

The background features a stylized, layered mountain range. The mountains are rendered in various shades of brown, from light tan and beige to dark chocolate and near-black tones, creating a sense of depth and atmosphere. The overall style is soft and painterly, with a warm, earthy color palette.

# Suicide Prevention

Erica Boykins & Anna McNeely-Miles



# Agenda

- Key Terms
- Statistics
- Myths and Facts
- Warning Signs
- Risk Factors
- What can we do?
- How does the school respond?
- Resources for Suicide Prevention & Intervention



## Key Terms

- **Suicidal ideation:** Thoughts of engaging in suicide-related behavior.
- **Nonsuicidal self-injury/Self-harm:** Self-injury with no intent to die.
- **Suicide:** Death caused by self-directed injurious behavior with any intent to die as a result of the behavior.



# How We Talk about Suicide Matters

<b>AVOID</b>	<b>SAY</b>
“Committed suicide”	“Died by suicide” “Ended their life”
“Failed” or “Successful” attempt	“Suicide attempt” or “death by suicide”



# Scope of the Problem

## U.S. Population Overall - 2021\*

- 48,183 Americans died by suicide
- There were an estimated 1.7 million suicide attempts
- Suicide is the 11th leading cause of death in the US and the 2nd leading cause of death for teens

## Youth Ages 15 - 24

- In 2021, adolescents and young adults aged 15 to 24 had a suicide rate of 15.15%

\*Latest year for which suicide statistics are currently available.

The background features a stylized landscape with layered mountains in shades of brown and tan. A large, textured, golden-brown sun or moon is positioned in the upper center, partially obscured by the mountain peaks. The overall aesthetic is soft and painterly.

# Myths & Facts

# Myths & Facts about Suicide

**Myth**

No one can stop a suicide. It is inevitable.

**Fact**

If people in crisis get the help they need, they will probably never be suicidal again.

# Myths & Facts about Suicide

## Myth

Confronting a person about suicide will only make them angry and increase the risk of suicide.

## Fact

Asking someone directly about suicidal intent lowers anxiety, opens up communication, and lowers the risk of an impulsive act.



