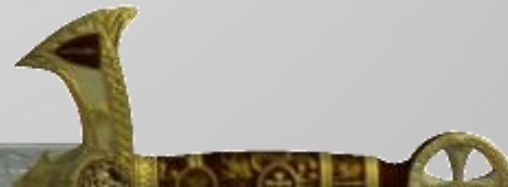
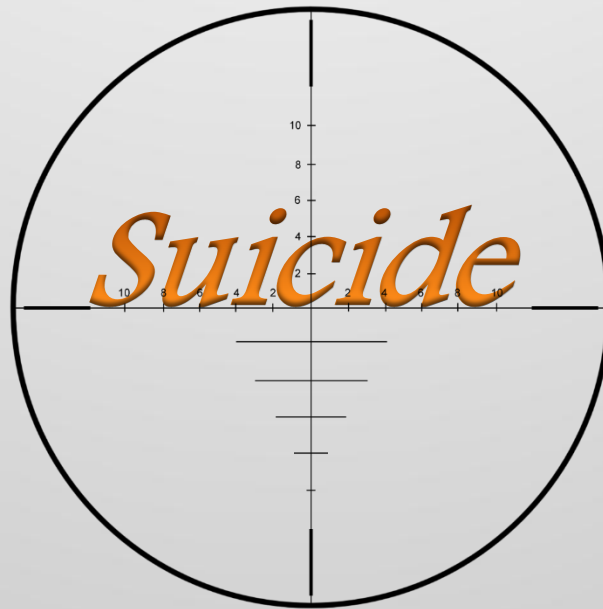




# 2015 Maryland Advisors' Meeting

## Take AIM Against



# Introduction

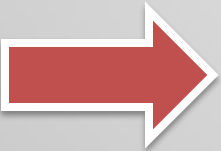
# What is Suicide?

- ***Suicidal Behavior***: a preoccupation or act that is focused on causing one's own death voluntarily
- ***Suicidal Ideation***: thoughts
- ***Suicide Attempt***: an unsuccessful act focused on taking one's own life
- ***Suicide***: an act that succeeded in taking one's own life

# Suicide Facts

## 7 Facts About Suicide

- 1** Every 2 hours and 11 minutes, a person under the age of 25 completes suicide
- 2** 24% of high school students have seriously thought about attempting suicide.
- 3** Suicide is the **third leading cause of death** for 15 - 24 year olds and the **sixth leading cause of death** for 5 - 15 year olds.
- 4** More teenagers and young adults died as a result of suicide in 1999 than **cancer, heart disease, HIV/AIDS, birth defects, stroke and chronic lung disease combined.**
- 5** For every older teen and young adult who takes his or her own life, **100-200 of their peers attempts** suicide.
- 6** 15.8% of High School Students reported that they **seriously considered attempting suicide**, 12.8% reported **creating a plan**, and 7.8% had **attempted suicide** 1 or more times
- 7** Suicide among males is **4 times higher** than among females; however females are **more likely** than males to have suicidal thoughts



# Suicide Myths

5 of 21

## Myths versus Facts about Suicide



1. People who talk about suicide don't commit suicide.



**Myth**



Approximately 80% of those who attempt or commit suicide give many clues and warnings of their intentions.



**Fact**



2. Suicidal people are fully intent on dying.



**Myth**



Most suicidal people are undecided about living or dying, and they “gamble with death”, hoping that others will save them. They do not want death; they want the pain to stop.



**Fact**





# Suicide Myths

6 of 21

## Myths versus Facts about Suicide



3. Once a person is suicidal, he is suicidal forever.



**Myth**



Individuals are suicidal only for a limited period of time.



**Fact**



4. Suicide is inherited or “runs in the family”.



**Myth**



Suicide does not run in families however, individuals who have experienced a suicide within the family or of a close friend might be at greater risk.



**Fact**



# Factors Contributing to Suicide



Risk Factors



Triggering Events



Warning Signs

# Risk Factors





# Risk Factors

- History of prior suicide attempt
- Proximal suicidal ideation
- Current episode of depression
- Recent attempt by friend
- Low self-esteem
- Born to a teenage mother

# Other Risk Factors

- Biochemical (serotonin / melatonin)
- Type T personality
  - thrill seeking or risk taking personality
    - Extreme sports
    - Drugs & crime (especially violent)
- Non-Suicidal Self-Injury (NSSI)
- Confusion about gender identity
- Societal / religious tolerance

# Suicide Factors

## Risk Factors

- Available means of suicide
- Media portrays suicide attractively

-

Societal

+

## Protective Factors

- Restrict means of suicide
- Construct mass media messages carefully

- Limited social services
- Limited mental health infrastructure

-

Community

+

- Ample social services
- Robust mental health infrastructure

- Stressful / violent personal relationships
- Family history of suicide

-

Relationship

+

- Nurturing personal relationships
- No family suicide history

- Substance / ETOH abuse
- Prior suicide attempt
- Impulsivity/ aggression

-

Individual

+

- No substance / ETOH abuse
- Reasons for living
- Moral objections to suicide

# Risk Factors Depression

# Teen Depression

All these people really seem to have it together,  
and I still have no idea what's going on.





