NASP Calls for an Increase in Access to Suicide Prevention Resources

Bethesda, MD—The high-profile suicide deaths of Kate Spade and Anthony Bourdain this week draw attention to the imperative to recognize and support individuals who may be experiencing a serious mental health problem or significant life stressors that can increase suicide risk.

Suicide is a growing health crisis in this country. New data from the U.S. Centers for Disease Control and Prevention (CDC) indicate that suicide rates in the United States rose by 25% from 1999–2016. It is the third leading cause of death for youth between the ages of 10 and 24 years, though the scope of the problem extends beyond actual deaths by suicide. Sixteen percent of U.S. high school students have reported seriously considering suicide, 13% reported creating a plan, and 8% reported trying to take their own life, with approximately 157,000 youth between the ages of 10 and 24 years treated in emergency rooms annually for self-inflicted injuries (CDC, 2016). We must reduce stigma around mental illness and raise awareness about suicide risk factors, signs of suicidality, and the many ways to get help.

NASP calls on national leaders and policy makers to increase access to mental health services both in schools and in the community, improve suicide awareness and prevention training for all members of the public, and provide genuine mental health parity in both public and private health insurance plans. We also urge that every school has a multidisciplinary safety and crisis team which includes school psychologists, school counselors, and school social workers who are trained in effective suicide risk and threat assessment practices.

Importantly, while attention to the suicide deaths of well-known individuals provides an opportunity to raise awareness, it can also increase risk. Research shows that exposure to another person’s suicide, including extensive media or social media coverage, can be one of the many risk factors that youth struggling with mental health conditions cite as a reason they contemplate or attempt suicide. We urge the media to follow best practices in reporting on suicide to minimize the risk of contagion.

We encourage educators and parents to be aware of potentially vulnerable children and youth, and for school leaders to be aware of potentially vulnerable staff. Suicide is most often the result of a combination of risk factors. These can include a mental illness such as depression and anxiety, the recent break-up in a relationship or loss of a loved one, family or financial problems, health problems, bullying and harassment, sexual or physical abuse, and substance abuse.
NASP has a number of relevant resources that may be adapted and distributed to staff, students, and families. We also highlight the following guidance.

1. Reinforce help-seeking behavior and emphasize that adults are available to provide support and guidance. School leaders should highlight that school-employed mental health professionals are available to help and provide links to community resources, including the National Suicide Prevention Hotline, 1-800-273-TALK (8255).

2. Make sure parents, teachers, and students are aware of suicide risk warning signs. Always take warning signs seriously, and never promise to keep them secret. Establish a confidential reporting mechanism for students. Common signs include:
   - Suicide threats, both direct (“I am going to kill myself.” “I need life to stop.”) and indirect (“I need it to stop.” “I wish I could fall asleep and never wake up.”). Threats can be verbal or written, and they are often found in online postings.
   - Giving away prized possessions.
   - Preoccupation with death in conversation, writing, drawing, and social media.
   - Changes in behavior, appearance and hygiene, thoughts, and/or feelings. This can include someone who is typically sad who suddenly becomes extremely happy.
   - Emotional distress.

3. When a person gives signs that they may be considering suicide, take the following actions.
   - Remain calm, be nonjudgmental, and listen. Strive to understand the intolerable emotional pain that has resulted in suicidal thoughts.
   - Focus on your concern for their well-being. Avoid statements that might be perceived as minimizing the student’s emotional pain (e.g., “You need to move on.” or “You should get over it.”).
   - Ask the person directly if they are thinking about suicide (i.e., “Are you thinking of suicide?”).
   - Reassure the person that there is help and they will not feel like this forever.
   - Provide constant supervision. Do not leave the person alone.
   - Without putting yourself in danger, remove means for self-harm, including any weapons the person might find.
   - Get help. Never agree to keep a person’s suicidal thoughts a secret. Instead, school staff should take the student to a school-employed mental health professional. Parents should seek help from school or community mental health resources. Students should tell an appropriate caregiving adult, such as a school psychologist, administrator, parent, or teacher.

4. Reinforce resiliency factors that can reduce suicidal ideation and behaviors.
   - Family support and cohesion, including good communication.
   - Peer support and close social networks.
   - School and community connectedness.
   - Cultural or religious beliefs that discourage suicide and promote healthy living.
   - Adaptive coping and problem-solving skills, including conflict resolution.
   - General life satisfaction, self-esteem, and a sense of purpose.
   - Easy access to effective medical and mental health resources.
5. **Schools should consider plans to provide support or information over the summer.** Capacity over the summer will vary from district to district, but consider e-communications with parents and students, social media, and the school website to continue to raise awareness about resources and the importance of help-seeking and adult involvement. Also reach out to local youth organizations and summer programs to share relevant information.

**ADDITIONAL RESOURCES**

- National Suicide Prevention Hotline, 1-800-273-TALK (8255), or chat at suicidepreventionlifeline.org
- Crisis Text Line: text “START” to 741741
- SAMHSA Behavioral Health Treatment Services Locator
- SAMHSA Prevention Suicide: A Toolkit for High Schools
- Suicide Prevention Resource Center, After a Suicide: Toolkit for Schools
- Model School District Suicide Prevention Policy
- www.13reasonswhytoolkit.org

For more information, visit [www.nasponline.org/suicideprevention](http://www.nasponline.org/suicideprevention).

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