

## An Important Note

Self-injury can indicate a number of different things. Some people who are hurting themselves may be at risk of suicide. Others engage in a pattern of self-injury over weeks, months, or years and are not necessarily suicidal. As a first aider, the following advice is of use only if the young person you are helping is suicidal. If the young person you are assisting is self-injuring but is not suicidal, please refer to *First Aid for Nonsuicidal Self-Injury*.

## Facts on Suicide

Suicide is the third leading cause of death for young people. In the United States in 2008, an average of one young person (age 15–24 years) dies by suicide every two hours and three minutes. White males (19.6 percent) and American Indian or Alaska Natives (18.8 percent) have the highest rates of suicide.<sup>328</sup> The percentage of Latina females attempting suicide is higher than that of most other female racial groups. Suicide is the second leading cause of death among Asian American and Pacific Island youth between the ages of 15 and 19.<sup>329</sup> Suicide continues to be the second leading cause of death for young American Indian/Alaska Natives and remains at that rate until their mid-30s.<sup>330</sup> Suicide accounts for the death of almost 20 percent of American Indian/Alaska Natives youth.<sup>331</sup> American Indian/Alaska Natives teenage girls die by suicide at three times the rate of their peers in different cultural populations.<sup>332</sup>

Lesbian, gay, bisexual, transgender, and questioning (LGBTQ) youth are also at increased risk.<sup>333</sup> Being LGBTQ alone does not put an adolescent at higher risk for suicide, but living in the closet, being outed by someone else, or being ridiculed are specific stressors for this population.<sup>334–335</sup> African American and Latino LGBTQ youth may also be at increased risk because they are less likely than White youth to come out to family and friends.<sup>336</sup>

Although most people who have a mental illness do not die by suicide, having a mental illness does increase the likelihood of suicide compared with people who do not have one.

## How to Tell Whether a Young Person is Suicidal

Important signs that a young person may be suicidal are<sup>337</sup>

- Threatening to hurt or kill themselves.
- Seeking access to pills, weapons, or other means to kill themselves.
- Talking or writing about death, dying, or suicide (including in schoolwork, creative writing, and artwork).
- Expressing hopelessness, no reason for living, or having no sense of purpose in life.
- Having rage, anger, or seeking revenge.
- Acting recklessly or engaging in risky activities, seemingly without thinking.
- Feeling trapped.
- Increasing alcohol or drug use.
- Withdrawing from friends, family, or society.
- Having a dramatic change in mood (may even be a shift from being sad and depressed to happy, with a sense of resolve; often with no clear indication of how or why the shift in mood occurred).
- Sleeping all the time or being unable to sleep.
- Being anxious or agitated.
- Giving away prized possessions.

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Department of Mental Health (2012). *Youth Mental Health  
First Aid USA for adults assisting young people.*

Young people may show one or many of these signs, and some may show signs not on this list. Another factor to consider is whether the young person has had family or friends die by suicide or whether there has been a recent suicide or multiple suicides in the community.

If you see some warning signs that the young person may be feeling suicidal, talk to the youth about what you have noticed. Let the young person know that you are concerned and are willing to help. It is important to ask the young person directly about suicidal thoughts. Although it may be uncomfortable, do not avoid using the word *suicide*. It is important to ask the question without dread and without expressing any negative judgment. Appearing confident in the face of the suicide crisis can be reassuring for the young person. The question must be direct and to the point. For example, the first aider could ask,

- "Are you having thoughts of suicide?"
- "Are you thinking about killing yourself?"

Some young people may not be able to respond to these questions, but you should observe their other behaviors as well. Not everyone is going to tell you the truth about how they feel. Although some people think that asking about suicide can put the idea in a person's mind, this is not true.<sup>338</sup> Another myth is that someone who talks about suicide is not really serious.<sup>339</sup> Remember that talking about suicide may be a way for the person to indicate just how badly they are feeling.<sup>340</sup>

When administering Mental Health First Aid to a young person experiencing a suicidal crisis, the role of family members or other caregivers cannot be overstated. For the young person, *family* may mean the biological or legal parents, siblings, other relatives, foster parents, legal guardians, caregivers, or other individuals with

primary relationships to the child whether they be blood, adoptive, legal, or social relationships. Family can include any natural, formal, or informal support people identified by the family, youth, or both. Remember, parent, caregiver, or family notification is a vital part of suicide prevention for young people. Communicate your concerns and the situation to the parent, caregiver, or family in a calm and reassuring manner.

## How to Assist

When a person is suicidal, you should always seek professional help. If the person has a weapon or is behaving aggressively toward you, you must seek assistance from law enforcement for your own safety.

### How should I talk with a young person who is suicidal?<sup>342</sup>

It is important to

- Tell the person that you are concerned and that you want to help.
- Express empathy for the young person and what they are going through.
- Respect the culture of the young person and respond in ways that demonstrate this respect. For example, consider issues such as eye contact, physical space, and language as well as the role and relationship of the first aider with the young person.
- Clearly state thoughts of suicide are common and that help is available to discuss these thoughts, because this may instill a sense of hope.
- Tell the young person that thoughts of suicide do not have to be acted on.

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Encourage the young person to do most of the talking, if they are able to. Suicidal thoughts are often a plea for help and a desperate attempt to escape from problems and distressing feelings. The young person needs the opportunity to talk about their feelings and reasons for wanting to die and may feel great relief at being able to do this.<sup>343, 344</sup>

Listen to the youth, and talk about some of the specific problems the youth is experiencing. Discuss healthful ways to deal with problems, which may seem impossible to cope with, but do not attempt to solve the problems yourself.

