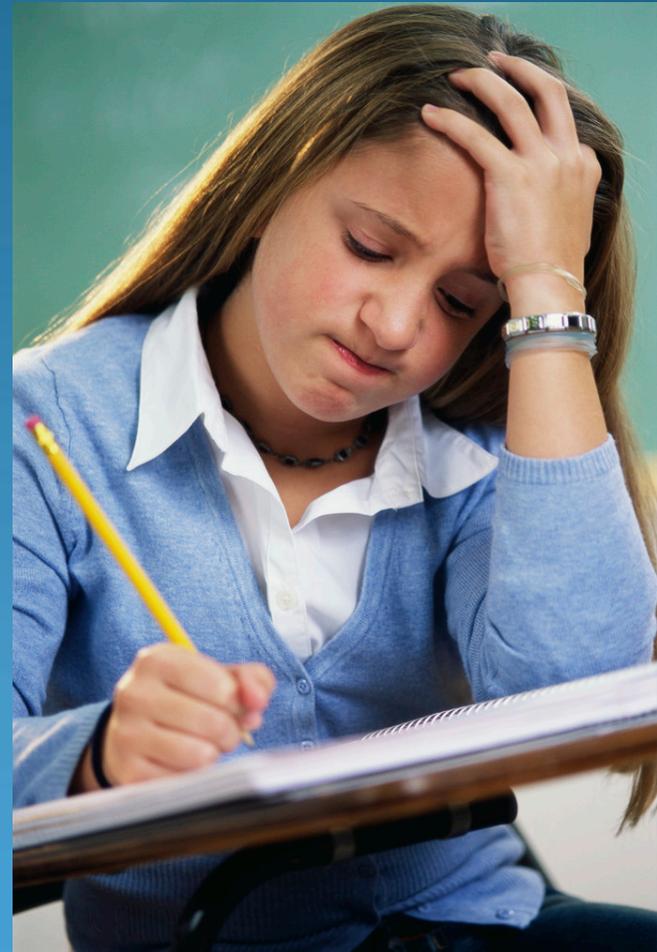


# Youth Suicide Prevention

Student Services and Alternative Programs Branch  
Division of Student, Family, and School Support  
Maryland State Department of Education  
August 2007

# Youth Suicide Prevention

Suicidal behavior includes suicidal ideation (thoughts), attempts, and completions.



# Incidence of Youth Suicide

According to the Federal Centers for Disease Control and Prevention, suicide continues to be the third leading cause of death for youth in the United States and in Maryland.

# Incidence of Youth Suicide

Nationally, more children and adolescents die annually from suicide than from cancer, heart disease, AIDS, birth defects, and other medical conditions *combined*.

# Incidence of Youth Suicide in Maryland

Suicide is the third leading cause of death among Maryland youth, ages 15-19.

During 2004, Maryland lost a total of 86 youth due to suicide.

# 2005 Maryland Youth Risk Behavior Survey

About one in every six Maryland high school students (17.4 percent) say that they seriously considered suicide in the past 12 months. At this rate, Maryland high school students are about as likely to seriously consider a suicide attempt as students in the Youth Risk Behavior Survey (YRBS) national sample.

# 2005 Maryland Youth Risk Behavior Survey

Within Maryland's high school population, female students are significantly more likely to have seriously contemplated suicide within the past 12 months than their male counterparts (22% for females vs. 12.9% for males).

# 2005 Maryland Youth Risk Behavior Survey

The results of the Maryland YRBS indicate that more than one in ten Maryland high school students reported making a plan to commit suicide in the past 12 months.

# 2005 Maryland Youth Risk Behavior Survey

About one in ten Maryland high school students (9.3%) attempted to commit suicide within the past 12 months, according to the YRBS. At this rate, Maryland students are comparable to high school students nationwide.