# Teen Depression

20% of teens sink into depression...

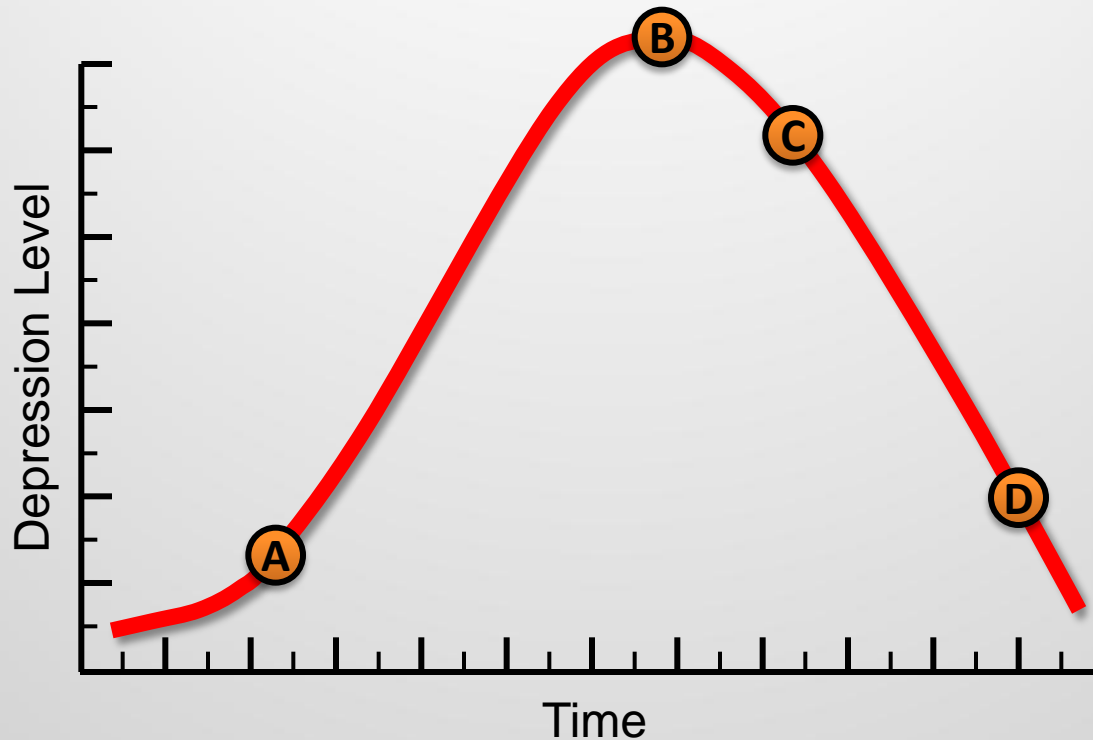


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# What is Depression?

- Feeling sad, empty or tearful
  - Teens may present constant irritability
- Internally focused state with reduced interest in most or all activities
- Significant +/- change in body weight
- Insomnia or decreased sleep desire
- Restlessness or slowed behavior
- Difficult cognition or concentration

# Depression & Suicide Risk



At which point is a depressed individual most likely to attempt suicide: A, B, C or D?

# Risk Factors

## Type T Personality

# T Personality Traits

- Like to take risks
  - Extroverted & creative
  - Crave novel experiences & excitement





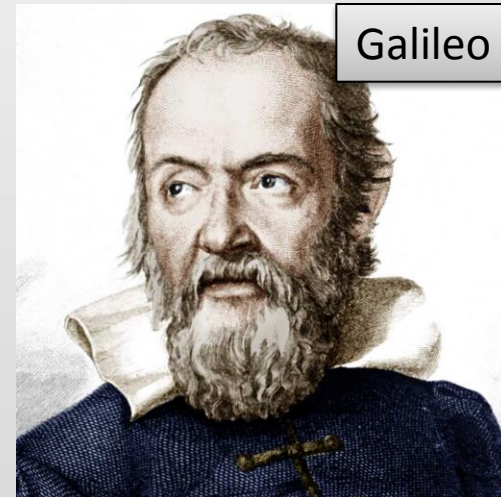
# T Personality & Extreme Sports

# T Personality Traits

- Manifestations
  - Physical “Ts” – athletes
  - Mental “Ts” – innovators / inventors



2010 confessed to serial adultery



I do not feel obligated to believe that the same God who has endowed us with sense, reason, and intellect has intended us to forego their use.

