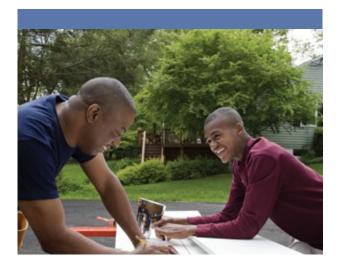
What to Do to Prevent Suicide

If you spot any of the signs, symptoms or cries for help, do not waste time. Step in right away and do whatever it takes to prevent a child from acting on impulse and taking his/her life. Here is something you can and should do right away: Talk and encourage the child to talk.

It is important to:

- Acknowledge an understanding of the child's problems and emotions and reduce the feeling of isolation
- Help child gain perspective and dilute some of the painful feelings
- Take the child seriously; reassure him/her without dismissing feelings
- Studies have shown 70 percent of young suicide victims were waiting to be punished, so parents/guardians should give consequences immediately, rather than threaten them in the future
- Restrict access to anything the child can use to harm himself
- Maintain eyesight supervision Do not say, "Go to your room." Instead, encourage the child to sit with you.
- Document everything (risk indicators, symptoms, motives, how you intervened, how the child responded, other safety measures, people you notified)
- Make sure to follow up with a mental health professional
- Consider hospitalization, which may be necessary to ensure safety
- Urge the child to log on to www.TeenCentral.Net
- Call a suicide prevention hotline, mental health professional or facility for advice (see back cover)



About KidsPeace

For 132 years, KidsPeace has been building on its expertise to give hope, help and healing to children, families and communities throughout the United States. Through its comprehensive range of residential treatment programs; accredited educational services; unique psychiatric hospital and foster care and community-based programs, KidsPeace is dedicated to helping people connect, transform and overcome their challenges to ensure a stable future, transition to adulthood and gain independence. Since its doors opened in 1882, more than 200,000 children have participated in one of the multitude of programs KidsPeace offers. For additional resources or more information on how to get involved, become a foster parent or make a donation, please visit www. kidspeace.org. Follow us at www.facebook.com/kidspeace.org or on Twitter @KidsPeace.

National Resources

TeenCentral.Net is an award-winning, free, safe and anonymous site for teens to find help with some of today's most difficult challenges. Members are unidentifiable, and they receive answers online within 24 hours. There are many features on this site like celebrity stories, useful resources and interactive games that allow for a positive online experience.

ParentCentral.Net is fashioned after TeenCentral.Net to answer questions and provide parents with valuable information on all aspects of parenting. This site can help parents see warning signs in their children and seek professional help.

The National Suicide Prevention Lifeline connects individuals in suicidal crisis to the nearest available suicide prevention and mental health service provider through a toll-free telephone number 800-273-TALK (8255). www.suicidepreventionlifeline.org.





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SUICIDE PREVENTION

Facts, signs and intervention

KidsPeace[®]

Children are very vulnerable to the growing complexities and uncertainties of our world. Many children feel lost, scared or overwhelmed because they do not have enough experience coping with difficult problems.

Too many kids suffer abuse and neglect, bullying and domestic violence, eating disorders, peer pressure and fears of natural disasters and terrorism. The resulting strain is unprecedented and can sometimes become too much to bear. When this happens, kids seek means of escape and, in the most severe cases, may even turn to suicide to free themselves from the pain or despair they are suffering.



Statistics* speak louder than words:

- Suicide is the third leading cause of death among people 15 to 24 years of age
- On average, a young person (age 15-24) dies by suicide every 2 hours and 12 minutes
- Suicide is the second leading cause of death among college students
- 16 percent of students in grades 9-12 have seriously considered suicide (13 percent have reported creating a plan; 8 percent have reported trying to take their own life in the past 12 months)**

*According to Suicide.org **According to the Centers for Disease Control and Prevention

Recognizing the Risk Indicators for Youth Suicide

Awareness of characteristics associated with contemplating or attempting suicide improves the chances of spotting warning signs in time to prevent a child's suicide. The most important risk factors include:

 A previous suicide attempt – this is the primary indicator of current suicide risk

- A suicide or attempted suicide by a family member or friend

 after a suicide in a large school, the chance of a second one
 increases 300 percent
- Addiction to alcohol or drugs
- Serious medical problems that may be life-threatening or lifechanging
- Major psychiatric illness such as depression, bipolar disorder or conduct disorder (studies of bipolar patients indicate that 25-50 percent make at least one suicide attempt)
- A loss of any kind real or symbolic
- History of impulsive or erratic behavior (especially running away)
- History of family problems; few or no friends
- Toxic relationships that could cause stress, volatility or contagion of self-destructive behavior
- Trouble talking about problems or lack of communication
- History of frustration and conflicts with important people
- Perpetual feelings of hopelessness or worthlessness
- History of abuse
- Presence of a learning disability
- Easy access to potential weapons: guns, razor blades, sharp objects, medication.



Spotting Warning Signs

There are many signs and symptoms that might provide clues that a child is contemplating or planning to attempt suicide. Consider all threats to be valid. The most important signals to look for are:

- Prior history of attempted suicide or suicide by someone close to the child
- Writings about suicide (poems, stories, etc.)
- Indirect threats ("I wish I were dead") or direct threats ("I'm going to kill myself")
- Preoccupation with death, including:
 - Talking about death or compulsively thinking about and longing for a dead person



- Sudden, intense interest in religion and afterlife
- Making final arrangements (writing a will, talking about his/her funeral, etc.)
- Giving away prized possessions
- Creating artwork or writing or listening to music about death/dying
- Visible changes in behavior, physical condition, thoughts or feelings such as:
 - Social withdrawal, isolation or loss of interest in social interaction
 - Diminished involvement in usual interests and activities
 - Increased risk-taking behaviors, recklessness or aggressiveness
 - Decreased academic performance or inability to concentrate or think rationally
 - Increased use of alcohol or drugs
 - Frequent unexplained lateness, absence from school or regular activities
 - Crying easily, exaggerated fears, extreme anxiety or depression
 - Abrupt changes in appearance, weight or appetite
 - Change in sleep patterns
 - Low self-esteem, hopelessness or helplessness
 - Increased irritability or anger, mood swings or withdrawal from communication
- Stress from difficult situations including:
 - Inability to cope with loss (such as divorce, breaking up with a boy/girlfriend, loss of a job or status, death of a loved one)
 - Feelings of worthlessness
- A victim mentality caused by physical, sexual or emotional abuse.