

# Essential Information about Suicide Prevention



## A Guide for Professional Caregivers: Youth Suicide Prevention



**D·B·H·D·D**

Georgia  
Department of  
Behavioral Health  
& Developmental  
Disabilities

Office of Federal Grant Programs  
& Suicide Prevention

## SUICIDE & YOUTH

*Developmental, emotional, and social factors contribute to suicide risk in youth, ages 10-24*

Adolescence is a season of great growth and discovery for many youth. It can also be a time of turmoil, confusion, and seemingly insurmountable obstacles. Significant brain, physical, and hormonal changes of typical development add to the already complex world youth are navigating. Learning to negotiate new social environments and rapidly changing relationships can also contribute to feelings of confusion and desperation. When coping mechanisms are overwhelmed, young people may have difficulty adjusting.

With all these changes, it can be challenging to recognize the difference between adolescent development phases and warning signs of something more serious. **A goal of prevention efforts is to ultimately strengthen support systems and increase youth resilience to reduce incidences of suicide.** However, it is also critical that professional helpers and caregivers are equipped to recognize and respond to suicide risk before it escalates, as suicide can be an impulsive act.

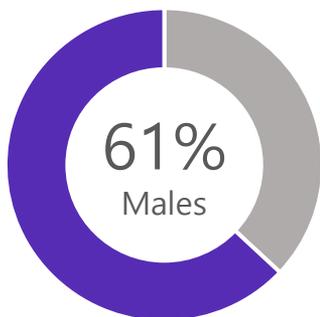


Common circumstances shared among Georgia youth who die by suicide are: <sup>1</sup>

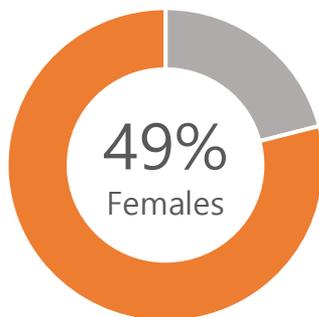
- Relationship problem
- Mental health problem
- Life stressor

# Get Informed. Take Action.

## History of Suicide<sup>1</sup>



In youth, 61% of males and 49% of females who died by suicide in Georgia had no reported history of suicide behaviors.



## Suicide Thoughts and Attempts, Grades 6-12<sup>2</sup>

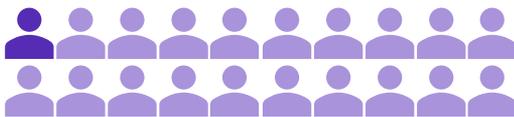
### 1 in 10

Seriously considered suicide at least once in the past 12 months.



### 1 in 20

Attempted suicide at least once in the past 12 months.



## Adverse Childhood Experience (ACE)

Research indicates stressful experiences can increase the chances a youth may attempt suicide. For each ACE, risk of attempts increases by about 60%. Youth with high ACE scores (7+) are at 51 times greater risk of an attempt.<sup>3</sup>



## RISK FACTORS

*Suicide prevention seeks to reduce risk factors that contribute to suicide behaviors*

Suicide thoughts and behavior are typically the result of a complex set of circumstances rather than the result of a single event in a young person's life. Many of the risk factors that contribute to suicide risk are shared across the lifespan. However, some factors are unique to or have a greater influence on suicide thoughts or behaviors in youth, including:

- History of adverse childhood experiences<sup>3</sup>
- Any bullying involvement<sup>4</sup>
- Self-injurious behaviors<sup>5</sup>
- History of out of home care or adopted<sup>6,7</sup>
- Access to means of suicide<sup>8</sup>
- Family history of suicide
- History of suicide thoughts or behaviors
- Untreated mental health or substance use problems
- Identify on the LGBTQ+ spectrum
- Periods of major transition
- Juvenile Justice involvement, especially in custody<sup>9</sup>



There are also personality and emotional factors that can increase a youth's risk for suicide:

- Rigid thinking
- Perfectionism
- Excessive worry or guilt
- Ongoing stress or anxiety
- Impulsivity
- Limited coping skills

## WARNING SIGNS

*Warning signs are signals that a youth may be at immediate risk for suicide*

Warning signs can be indicators of suicide thoughts. If you notice one or more of the following signs, a young person may be at risk for suicide. Risk rises as the number of warning signs present increase.