# T Personality Traits

- Manifestations
  - Positive – entrepreneurs
  - Negative – sociopaths



# Risk Factors Non~Suicidal Self~Injury

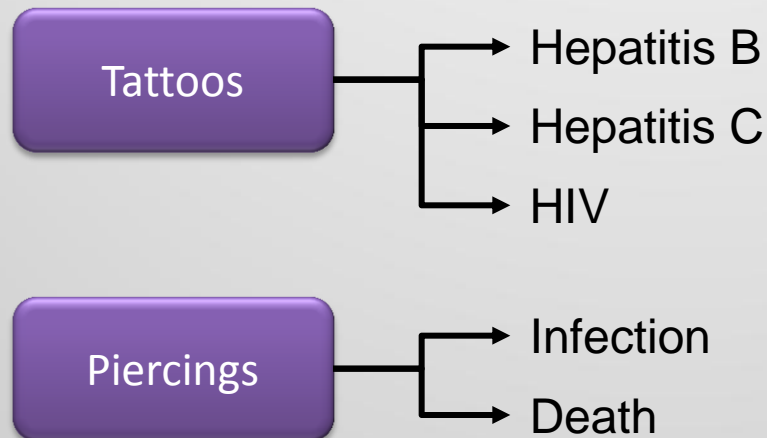
# Non-Suicidal Self-Injury (NSSI)

- Direct and deliberate damage of one's own body surface without suicidal intent
  - Tattoos
  - Piercings



# Non-Suicidal Self-Injury (NSSI)

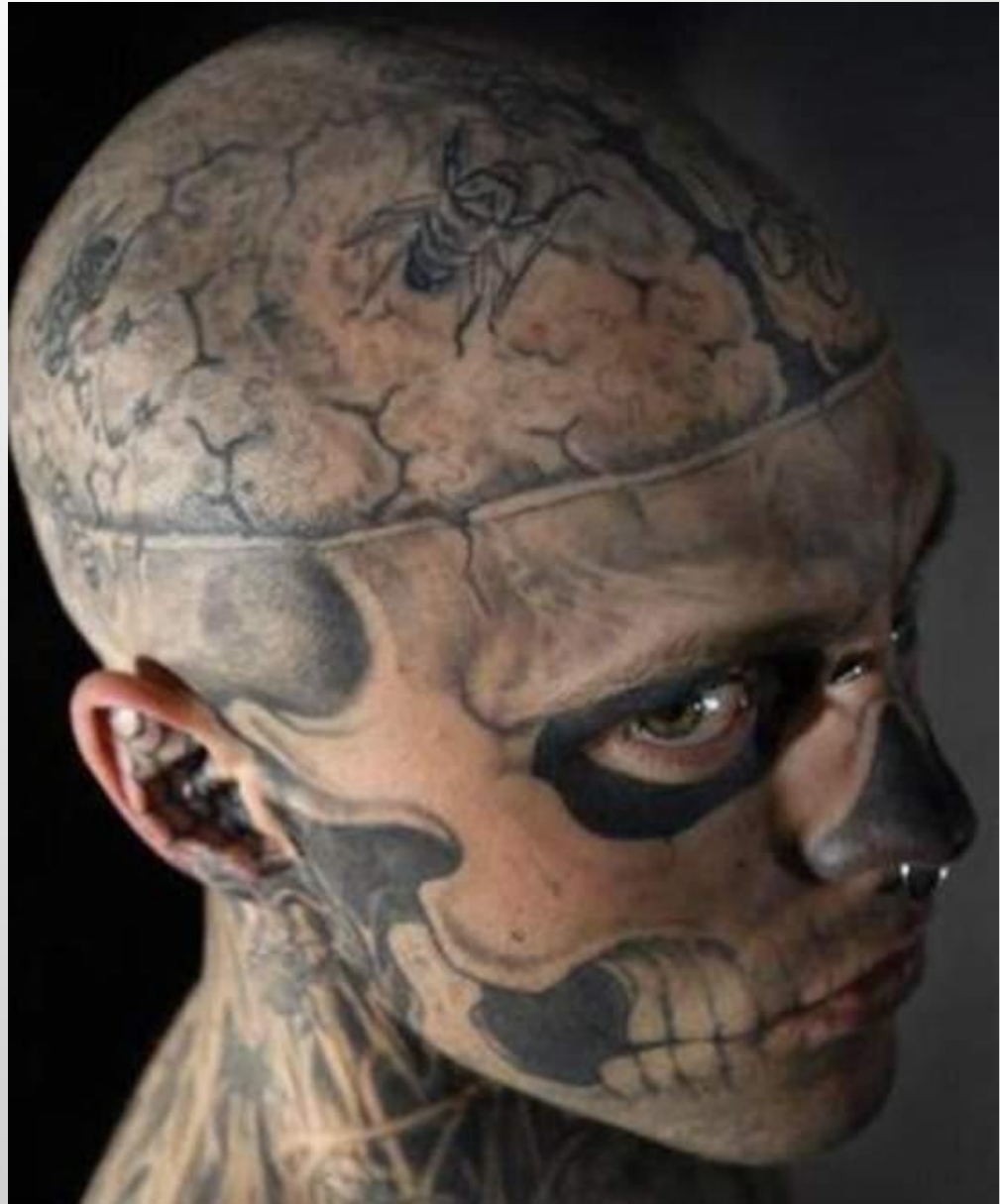
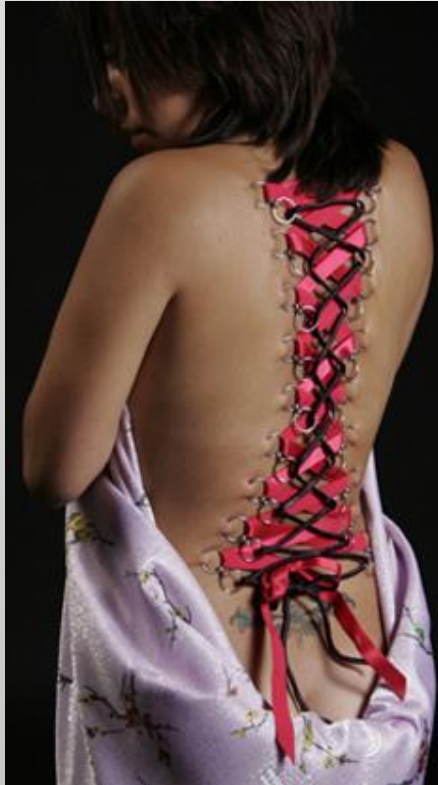
- NSSI is associated with health risks related to amount of tissue injury and individual factors



