

# The Zoom Interface

The screenshot shows a Zoom Webinar window with the following elements and callouts:

- Header:** "Zoom Webinar", "You are viewing David Terry's screen", "View Options", and "Click here to maximize your session view".
- Content Area:** TTC Technology Transfer Centers logo, "Thank you for joining us today!", and "You will not be on video during today's session".
- Q&A Window:** A "Question and Answer" window with "All questions (1)" and "My questions (1)" tabs. It contains a test question and a text input field. Callouts explain: "You can switch between questions you've asked and those asked by others using these buttons.", "You can use the Q&A feature to ask questions of the host and presenters. These questions can receive text or live responses. To begin asking a question use the field below. You can see a test question above.", and "Type your question here...".
- Chat Window:** A "Zoom Webinar Chat" window on the right. Callouts explain: "The chat feature will allow you to talk with other people in today's webinar.", "The To field will tell you who will receive your message. Be mindful of who you are chatting to.", and "To: All panelists".
- Bottom Bar:** "Audio Settings", "Click Here to adjust your audio settings", "Chat", "Raise Hand", "Q&A", "Click here to leave the session", and "Leave".
- Speaker Selection:** A "Select a Speaker" menu with options: "Speakers (Realtek(R) Audio)", "Same as System", "Test Speaker & Microphone...", "Leave Computer Audio", and "Audio Settings...".

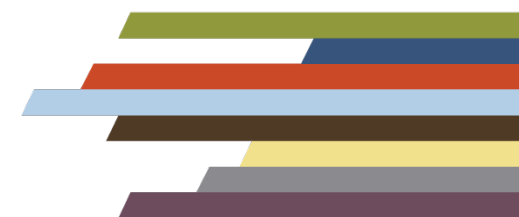
**All attendees are muted. Today's session will be recorded. A link to the presentation slides and a recording of the webinar will be emailed. Certificates of Attendance will be emailed.**



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# Suicide Prevention During COVID-19 and Beyond

*PJ Wenger, LPC, MFT, NCC*



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# About Us ...

The Northeast and Caribbean MHTTC provides 5 years (2018 – 2023) of funding to:

- Enhance capacity of behavioral health workforce to deliver evidence-based and promising practices to individuals with mental illnesses.
- Address full continuum of services spanning mental illness prevention, treatment, and recovery supports.
- Train related workforces (police/first responders, primary care providers, vocational services, etc.) to provide effective services to people with mental illnesses.

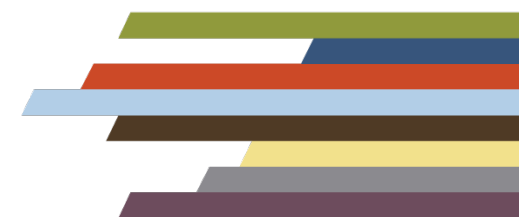
Supplemental funding to work with school teachers and staff to address student mental health.



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# Grow Your Knowledge and Skills

Keep up with the latest effective practices, resources, and technologies!

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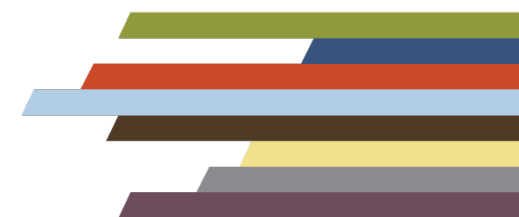
<https://bit.ly/2mpmpMb>



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# We Want Your Feedback!

Our funding comes from the Substance Abuse and Mental Health Services Administration (SAMHSA), which requires us to evaluate our services. We appreciate your honest, ANONYMOUS feedback about this event, which will provide information to SAMHSA, AND assist us in planning future meetings and programs.

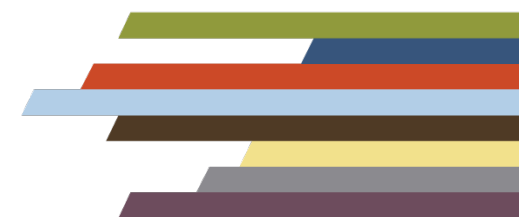
Feedback about this training will assist us in developing trainings that are relevant to your current professional needs. Therefore, your feedback counts!