Warning signs include, but are not limited to: <sup>11</sup>

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
  - Changes in sleep (increased or decreased)
  - Anger or hostility that seems out of character or out of context
  - Recent increased agitation or irritability

**Suicide is preventable.** If you suspect a young person is considering suicide, you must act quickly.

- **Ask them about it.** Don't be afraid to say the word "suicide." Getting the word out in the open may help your teenager address their feelings.
- **Reassure them they are supported.** Remind them they have you as an ally and even big problems can be worked out.
- **Ask them to talk about their feelings.** Listen carefully. Do not dismiss what you hear.
- **Remove all lethal weapons from your home.** Lethal weapons can include guns, pills, kitchen utensils, and ropes.
- **Seek professional help.** Professional support is critical to addressing suicide thoughts.

## EARLY IDENTIFICATION

*Early recognition and treatment can dramatically improve long-term outcomes for young people*



Community resources that can play a role in early identification and facilitate referrals to proper care include:

- Pediatricians
- Primary Care Physicians
- Specialty Physicians
- Faith leaders
- Child Protective Services
- Churches
- Friends
- Family
- Libraries
- After-school programs
- Sports and recreation

Young people often worry about sharing their experiences with adults or professionals. Addressing a youth's fears can help decrease anxiety and increase participation in treatment.

Concerns youth may have include:

- Worries about being seen as different by family and peers
- Not wanting to be dependent on medications
- Disliking the side effects of medications
- Fear of what will happen to them if they admit suicide thoughts or behaviors
- Previous negative or traumatic experiences

*“Suicides are preventable with timely, evidence-based and often low-cost interventions.”<sup>16</sup>*

*~World Health Organization*

# Get Informed. Take Action.

Physicians, therapists, and other caregivers have the opportunity to impact suicide rates among youth on a broad scale. Training, resources, and tools that can help these two groups to recognize and respond are listed in the table below:

Clinical/Medical Professionals	Other Caregivers
Train all staff in Gatekeeper Interventions, such as QPR (Question. Persuade. Refer.) or ASIST (Applied Suicide Intervention Skills Training).	Become a Gatekeeper through QPR (Question. Persuade. Refer.), ASIST (Applied Suicide Intervention Skills Training), or safeTALK.
Develop and implement protocols to routinely screen youth for behavioral health problems and suicide risk and refer them to appropriate care.	Learn about local crisis and behavioral health resources (i.e., who to call, how to make a referral, and what the youth and family can expect).
Collaboratively develop safety plans (such as the Stanley-Brown Patient Safety Plan) with youth and families.	Encourage and assist in removal or safe storage of medications, weapons, and other possible means of suicide.
Engage positive family and social supports in strategies to reduce risk and increase connectedness.	Facilitate opportunities for social connection through activities and interests.

Caring adults and positive norms have been found to act as protective factors for youth against suicide.



Suicide Can be Prevented.

## PROTECTIVE FACTORS

*Strengthening protective factors can create a cushion against challenges and crises*

Protective factors are characteristics which make it less likely that individuals will consider, attempt, or die by suicide. Protective factors can balance the influence on overall well-being in youth who are at-risk. Protective factors that reduce the chances youth will seriously consider suicide include:<sup>10</sup>

- Social connectedness and positive relationships with family and friends
- Access to effective care for mental, physical, and substance abuse disorders
- Problem-solving and coping skills
- Reduced access to medications (prescription and over-the-counter), alcohol, and firearms (outside the home or locked, unloaded, AND stored separately)
- Positive school experiences and academic achievement
- Sense of connectedness to school and community

*“Protective factors are characteristics which make it less likely that individuals will consider, attempt, or die by suicide.”*



Positive involvement with family and friends is a key element of suicide prevention in youth.