# United States Cultural Norms

- Sociological factors determine line between acceptable / not acceptable
- Norms in flux due to influence of social activists
  - Growth of gangs and tolerance of gang influences by society-at-large

# Acceptability / Non-acceptability



# Acceptability / Non-acceptability



# Triggering Events





# Potential Triggering Events

- Targeted by bully
- Significant, intractable pain
- Imminently life-threatening illness
- Severe, progressive debilitation
- Stressful life event(s)

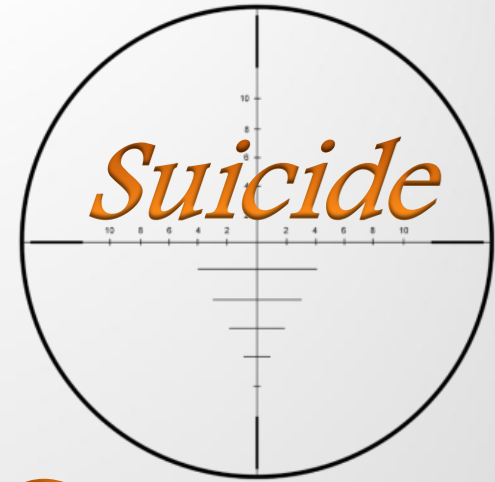
# Warning Signs



# Look Especially for These Behaviors

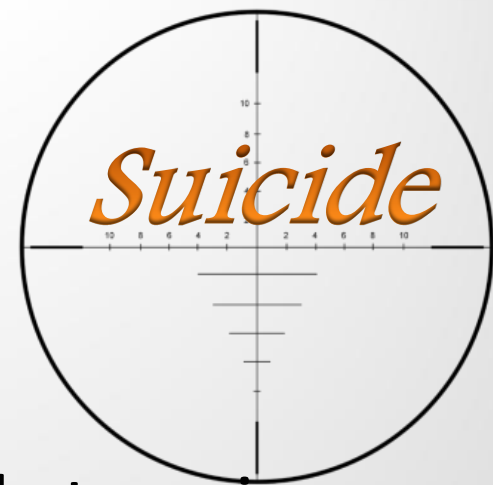
- Sadness, hopelessness, or isolation
- Declining school performance
- Loss of pleasure or interest in social and sports activities
- Sleeping too little or too much
- Changes in weight or appetite
- Nervousness, agitation or irritability
- Substance abuse

Taking AIM Against



Assess  
Intervene  
Monitor

# Taking AIM Against



## **Assess**

- Use observation or other tools to gain a deeper understanding of the behavior

## **Intervene**

- Employ measures to shift behavior in a desired direction

## **Monitor**

- Determine effectiveness of interventions
- Decision: Continue monitoring or reassess?

Taking AIM Against



Assess

# Assessment Guidelines

- Check for warning signs
- Check for suicide risk factors
  - Ask: “Are you thinking about suicide?”
  - Ask: “What actions have you taken to prepare for death”
  - Look for evidence that person has actively concealing preparations

# Assessment Guidelines

- Sources for potential questions
  - Oxford Happiness Questionnaire
  - Adolescent Life Change Scale
  - Depression Scale for Children
  - Inventory of Statements about Self Injury
  - Beck's Suicide Intent Scale (short form)