# 2005 Maryland Youth Risk Behavior Survey

Among Maryland high school students, female students are significantly more likely to have attempted suicide than male students. In fact, the percentage of female students who attempted suicide in the past 12 months is over twice the rate for male students (12.4 vs. 6.1 percent).

# 2005 Maryland Youth Risk Behavior Survey

Suicide attempts requiring medical treatment are infrequent for high school students in both the Maryland and the national YRBS samples (2.7 vs. 2.3 percent, respectively). There is no significant difference between genders or between grades in the incidence of suicide attempts that require medical attention.

# 2005 Maryland Youth Risk Behavior Survey

Depression is the most common form of mental illness and is estimated to be involved in about two-thirds of all suicides, a major area highlighted in the 2005 YRBS.



# 2005 Maryland Youth Risk Behavior Survey

According to the YRBS, more than one-quarter of all Maryland high school students experienced sustained periods of sadness or hopelessness over a 2-week period during the past 12 months (29.7 percent). This rate of incidence is comparable to the rate nationwide (28.5 percent).

# 2005 Maryland Youth Risk Behavior Survey

According to the YRBS, female high school students in Maryland are almost twice as likely as male students to experience prolonged periods of depression (38.1% vs. 21.5%).

# Youth Suicide Prevention School Program

The Annotated  
Code of Maryland,  
Educational  
Article, § 7-503  
establishes a  
statewide Youth  
Suicide Prevention  
School Program.



# Youth Suicide Prevention School Program

## Requirements

(1) Assist in increasing the awareness, among school personnel and community leaders, of the incidence of teenage suicide;

# Youth Suicide Prevention School Program

## Requirements

(2) Train school personnel in individual and schoolwide strategies for teenage suicide prevention;

# Youth Suicide Prevention School Program

## Requirements

- (3) Develop and implement school-based teenage suicide prevention programs and pilot projects;

# Youth Suicide Prevention School Program

## Requirements

- (4) Through cooperative efforts, utilize community resources in the development and implementation of teenage suicide prevention programs under this subtitle (Annotated Code of Maryland, Education Article, §7-505).

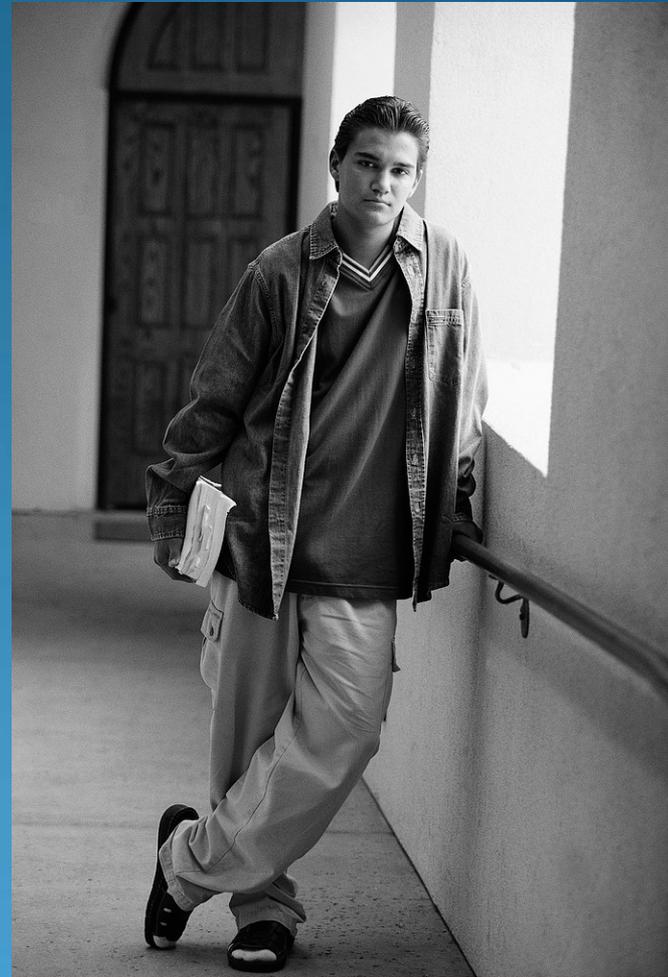
# Youth Suicide Prevention School Program

- I. Prevention
- II. Intervention
- III. Postvention

# Prevention

*You can help!*

*Learn the  
warning signs of  
suicide.*



# Prevention

It is estimated that four of five suicide victims demonstrated identifiable warning signs before completing suicide. School personnel need to be knowledgeable about warning signs of youth suicide and potential triggers.