Get Informed. Take Action.

# ADOLESCENT DEVELOPMENT

*Understanding developmental changes can increase chances of early identification of suicide risk*

Rapid changes in physical, emotional, behavioral, and social development can sometimes make it difficult to recognize when a youth may be at increased risk for suicide. Duration, intensity, and impact on the youth's daily life are indicators of the difference between the stages of adolescence and a warning sign.



Warning signs require action.

Common Behavior	A youth who isolates themselves for short periods of time during testing
Warning sign	A youth who withdraws from all family, friends, and/or social interaction
Common Behavior	A young person learns about a charity at school and wants to donate their goods to help others
Warning sign	A youth who gives away their favorite guitar or computer because they, "won't need it anymore"
Common Behavior	A youth who is distraught and cries over the loss of a relationship for a short period of time
Warning sign	A youth who has difficulty adjusting for an extended period of time after a loss

## INTERVENTIONS

*Remove barriers to treatment and increase opportunities for early intervention*

Intervention Type	Potential Interventions <sup>12</sup>
<b>Universal</b> Programs indicated for all youth, not specific to risk	<ul style="list-style-type: none"><li>• Messaging that reduces stigma, promotes early recognition, and encourages help-seeking. Topics may include:<ul style="list-style-type: none"><li>➤ Depression</li><li>➤ Suicide</li><li>➤ Mental/emotional wellness</li></ul></li><li>• Encourage safe-storage of weapons and other means</li><li>• Gatekeeper training for those who work with youth</li><li>• Screening programs to identify youth who may be at risk</li></ul>
<b>Selective</b> Programs indicated for youth who have elevated behavioral health and suicide risk	<ul style="list-style-type: none"><li>• Programs designed to build up protective factors for populations who have higher potential of risk:<ul style="list-style-type: none"><li>➤ Young people from Native or Indigenous tribes</li><li>➤ Youth with elevated ACE scores</li><li>➤ Young people who have family history of suicide</li><li>➤ Adopted or foster youth</li><li>➤ Youth with history of mental health, substance use, or self-injury</li></ul></li></ul>
<b>Indicated</b> Programs indicated for youth with detectable signs of suicide risk	<ul style="list-style-type: none"><li>• Programs which strengthen protective factors and resilience in young people having difficulty adjusting to transitions after high school</li><li>• Programs to teach means restriction to parents of youth who are at elevated risk</li></ul>



## Other Effective Interventions

### Responsible media reporting

Some studies suggest reductions in suicide behaviors occur in communities where media adheres to safe reporting guidelines. As youth are particularly vulnerable to reports of suicide, safe reporting is an important strategy for communities to advocate for and implement.<sup>14</sup>

### Education and training for primary care and pediatricians

Many healthcare professionals report they feel less prepared to screen for and respond to mental health and suicide ideation. Those who have received additional training report increases in inquiries about suicidal ideation as well as identification of patients at risk for suicide.<sup>15</sup>

### Skill building & problem solving

Research indicates that expanding youth capacity to respond to crises and life stressors decreases youth reports of suicidal ideation and attempts.<sup>15</sup>

### Reducing access to lethal means

In families with youth who exhibit risk factors for self-harm, it was found that 35% of parents leave guns unlocked and loaded.<sup>8</sup> Working collaboratively to recognize risk, educate on safety, and reduce access to lethal means can lead to reductions in rates of death by suicide.