# Beck's Short Assessment Form

## Shortened version of Beck's suicide intent scale

Category		Circumstances	Scoring
<i>Circumstances related to suicide attempt</i>			
1	Isolation	somebody present	0
		somebody nearby or in contact (as by phone)	1
		no one nearby or in contact	2
2	Timing	timed so that intervention is probable	1
		timed so that intervention is not likely	2
		timed so that intervention is highly unlikely	3
3	Precautions against discovery and/or intervention	no precautions	0
		passive precautions, e.g. avoiding others but doing nothing to prevent their intervention (alone in room, door unlocked)	1
		active prevention, such as locking doors	2
4	Acting to gain help during or after the attempt	notified potential helper	0
		contacted but did not specifically notify potential helper regarding attempt	1
		did not contact or notify potential helper	2
5	Final acts in anticipation of death	none	0
		partial preparation or ideations	1
		definite plans made (e.g. changes in will, taking out insurance)	2
6	Suicide note	none	0
		none written but torn up	1
		present	2

# Assessment Guidelines

## Estimated Suicide Risk

Risk Level	Risk / Protective Factor	Suicidality
High	Psychiatric disorders with severe symptoms, or acute precipitating event; protective factors not relevant	Potentially lethal suicide attempt or persistent ideation with strong intent or suicide rehearsal
Moderate	Multiple risk factors, few protective factors	Suicidal ideation with plan, but no intent or behavior
Low	Modifiable risk factors, strong protective factors	Thoughts of death, no plan, intent or behavior

Taking AIM Against



Intervene



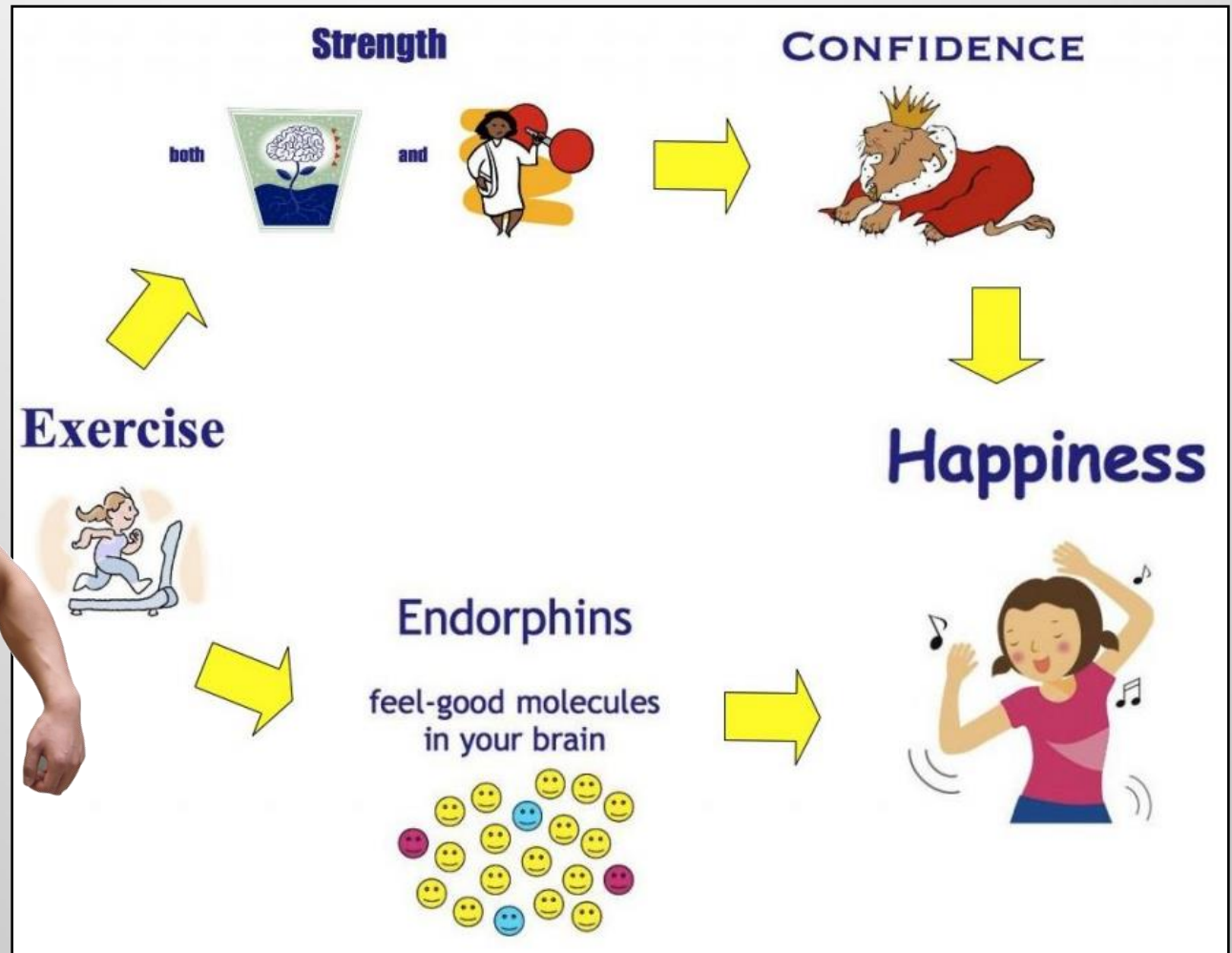
# Self-Management

- High risk individuals should:
  - Use good sleep hygiene\*
  - Get plenty of exercise\*
    - Especially aerobics and outdoor activities
  - Learn behavioral management techniques
    - Rational emotive therapy (RET) & others