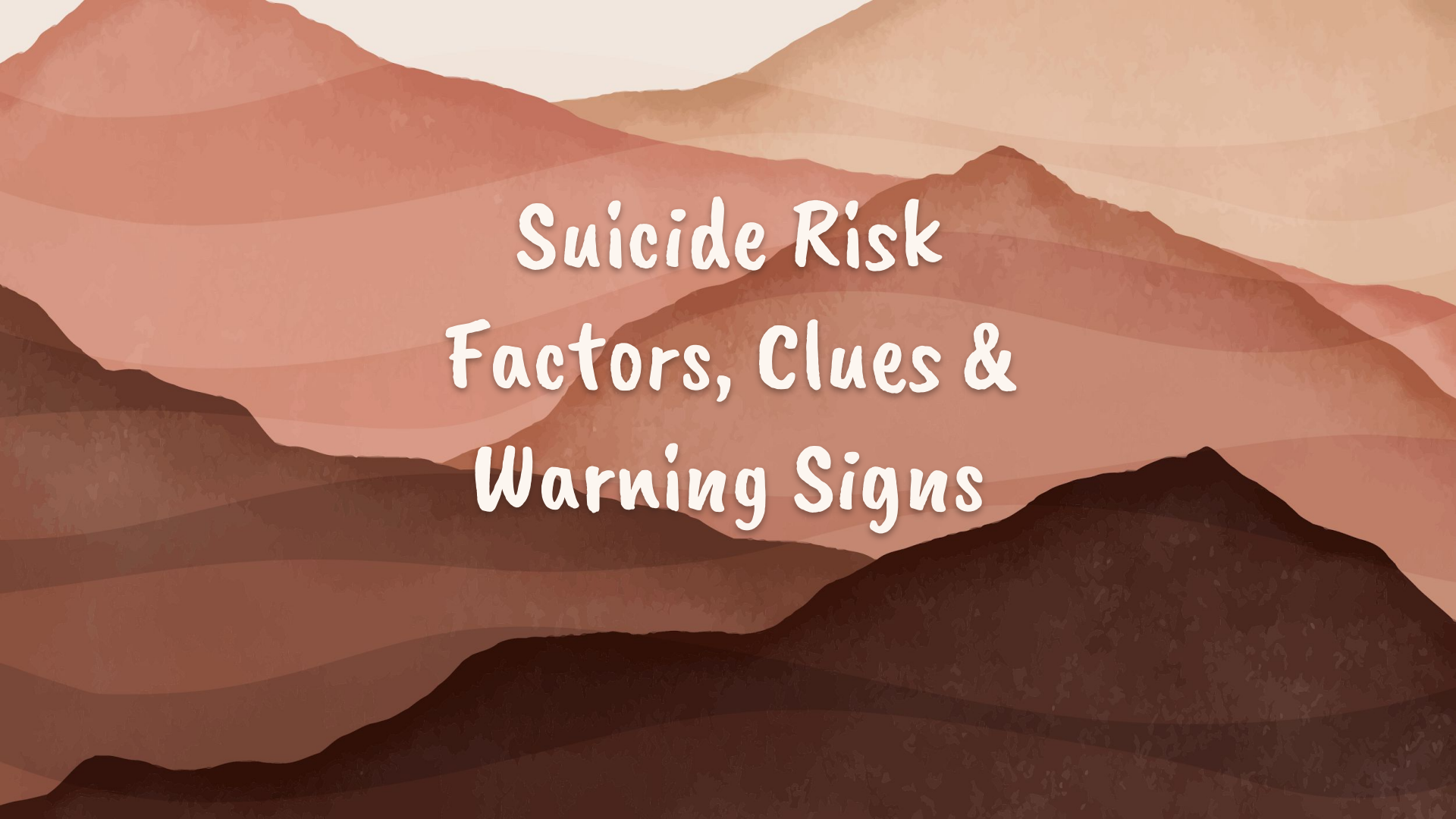
# Myths & Facts about Suicide

**Myth**

Suicidal people keep their plans to themselves.

**Fact**

Most suicidal people communicate their intent sometime during the week of preceding their attempt.



# Suicide Risk Factors, Clues & Warning Signs



# Suicide Clues and Warning Signs

The more clues and signs observed, the greater the risk.

Take all signs seriously.

# Risk Factors for Suicide





# Risk Factors

## Individual Risk Factors:

- Previous suicide attempt
- History of depression and other mental illnesses
- Serious illness such as chronic pain
- Substance use
- Current or prior history of adverse childhood experiences

## Relationship Risk Factors:

- Bullying
- Family member/loved one's history of suicide
- Loss of relationships
- High conflict or violent relationships
- Social isolation



# Direct & Indirect Verbal Clues

## Direct Verbal Clues:

- I've decided to kill myself.
- I wish I were dead.
- I'm going to commit suicide.
- I'm going to end it all.
- If (such and such) doesn't happen, I'll kill myself.

## Indirect Verbal Clues:

- I'm tired of life, I just can't go on.
- My family would be better off without me.
- Who cares if I'm dead anyway.
- I just want out.
- I won't be around much longer.



## Behavioral Clues

- Any previous suicide attempt
- Acquiring lethal means
- Co-occurring depression, moodiness, hopelessness
- Putting personal affairs in order
- Giving away prized possessions
- Sudden interest or disinterest in religion
- Drug or alcohol misuse, or relapse after a period of recovery
- Unexplained anger, aggression, and irritability



## Situational Clues

- Being fired or being expelled from school
- A recent unwanted move
- Loss of any major relationship
- Death of a spouse, child, or best friend, especially if by suicide
- Diagnosis of a serious or terminal illness
- Sudden unexpected loss of freedom/fear of punishment
- Anticipated loss of financial security
- Loss of a cherished therapist, counselor, or teacher
- Fear of becoming a burden to others