# Youth Suicide

## Warning Signs

- Current suicidal ideation, intent, and plan
- Verbal and written statements about suicide, death and dying
- Dramatic changes in behavior or personality
- Symptoms of depression
- Preoccupation with death and suicide themes
- Giving away prized possessions
- Increased use of alcohol or drugs

## Triggers

- Getting into trouble with authorities
- Knowing someone who died by suicide
- Breakup with a boyfriend or girlfriend
- Academic crisis or school failure
- Death or loss of a loved one or significant person
- Bullying/victimization

# Prevention

Maryland's Voluntary State Curriculum (VSC) defines what students should know and be able to do at each grade level. The VSC content area of Health Education addresses Mental and Emotional Health (Standard 1.0).

# Prevention

## Mental and Emotional Health (Standard 1.0)

*Students will demonstrate the ability to use mental and emotional health knowledge, skills, and strategies to enhance one's self-concept and one's relationship with others.*

# Prevention

Mental and Emotional Health (Standard 1.0)

## Grade 8

**Identify and respond to signs of potential destructive behaviors.**

- a. Identify warning signs of deep depression/suicide.
- b. Identify and apply suicide prevention strategies.

# Prevention

## High School

**Recognize and respond to potential destructive behaviors.**

- a. Identify and recognize warning signs of depression.
- b. Recognize and explain warning signs of suicide.
- c. Apply strategies and skills to intervene when signs of depression occur.
- d. Demonstrate the ability to access information and services to help prevent suicide.

# Prevention

## Facts to Consider

1. Most suicidal youth confide concerns more often to peers than adults.
2. As few as 25% of peer confidants tell an adult about their troubled or suicidal peer.
3. Reluctance to tell a helpful adult considered a risk factor.
4. Contact with helpful adults may be considered a protective factor for a variety of troubled youth.

# Intervention

## Some suicide intervention guidelines for schools

- Detect warning signs of suicide.
- Identify suicidal student.
- Supervise the student.
- Remove access to methods.
- Inform appropriate staff member immediately.
- Notify the student's parents.
- Assess and respond to student's level of risk.
- Refer for community services & plan follow-up.

# Intervention

- Many researchers contend that direct assessment of students is essential.
- Risk of suicidal behavior is a function of *intent* and *lethality*.
- Students with a high level of intent who use methods of high lethality (e.g., firearms) present the greatest risk.

# Postvention

1. Postvention refers to the provision of systematic crisis intervention, support, and assistance for those affected by a completed suicide.
2. Postvention provides appropriate emotional support and information to those affected by suicide.
3. Postvention strategies are designed to minimize contagion.

# Postvention

## Key Components

- Prepare written procedures in advance
- Identify and train postvention crisis team
- Assign specific crisis response duties to specific team members

# Postvention

## Some suicide postvention guidelines for schools

- Plan in advance of any youth suicide.
- Train the crisis team about youth suicide response.
- Disseminate accurate information to faculty, students, and parents.
- Report information to students in small groups (classrooms) using fact sheets and uniform statements.
- Do not release information about a completed suicide in either a large assembly or over intercom systems.
- Provide counseling services for students.
- Provide counseling and/or discussion opportunities for the faculty.

# References

American Association of Suicidology (1999). Guidelines for School Based Suicide Prevention Programs (pp. 1 to 16).

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