\*Documenting sleep, exercise, and thoughts & feelings

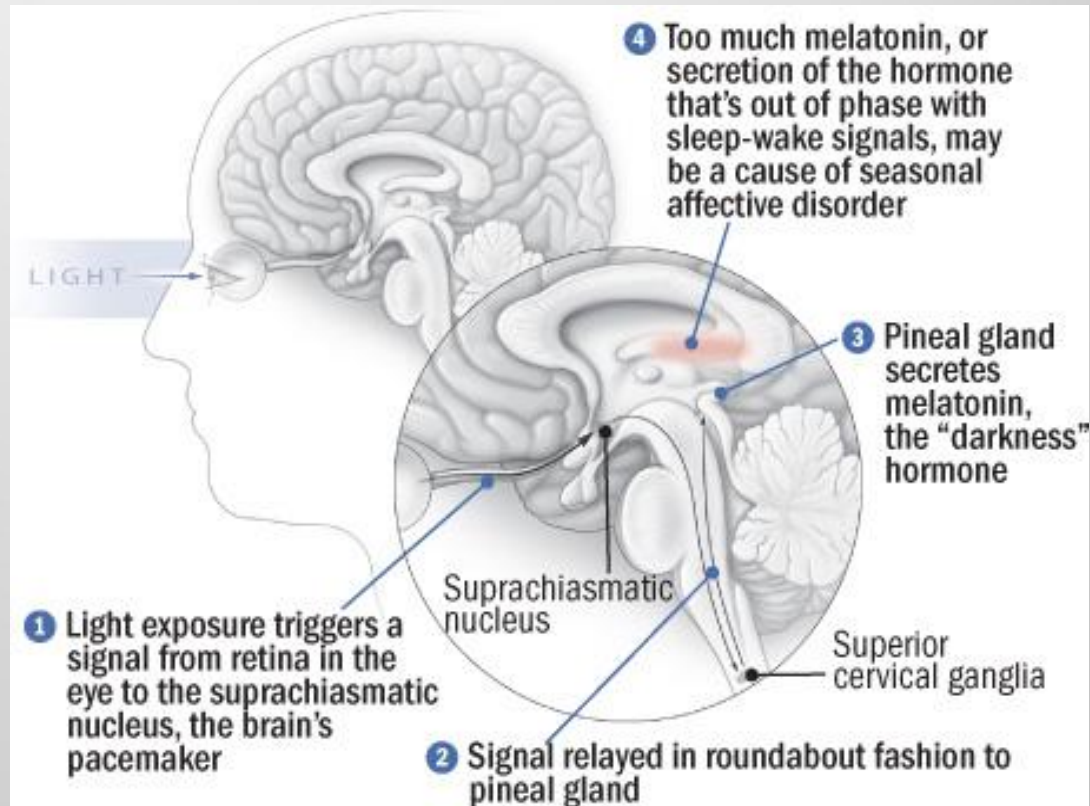
# Biological Basis for Intervention

- Why increase physical activity?



