

Youth Suicide Prevention Fact Sheet for CSWs, Caregivers & Community Partners

Risk Factors

- Prior suicide attempt
- Having lost a loved one to suicide
- A recent loss (for example: the death of a loved one, role model or idol; loss of a relationship through divorce or separation: loss of a home, money, social status; self-esteem or self-confidence)
- The threat of a loss (such as those listed above)
- A loss of hope for the future

Statements To Be Concerned About

- "I just want to die."
- "I never want to wake up again."
- "I want to sleep forever."
- "I'm worthless."
- "I'm going to hurt myself."

Warning Signs

- Developing a specific plan for suicide (the number one predictor of suicide risk)
- Threatening suicide, expressing suicidal feelings directly or bringing up the topic of suicide
- Signs of depression: loss of pleasure, sad mood, alterations in sleeping or eating patterns, feelings of hopelessness, irritability, agitation, feelings of failure or shame
- Giving away prized possessions, settling affairs, making out a will
- Changes in behavior (poor work or school performance)
- Risky behaviors
- Increased use of alcohol or drugs
- Social isolation or social withdrawal

How to Help (Adapted from the Trevor Project website: www.thetrevorproject.org)

Listen. Suicidal people frequently feel no one understands them, that they are not taken seriously, or that no one listens to them. Be direct. Do not act shocked. Show concern and get involved.

Accept the person's feelings as they are. Be non-judgmental. Do not debate or tell them they should feel differently, or try to cheer the person up by making positive, unrealistic statements. Do not joke about the situation. Do not dare him/her to do it.

Ask them if they have developed a plan for suicide. The presence of a well-developed plan indicates more serious intent.

Remove the means of self-harm and anything dangerous from the person's home that might be used in a suicide attempt (e.g., gun, knife, razor blades, sleeping pills).

Express your concern for the person and your hope that the person will not choose suicide but instead will stick it out a little longer.

Remind the person that depressed feelings *do* change over time.

Point out that death is final—it cannot be changed. As long as there is life, there are possibilities.

Develop a plan for help with the person. If you cannot develop a plan and a suicide attempt is imminent, seek outside emergency help from a suicide hot line, hospital, mental health clinic or call "911."

- **In either case, get help from persons or agencies specializing in crisis intervention and suicide prevention or activate the crisis response team.** See below.
- **Be sure there is follow up contact with a mental health professional.** Do not keep this a secret. Make No Deals to keep what a suicidal person has told you secret.

Resources

Los Angeles County
Department of Mental Health Crisis Hotline
1-800-854-7771

National Suicide Prevention Lifeline
877-727-4747 (or 1-800-273-TALK / 1-800-273-8255)
<http://www.suicidepreventionlifeline.org/>

American Association of Suicidology
<http://www.suicidology.org/web/guest/home>

American Foundation for Suicide Prevention
<http://www.afsp.org/>

Suicide Prevention Resource Center
<http://www.sprc.org/>

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Facts About Suicide:

- More than 32,000 people die by suicide each year in America.
- Suicide is the third leading cause of death in 11 to 18-year-olds.
- 15% of U.S. high school students report serious thoughts of killing themselves in the past year.
 - 11% of U.S. high school students report making a suicide plan in the past year.
 - 7% of U.S. high school students report attempting suicide in the past year.
 - 2% of U.S. high school students report having made a suicide attempt in the past year that required medical attention in the past year.
- The majority, 63%, of teen suicide victims exhibited psychiatric symptoms for more than a year before their deaths.
- An estimated 9% of 12- to 17- year-olds (or 2.2 million young people) experienced at least one major depressive episode during the past year.
- 60–80% of teens who suffer from depression go untreated.
- Complications of untreated teen depression are far-reaching and may affect many aspects of a young person's life. These include:
 - School absenteeism and decreased performance
 - Strained relations with family/caregivers and peers, leading to reduced support systems
 - Emotional distress
 - Increased chance of smoking and excess alcohol and drug use
 - Potential for suicide
- 90% of teens who die by suicide had a treatable mental illness (most often depression) at the time of their death.
- For every completed suicide, an estimated 8 to 25 attempts occur.
- Males are at a higher risk for suicide—one female dies by suicide for every four males:
 - At age 10-14, boys die by suicide almost three times more often than girls
 - At age 15-19, five times more often
 - At age 20-24, almost 10 times more often
- Lesbian, gay, bisexual, transgender and questioning youth are up to four times more likely to attempt suicide than their heterosexual peers.
- Lesbian, gay, bisexual, transgender and questioning youth who come from a rejecting family are up to nine times more likely to attempt suicide than their heterosexual peers.

Compiled from Teen Screen National Center for Mental Health and the Trevor Project