Suicide Awareness and Resources for Educators
Office of Superintendent of Public Instruction
Student Engagement and Support

Understanding Suicide
There is no single cause of suicide. Suicide occurs at the intersection of stressors such as a lack of belonging, feeling burdensome, and health issues such as depression, anxiety, and substance use.

Suicide Warning Signs
Signs of changes in behavior, especially if the behavior change is related to a painful event, loss, or change (such as failing a test, a breakup, or relocation). This may show up through talk, actions, or state of mind:

- Talking about killing oneself
- Feelings of hopelessness
- Feeling Trapped
- Unbearable Pain
- Increases in substance use
- Researching for methods of suicide
- Stopping normal activities
- Isolating
- Changes in sleep
- Saying their goodbyes
- Giving away possessions
- Humiliation/Shame
- Aggression/Irritability
- Depression
- Anxiety
- Loss of Interest
- Relief or Sudden Improvement

Suicide Risk Factors
Risk Factors are the traits or circumstances that contribute to increased risk for suicide. This may be one or a combination of health, environmental, and historical factors.

- Mental Health Conditions
- Physical Health Conditions; Pain
- Traumatic Brain Injury
- Exposure to another person’s suicide
- Access to firearms and drugs
- Harassment/Bullying
- Relationship Problems
- Previous Suicide Attempts
- Abuse/Neglect

Suicide is an attempt to solve a problem of intense emotional pain with impaired problem solving skills (Kalafat & Underwood, 1989)
How to Help: LEARN

The University of Washington Forefront Suicide Prevention LEARN™ steps are an excellent tool for intervening with those who may be in a deep crisis and considering suicide.
To learn more, go to www.intheforefront.org

**LOOK FOR SIGNS**
Talking, joking or researching about death.
Feeling hopeless, depressed, trapped, irritable, agitated, anxious, ashamed, humiliated or burdensome.
Changes in personality, academic/work performance, sleep, withdrawing from friends/activities.
Abusing alcohol/drugs, reckless behavior, self-harm/cutting, giving away possessions.

**EMPATHIZE AND LISTEN**
Most importantly, just listen.
Listen with compassion, remain calm, avoid judgement and validate their feelings.
Don’t offer quick fixes, tell them everything will be OK, show anger, panic, or ask “why” questions.
People who have survived suicide attempts report what was most helpful to them—just listen.

**ASK ABOUT SUICIDE**
Ask in a way that invites an honest response. Use any signs you’ve noticed as part of the ask.
Be direct. Use the word “suicide” and be prepared to hear a “yes.”
Asking about suicide will NOT put the idea in someone’s head. Not asking is far more dangerous.

**REDUCE THE DANGER**
Means reduction is a proven approach to help make your home Suicide Safer.
If they say yes, ask them “Do you have a plan?” “Do you have access to those means?”
Restrict or remove access to firearms, medications, belts, ropes, knives, alcohol and chemicals.
Report concerning posts on social media. See reporting links here: www.helpingcasey.com

**NEXT STEPS**
Never leave the person alone. There are resources to help you and the person in crisis. See below.
Provide a warm hand-off (stay with the person until they receive help).

**Resources and References**

Crisis Text Line: Text the word HEAL to 741741
Suicide Lifeline: 1-800-273-8255 (TALK)
Society for the Prevention of Teen Suicide sptsusa.org
American Foundation for Suicide Prevention afsp.org
After a Suicide Toolkit for Schools
UW Forefront intheforefront.org
OSPI Suicide Prevention Webpage

OSPI Contact:
Camille Goldy
Behavioral Health and Suicide Prevention
360-725-6071
camille.goldy@k12.wa.us