# Biological Basis for Intervention

- Why outside activity?
  - Light exposure inhibits melatonin release



# Biological Basis for Intervention

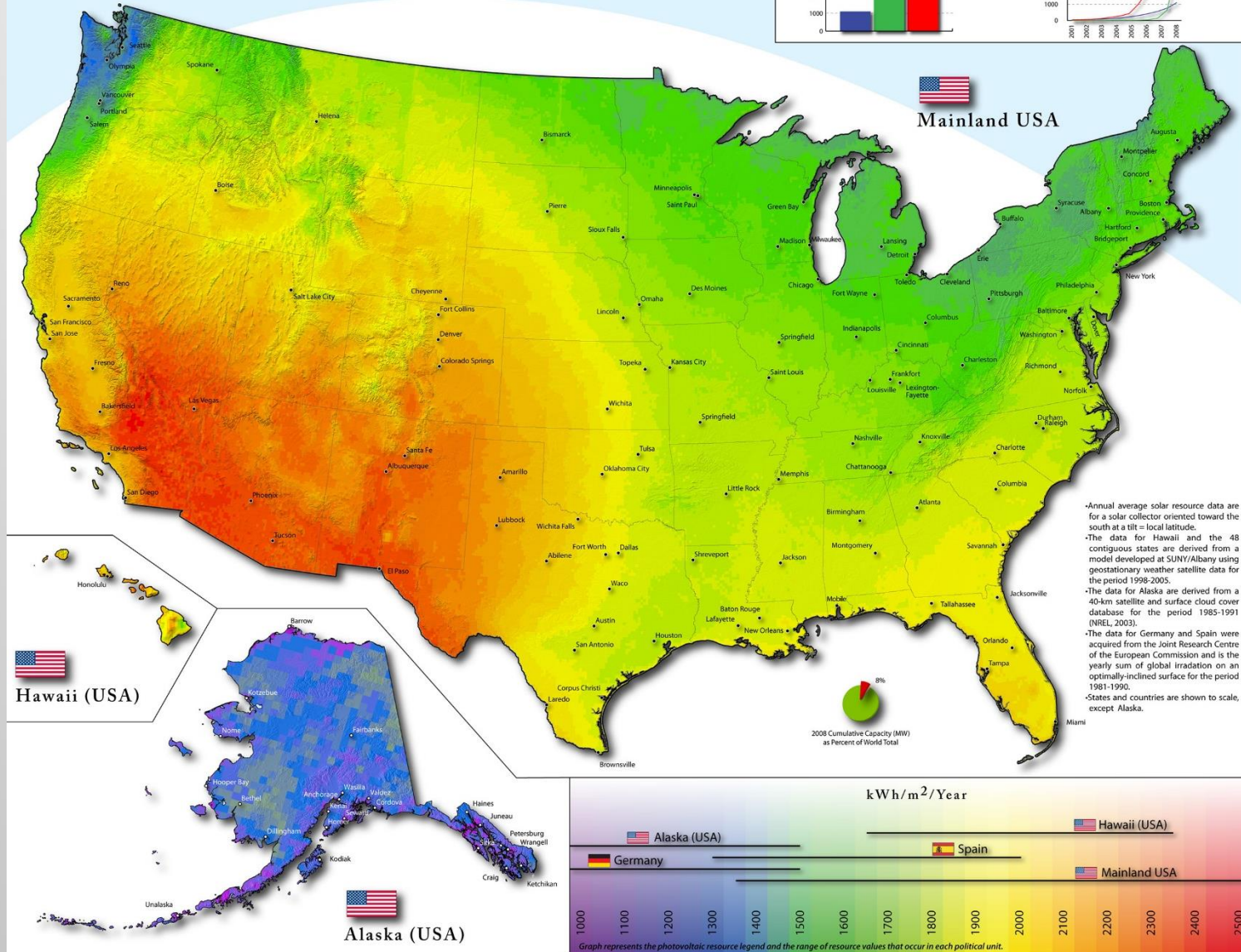
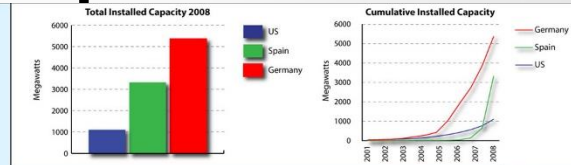
- Depression may be more of a problem in some regions especially in the winter
- Reduced light exposure is a factor in seasonal affective disorder
- Phototherapy can help





# Regional Light Exposure

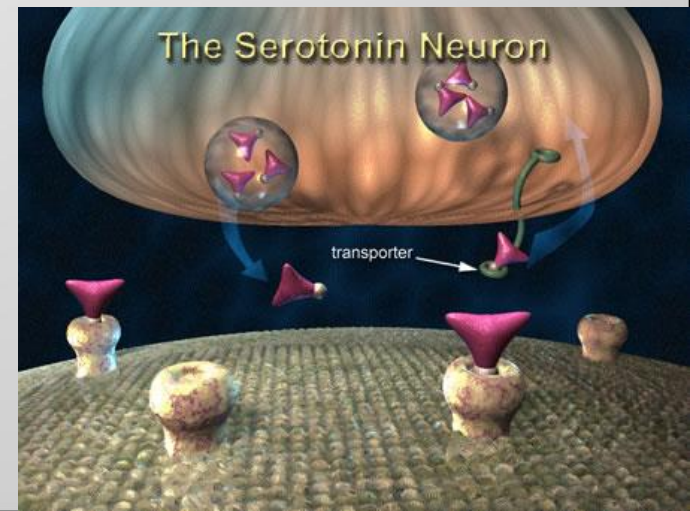
## Photovoltaic Solar Resource The United States of America, Spain and Germany





# Biological Basis for Intervention

- Why sleep hygiene?
  - Serotonin is released during sleep
  - Serotonin deficiency increases the risk of depression
  - Getting 7 – 8 hours of sleep each night can prevent depression





