

Suicide Facts

- Suicide is the third most common cause of death among adolescent and young adults in the U.S.
- Most teens will reveal that they are suicidal; however they are more willing to discuss suicidal thoughts with a peer than a school staff member.
- 90% of suicidal youth feel their families don't understand them. Conversely, studies have shown that 86% of parents were unaware of their child's suicidal behavior.
- Most suicidal adolescents do not want suicide to happen. The person who contemplates suicide believes that the action will end the pain of feeling hopeless and helpless or is making a dramatic plea for help.
- Most adolescent suicide attempts are precipitated by interpersonal conflicts. The intent of the behavior may be to influence the behaviors or attitudes of others.
- Not all adolescent attempters may admit their intent. Thus, any deliberate self-harming behaviors should be considered serious and in need of further evaluation.
- Nationally, guns are the most frequently used method among adolescents. Having a gun in the house increases an adolescent's risk of suicide.
- The largest number of suicides occur in the spring.
- One of the most powerful predictors of completed suicide is a prior suicide attempt.
- Most adolescents who are contemplating suicide are not presently seeing a mental health professional.
- When issues concerning suicide are taught in a sensitive educational context, they do not lead to, or cause, further suicidal behavior. Talking about suicide in the classroom provides adolescents with an avenue to talk about their feelings, thereby enabling them to be more comfortable with expressing suicidal thoughts and increasing their chances of seeking help from a friend or school staff member.
- On the average, every high school will have at least 1 student every 5 years who commits suicide. A typical high school also will have between 35 and 60 students every year who will attempt suicide.

(Sources: "Lifeline," a publication created by the staff of the Derby (KS) Unified School District 260 and "Youth Suicide Prevention School-Based Guide" by The Louis de la Parte Florida Mental Health Institute at the University of South Florida.)

Warning Signals for Suicide

The more clues and signs observed, the greater the risk. Take all signs seriously and consider as cause to ask the student about their intent.

Direct Verbal Cues

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

Indirect "Coded" Verbal Cues

- "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."
- "Pretty soon you won't have to worry about me."

Behavioral Clues

- Previous suicide attempt.
- Acquiring a gun or stocking up on pills.
- Depression, moodiness, hopelessness.
- Putting personal affairs in order.
- Giving away prized possessions.
- Sudden interest or disinterest in religion.
- Unexplained anger, aggression, irritability.
- Drug or alcohol abuse, or relapse.
- Perfectionism.
- Recent disappointment or rejection.
- Sudden decline in academic performance.
- Increased apathy.
- Physical symptoms: decline in personal hygiene or grooming, eating disturbances, changes in sleep patterns, chronic headaches, stomach problems.
- *Sudden* improvement in the mood or optimism, or making of grandiose plans.

Situational Clues

- Being expelled from school or fired from job.
- Family problems or alienation.
- Loss of any major relationship.
- Death of a family member or close friend; especially by suicide.
- Diagnosis of a serious or terminal illness.
- Financial problems (self or family).
- Sudden loss of freedom or fear of punishment.
- Victim of assault.
- Public shame to family or self.

(Source: "QPR: Question, Persuade, and Refer" by Paul Quinnett)

**Just one concerned, caring person can save
the life of a young person**