Understanding and Preventing Youth Suicide
Statistics

- Nationally, we lose more than 100 young people to suicide each week
- Suicide is the 3rd leading cause of death for ages 15-24
- The 2nd leading cause of death for college age youth
- In Texas, 1 in 6 students has considered suicide and 1 in 10 has attempted in the past year
- Female youth are 3 times more likely to consider suicide
- Males are 3 times more likely to complete a suicide
Why would youth want to commit suicide?

- Most people who attempt suicide simply want the pain to go away
- Internal pain is virtually invisible
- Most are ambivalent about ending their life
- The impulse to end their life does not last forever
Are suicide attempts attention seeking behavior?

- They NEED attention!
- They need attention and help for the pain they are experiencing
- A suicide attempt is an attempt to seek help
Suicide Risk Factors

- Recent discharge from psychiatric hospital
- Prior attempt(s)
- Perfectionist personality
- Gay and Lesbian youth
- Learning disabled youth
- Loners

- Low Self-esteem
- Depression and other mental health diagnoses
- Youth in serious trouble
- Traumatized youth
- Substance abusers

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Precipitating Risk Factors

- Loss of social support
- Loss of identity/meaning
- Loss of attachments
- Acute psychiatric symptoms
- Loss of hope
- Sense of failure

- Acute disappointment
- Embarrassment, humiliation, threat to status
- Threat of legal action, incarceration
- Anniversary reaction
Family of Origin Risk Factors

- Depression
- Substance Abuse
- Sexual Abuse
- Suicide Attempts
- Family discord
- Psychiatric Hospital Admissions
Warning Signs

- Talking about suicide
- Statements of hopelessness, helplessness, or worthlessness
- Statements like, “I won’t be a problem much longer.”
- Deepening depression
- Preoccupation with death
- A loss of interest in things they care about
- Visiting or calling people they care about
- Making arrangements, getting their affairs in order
- Giving possessions away
Less Commonly Known Warning Signs

- Hopelessness
- Rage
- Recklessness
- Feeling trapped
- Increasing substance abuse
- Withdrawal
- Anxiety or agitation

- Dramatic mood changes
- No reason for living
- Purposelessness
Protective Factors

- **Internal Factors**
  Come from the inside. The ability to cope with stress, frustration, and mental illness. Resilience.

- **External Factors**
  Come from outside. Family and peer support, positive therapeutic relationships, responsibility to others and pets.
Protective Factors

- Access to mental health services
- Positive connections with school
- Stable families
- Religious or spiritual involvement
- Lack of access to lethal weapons
- Recognition of the importance of adult help-seeking behavior
- Good peer relationships
- Problem solving and coping skills
Ways You Can Help

Children who are suicidal often feel:

- HELPLESS - they feel powerless and unable to change their situation.
- HOPELESS - they believe their problems and feelings of despair will never go away.
- ISOLATED - they feel alone in their pain and believe no one is able to understand.
Remember to ACT!

- Acknowledge – Take comments, threats, or actions seriously
- Care – Express that you care
- Treatment – Get professional help
Remember to ACT!

Acknowledgement:
- Take every suicide threat, comment or action seriously
- Listen
- Try to understand what the person is feeling
- You do not have to solve the person's problem or offer advice
- Encourage the expression of feelings
Remember to ACT!

Care

- Express that you care and share your feelings
- Reassure them that they are not alone
- Explain that suicidal feelings are only temporary and that the usual cause can be treated
- Offer hope that alternatives are available
- Be careful not to offer oversimplified or false reassurances
- Ask if the person has a specific plan
Remember to ACT!

Treatment
- Get professional help immediately
- Seek support
- Identify options
- Identify additional support people and services

If the person seems unwilling to accept treatment, call the Suicide Prevention Lifeline at 1.800.273.TALK (8255)
Pete is a 16 year old male, brought to the ER on a Saturday morning by the police after calling his foster parents. His therapist expressed concern about his increasing hopelessness, drinking and suicidal thoughts. Pete has a number of close friends and he told one of them that his “meds aren’t helping and have never helped.” His foster parents are threatening to “throw him out” if he does not “get his act together.” When asked by the nurse how he was doing, he stated, “I won’t be around much longer to worry about it.”

- What are his risk factors?
- Are there any precipitating risk factors?
- What are his protective factors?
Joshua is a 13-year-old male with an existing diagnosis of ADHD. He has been on stimulant medications since he was diagnosed at age 7. Joshua was suspended for 3 days for fighting with a peer, causing him to miss an upcoming dance. Joshua’s foster mom reported arguing in the supermarket parking lot about the suspension when "he suddenly ran out of the lot and into traffic." He had no injuries because the cars stopped in time. Joshua ran back to the car, was visibly upset, and was crying "I'm sorry, I'm sorry." His foster mom called the outpatient clinic to report the incident and get advice. She told clinic staff that Joshua has a history of impulsivity and aggression.

- Is this a suicide attempt?
- What are his risk factors?
- Are there any precipitating risk factors?
- What are his protective factors?
Common Emotional Reactions to Vignettes

- Fear
- Anger
- Helplessness
- Hopelessness
- Over-Protectiveness
- Defensiveness
STAR Health

Mental Health and Substance Abuse Benefits:

- Inpatient
- Partial Hospitalization
- Intensive Outpatient
- Day Treatment
- Observation
- Rehabilitative

- Outpatient Therapy
- Telemedicine
- Disease Management (Depression)
Suicide Prevention Lifeline

1-800-273-TALK (8255)

Reasons to Call
• Call to speak with someone who cares
• Call if you feel you might be in danger of hurting yourself
• Call to find referrals to mental health services in your area
• Call to speak to a crisis worker about someone you're concerned about
Accessing Mental Health Services

If you need help at any time accessing and/or coordinating any mental health service for your child, please call Cenpatico Member Services at 1-866-218-8263

We are here to help 24 hours a day, 7 days a week
- Locating a psychiatrist in your area
- Helping you make an appointment to see a therapist
- Helping you locate a MHMR clinic in your area
- …and much, much more!!
Provide special support services to help manage all of the behavioral health care your child needs. There are many ways that the Behavioral Service Management Team can help you.
STAR Health Service Management Teams

- Find a therapist/psychiatrist
- Schedule an appointment as soon as possible
- Developing a plan of care
- Following your child’s progress
- Help to make sure they are getting the care that they need
- Work with families and health care providers to treat children with chronic cases of depression and suicidal behavior
- Participate in Member’s hospitalizations (to include court ordered admissions) and discharge planning
- Provide health information as needed for legal reviews, including court testimony
If you think your child would benefit from Service Management or if you would like to learn more about Service Management, please call Cenpatico at 1-866-218-8263.
THANK YOU!!