# Parental Interventions

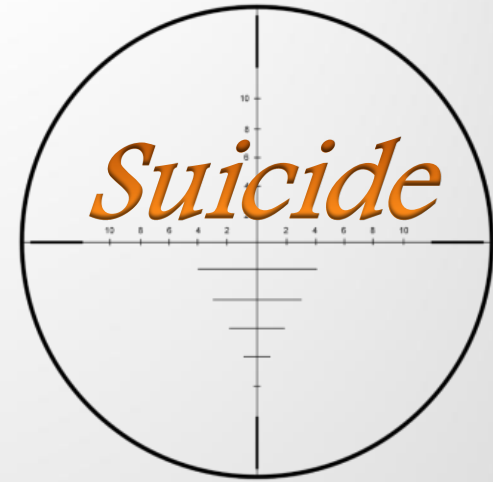
- Parents should:
  - Keep medications and firearms away from children.
  - Get your child help (medical or mental health professional).
  - Support your child (listen, avoid undue criticism, remain connected).
  - Become informed (library, local support group, Internet)



# Peer Interventions

- Peers should:
  - Take your friend's behavior and discussion of suicide seriously.
  - Encourage your friend to seek professional help, accompany if necessary.
  - Talk to an adult you trust. Don't be alone in helping your friend.

Taking AIM Against



Monitor

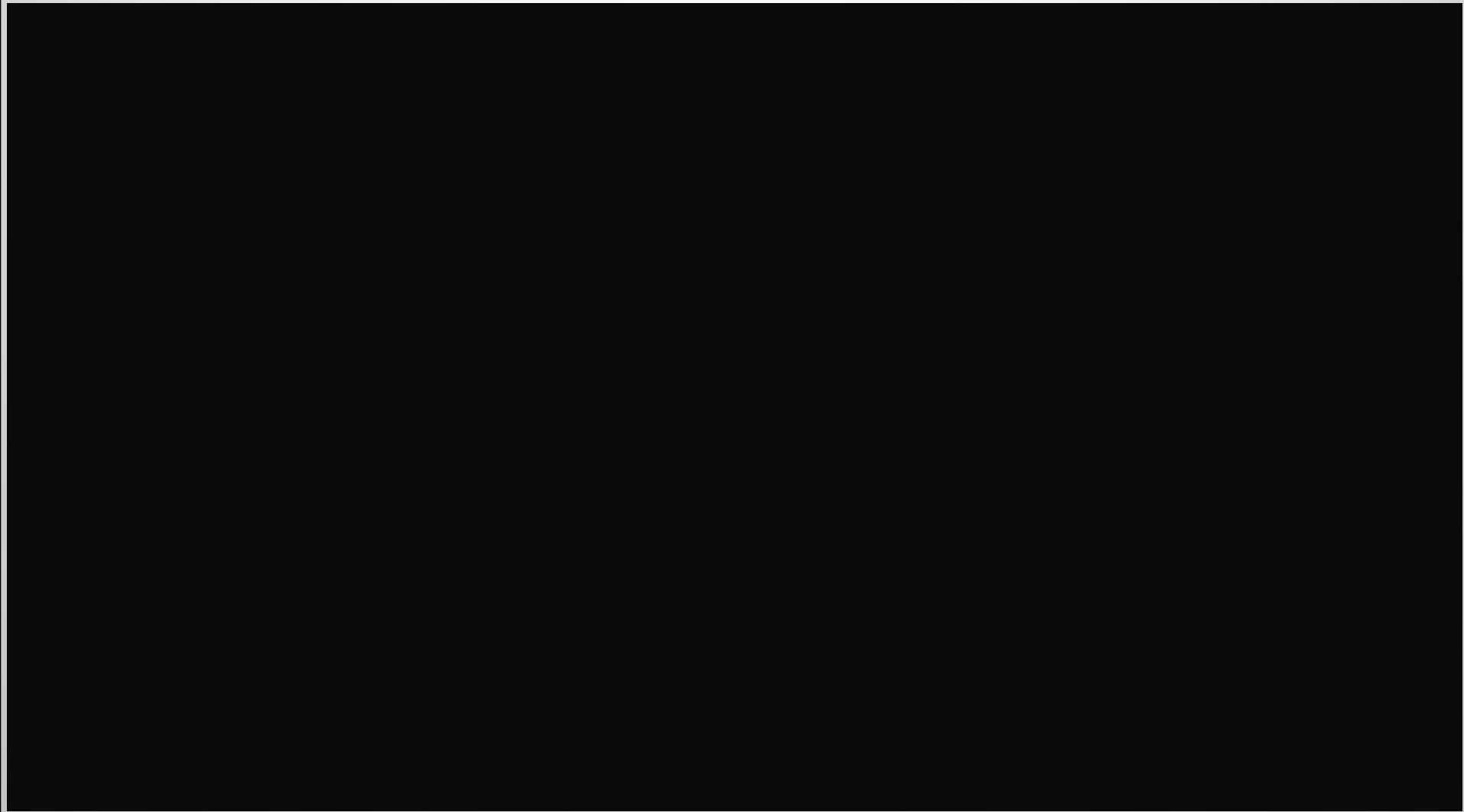


# Monitoring

- Ask high risk individuals about suicidal ideation and other behaviors
- Observe high risk individuals for warning signs of depression & other behaviors
- Observe activities and social interactions

If suspicious behavior noted repeat A-I-M cycle

# Suicide Prevention Video



# Questions