# WARNING SIGNS



CHANGES IN  
BEHAVIOR



WITHDRAWING  
SOCIALLY



EASILY  
ANGERED



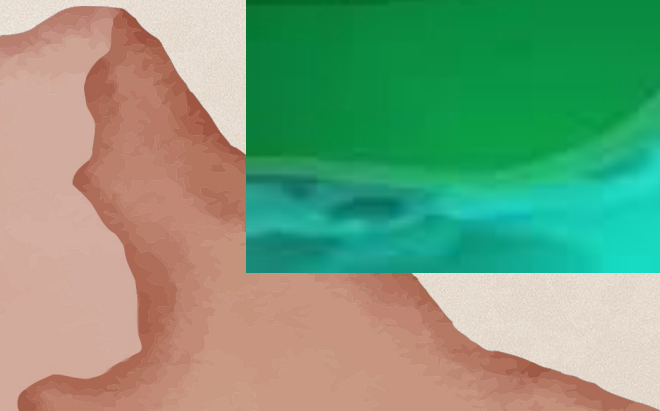
INCREASE IN  
ANXIETY



CHANGES IN SLEEP  
OR APPETITE



EXPRESSING THOUGHTS  
OF ENDING THEIR LIFE



A stylized sun with a large, dark orange circular center. The center contains the text "What Can We Do?". The sun is surrounded by numerous short, thick, orange-brown rays radiating outwards. At the bottom of the image, there are two soft, pinkish-purple cloud-like shapes. The background is a light, textured beige color.

What  
Can We  
Do?

# What Can Help Your Teen (and Others) Stay Safe?

- Receiving effective mental health care when needed
- Fostering positive connections
- Talk to your child about the importance of telling a trusted adult if someone they know is thinking about suicide
- Creating safe and supportive school and community environments
- Helping teens to cultivate problem solving skills
- Keeping open communication around mental health
- Restrict access to lethal means

# Mental Health Treatment

- Depressed teens can show improvement in 4 – 6 weeks with psychotherapy alone
- Many teens experience significant reduction of symptoms with antidepressant medication
- Medication can be essential in treating severe depression and other serious mental health conditions like bipolar disorder and schizophrenia
- Many teens benefit when the family engages in therapy together



# Barriers to Treatment for Teens

- Neither teens nor the adults who are close to them recognize the symptoms of their treatable illness
- Fear of what treatment might involve
- Belief that nothing can help
- They don't see help-seeking as a sign of strength
- They are embarrassed
- Belief that adults won't understand
- Limited access to resources (money, insurance, transportation, etc.)



Clip from Netflix show “Ginny & Georgia” which shows a father’s appropriate response to his daughter disclosing self-harm



# Talking to Your Child

- Take it seriously and talk to them in private
- Don't wait to act - trust your gut
- Listen to their story
- Don't be quick to respond or dismiss them
- Express concern and caring
- Ask directly about suicide
- Reassure them that help is available
- Validate their feelings






## If Your Child is Having Thoughts of Suicide

- Stay calm
- Thank them for having the courage to tell you
- Reassure them that you are going to help
- Contact a mental health professional for an evaluation as soon as possible
- Reduce immediate stressors
- Remove or secure lethal means in your home



## Corbett's Response

 Suicide  
Screener &  
Assessment

 Set Up Safety  
Plan if Needed

 Contact  
Parent/Guardian

 Continuous  
Monitoring



# Community & National Resources

## **Multnomah County Crisis Line** - (503-988-4888)

Available 24/7 365 for All Ages, Free, with interpretation services for non-English speakers.

<https://multco.us/behavioral-health/mental-health-crisis-intervention>

## **YouthLine** - 1-877-968-8491 & **teen2teen** *TEXT: 839863*

Available 24/7 365, Free [www.oregonyouthline.com](http://www.oregonyouthline.com)

## **The Trevor Project** - 1-866-488-7386

Available 24/7 365, Free, for LGBTQ youth, National <https://www.thetrevorproject.org/>

## **National Suicide Prevention Lifeline** - 1-800-273-TALK (8255)

Available 24/7 365, Free <https://suicidepreventionlifeline.org/>

### **In Crisis? Text HOME to 741741**

National, Free, <https://www.crisistextline.org/>

## **Vets 4 Warriors** - 1-855-838-8255

Available 24/7 365, Free, National peer-to-peer support 100% staffed by veterans <https://www.vets4warriors.com/>

## **America Foundation for Suicide Prevention** - <https://afsp.org/>

## **988**

Suicide and Crisis Hotline

Available 24/7

Call, text, or chat online at [988lifeline.org](http://988lifeline.org)

## **9-1-1** ... When should we call 911?

When the threat of harm to self or others is imminent, or when the parent/guardian is unable/unwilling to transport a student in crisis to mental health services immediately.

# THANK YOU!

Do you have any questions? Contact us!

Erica Boykins - [eboykins@corbett.k12.or.us](mailto:eboykins@corbett.k12.or.us)

Anna McNeely-Miles - [amcneely@corbett.k12.or.us](mailto:amcneely@corbett.k12.or.us)

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