerosuicide.sprc.org/files/sp/course.htm>
 - PAYSPI Act 71 Support Page
 - <http://payspi.org/news-and-events/gls/schools/act71/>
 - Under “Suicide Prevention Webinars...” (halfway down page)
- FREE Safety Plan Template
 - <http://www.sprc.org/sites/sprc.org/files/SafetyPlanTemplate.pdf>

Youth Suicide Training Modules

- Video Clips Available on

www.payspi.org

- Teachers, Caregivers, and Others:
 - Myths
 - Epidemiology
 - Definitions
 - Risk Factors vs. Warning Signs
 - What You Can Do to Help
- Clinical Professionals and Paraprofessionals:
 - Collecting Valid Data
 - Risk Assessment
 - Safety Planning

For more information or to learn
how you can prevent youth suicide,
please go to:
www.payspi.org

For more information, contact:

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