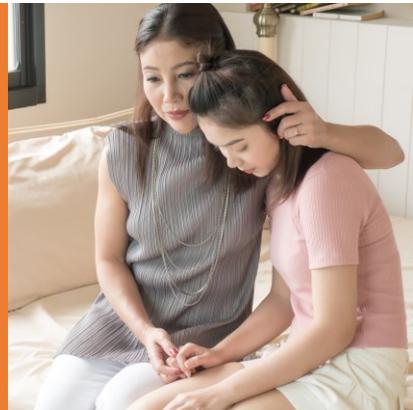
## FOR PARENTS

### *Steps parents can take if they believe their youth is at-risk*

The American Psychological Association recommends the following steps that parents can take to help a youth who may be experiencing suicide thoughts:<sup>13</sup>

- **Express your concern.** It's a myth that if you mention suicide, you might plant the idea. By honestly and openly expressing your concerns, you'll send an important message that you care and understand.
- **Really listen.** Parents can be tempted to shut down an upsetting conversation by saying, "I don't want to hear those things," or "I had a hard time as a teen, but I got over it." Instead, say, "Tell me more about how you're feeling." Then listen.
- **Maintain connection.** You might want to safeguard a child or teen by keeping them home in a protective cocoon, but isolation can increase the risk of suicidal behaviors. Help a struggling child maintain connections with friends and loved ones. As a parent, spend extra time with your child. Even watching TV or playing video games together sends a signal that you're there.
- **Be compassionate.** Express your love for the child or teen. Tell them you hear their pain, it can get better, you will make sure they get help and you will support them every step of the way.
- **Trust your judgment.** If a young person denies they are having thoughts of suicide, but you doubt their honesty, trust your intuition. Take further steps to ensure their safety.
- **Prioritize safety.** Remove weapons from the house, make sure the child or teen is not left alone, and consult a mental health professional right away.

*Youth need to know it is okay to get help for mental health.*



## RESOURCES

*Support is available to help youth cope with stressors that can lead to suicide thoughts*

**988 Lifeline:** 9-8-8

Anyone can call or text 988 or chat [988lifeline.org](https://988lifeline.org) for themselves or if they are worried about a loved one who may need support through an emotional crisis. Caring counselors are available 24/7 to take your call.

**Georgia DBHDD Office of Children, Young Adults, & Families (OCYF):**

<https://dbhdd.georgia.gov/office-cyf-services>

Coordinates a variety of services for youth and their families, from prevention and crisis services to treatment and recovery.

**Trevor Lifeline:** 866.488.7386

<https://www.thetrevorproject.org/get-help/>

Free confidential crisis hotline for LGBTQ+ youth and young adults.

**Your Life, Your Voice:** 800.448.3000

<https://www.yourlifeyourvoice.org/>

Youth may speak with a confidential crisis counselor 24/7.

**Society for the Prevention of Teen Suicide:** <http://sptsusa.org/teens/>

Resources to encourage young people to seek help and also provide information about how they can help another young person who may be considering suicide.

**The JED Foundation:** <https://www.jedfoundation.org/>

Empowers teens and young adults with the skills and support to grow into healthy, thriving adults.

**The Jason Foundation:** <http://jasonfoundation.com>

Programs that equip young people, educators/youth workers and parents with the tools and resources to help identify and assist youth who are at-risk.

**Other resources**

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Positive social connections promote resilience and reduce the risk of depression and suicide.

# GET INVOLVED

*Effective prevention involves everyone,  
from individuals to organizations*

Prevention starts in the community, with people and organizations who want to help save lives. It is also supported by regional and state initiatives that promote awareness and improve service systems.

Here are a few ways you can get involved:

- Take a class, such as:
  - QPR (Question. Persuade. Refer.)
  - Mental Health First Aid (MHFA)
  - SuicideTALK
  - safeTALK
  - ASIST (Applied Suicide Intervention Skills Training)
- Join a local Suicide Prevention Coalition or help start a Coalition if one does not exist
- Participate in, volunteer at, or help coordinate awareness events
- Promote safe messaging around suicide
- Encourage your organization or workplace to make suicide prevention resources available to staff and individuals you serve



**988**  
SUICIDE & CRISIS  
LIFELINE



Georgia  
Department of  
Behavioral Health  
& Developmental  
Disabilities



<https://preventsuicidega.org>

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