## How can I tell how serious or urgent the situation is?<sup>345</sup>

First, you need to determine whether the young person has definite intentions to take their life, or whether the young person has been having more vague suicidal thoughts, such as, "What's the point of going on?" To do this, you need to ask the young person if they have a plan for suicide.

The three questions you need to ask are

- "Have you decided how you would kill yourself?"
- "Have you decided when you would do it?"
- "Have you taken any steps to secure the things you would need to carry out your plan?"

A higher level of planning means a greater risk. However, you must remember that the lack of a plan is not enough to ensure the person's safety. All thoughts of suicide must be taken seriously.

Next, you need to know about the following extra risk factors:

- Has the young person been using alcohol or other drugs? The use of alcohol or other drugs can make a person more susceptible to acting on impulse.

- Has the young person made a suicide attempt in the past? A previous suicide attempt makes a person more likely to make a future suicide attempt.

## How can I keep the young person safe?

Once you have established that there is a risk of suicide, you need to take action to keep the young person safe. A young person who is actively suicidal should not be left on their own. If you cannot stay with the young person, arrange for someone else to do so. In addition, give the person a safety contact who is available at all times (such as one of the suicide hotline numbers, a friend or family member who has agreed to help, or an informal or professional help giver).

It is important to help the young person think about people or things that have supported them in the past, and find out whether these supports are still available. These supports might include a family member or friend, teacher, coach, doctor, psychologist, or other mental health worker; or an individual from a church, community organization, or recreational club.

**Do not use guilt or threats to prevent suicide.** For example, do not tell the young person they will go to hell or ruin other people's lives if they complete suicide.

## Suicide Hotlines

If you or someone you know is in suicidal crisis, call a suicide hotline (toll free, 24 hours/day, 7 days/week).

1-800-SUICIDE (784-2433)

1-800-273-TALK (8255)

1-800-799-4TTY (4889) for hearing & speech impaired

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## What About Professional Help?

### During the Crisis

Help the young person and parents or caregivers to access professional help as soon as possible. This may mean taking the young person to the emergency department of a hospital, a community mental health center, or a doctor's office. If you call ahead to make an appointment, explain that you are assisting a young person who is at risk of suicide, and ask what information is needed to provide immediate services. Even a busy doctor will ensure that a young person who is suicidal gets the help they need quickly. It will be helpful to have as much information as possible, such as health insurance coverage and mental health history. The most important thing is that the young person is not left alone. People rarely act on suicidal thoughts with other people present.

If the suicidal person has a weapon or is behaving aggressively toward you, you must seek assistance from the police to protect yourself. Let the police know that you believe this is a mental health issue and that the person may be suicidal.

As a first aider, it is helpful to know the local emergency resources and that EMTs may be the primary responders. At the point at which the EMTs arrive, your job as a first aider is to provide them with the information they request to the best of your ability.

### What the Emergency Department Needs to Know<sup>346</sup>

Inform the emergency department personnel  
If the young person has

- Access to a gun, medications, or other means of suicide.
- Stopped taking prescribed medicines.
- Stopped seeing a mental or behavioral health provider or physician.
- Written a suicide note.
- Given possessions away.
- Been in or is currently in an abusive relationship.
- Recently suffered a loss or other traumatic event.
- An upcoming anniversary of a loss.
- Started using alcohol or drugs.
- Recovered well from a previous suicidal crisis after a certain type of intervention.

Accessing services is not always easy, especially in rural areas. For example, for some tribal rural communities or western frontier regions, it may be hours to the nearest service.

## After the Crisis Has Passed

Emergency department care is short term and crisis oriented. After the suicide crisis has passed, help ensure that the young person gets whatever ongoing psychological and medical help they need. The health professional that

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helped during the crisis can assist in referring the young person to appropriate mental health care. Accessing the appropriate services, supports, and treatment is not always easy and may take days or weeks, even in an apparent crisis. If you as the first aider have an ongoing role with the young person, it may be helpful to assist the young person and the family, friends, and involved professionals in developing a safety plan that includes steps and actions to keep the youth safe as well as steps and actions to take should there be another suicidal crisis.

## What if the Young Person Makes Me Promise not to Tell Anyone Else?

You should never agree to keep the risk of suicide a secret. However, you should respect the young person's right to privacy and involve the young person in decisions regarding who else needs to know about their suicidal intentions. If the young person continues to refuse to involve anyone else, you will need to act against their wishes and contact a mental health professional and the young person's parents or caregivers. If you have to do this, tell the young person whom you have told, explain that you are acting to keep them safe, and tell the young person again that you care about them.

## Self-Care

Do your best for the young person you are trying to help. Despite our best efforts, some people will still die by suicide. The suicide or attempted suicide of an adolescent or young adult may have considerable impact on caregivers and first aiders involved. As a first aider, it is important to pay attention to your own emotional state and physical needs (proper diet and sleep) and to make sure that you are asking for and

accepting care from your social support network. Seek and accept support from trusted colleagues, friends, and family, and allow yourself time for reflection and healing. Remember to respect the young person's right to privacy; if you talk to someone, do not share the name of the young person you helped or any personal details that might make the young person identifiable to the person you choose to share with.

Use the resources listed in *Depression in Young People* to help create a support network for the young person, their family, and you.

## Self-Care

- Have I decided what I will do for self-care?
- Who can I speak with now?
- Who can I call if I feel upset or distressed later?