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# Video Recording Information

## ***Please Note:***

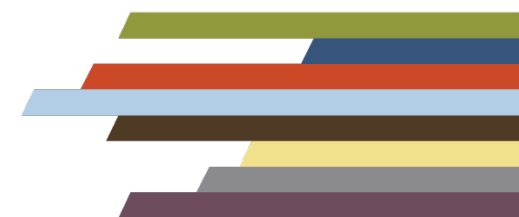
We will be recording this webinar and posting it to our website along with the presentation slides and any relevant resources.



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# Your Interactions With Us

## Question and Answers

- Q & A will occur at the end of the call.
- Type your questions in the Q & A feature in Zoom located on the task bar (hover over task bar).
- Be aware: your question is visible to all participants.

## Chat and Polls

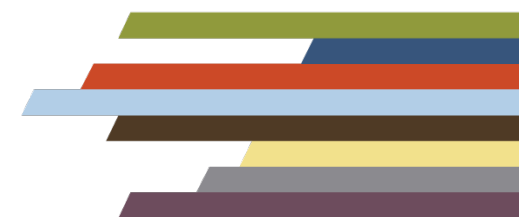
- Throughout the webinar, we will be asking for your input.
- Use the Chat or Poll features in Zoom located on the task bar.
- You can control who can see your chat comments.



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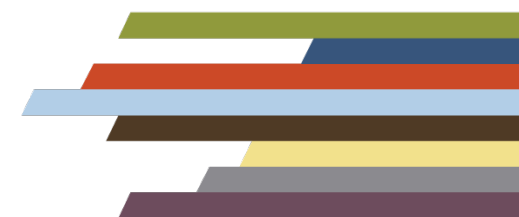
This presentation will be recorded and posted on our website. At the time of this presentation, Elinore F. McCance-Katz served as SAMHSA Assistant Secretary. The opinions expressed herein are the views of the presenters, and do not reflect the official position of the Department of Health and Human Services (DHHS), or SAMHSA. No official support or endorsement of DHHS, SAMHSA, for the opinions described in this presentation is intended or should be inferred.



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# Our Presenter:



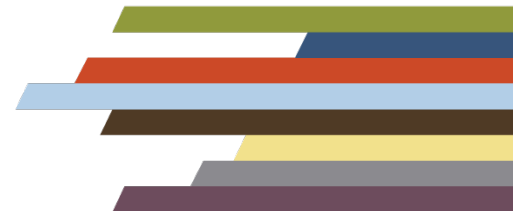
**PJ Wenger LPC, NBCC, MFT, Ed.S., MA, M.Ed.**



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# Objectives

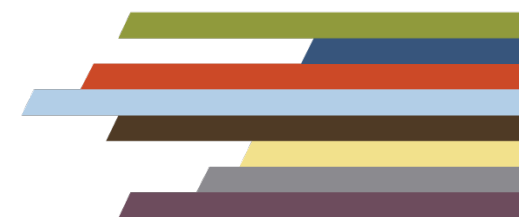
- To dispel myths about suicide
- To identify signs & symptoms of someone who may be experiencing suicidal thoughts
- To identify risk factors
- To understand how to have a meaningful conversation around suicide
- Develop awareness of how to intervene and help a person who may be suicidal.
- To provide resources and referral sources



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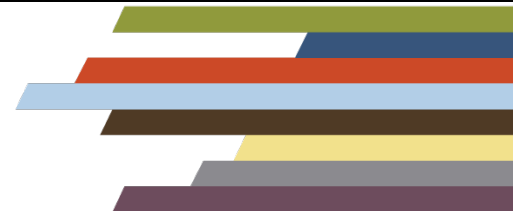
*When it is darkest, we can  
see the stars.* Ralph Waldo Emerson



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# Some Grim Statistics

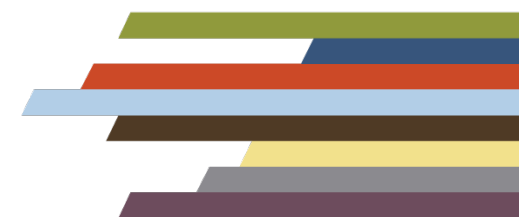
- From 1999 to 2018 the suicide rate increased by 35% (cdc.gov)
- Suicide rates for males was 3.5-4.5 times the rate for females during that entire time (cdc.gov)
- For males, the rate increased 28% from 17.8 in 1999 to 22.8 in 2018. (cdc.gov)
- For females, the rate increased 55%, from 4.0 in 1999 to 6.2 in 2018. (cdc.gov)



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# More Statistics

- Suicide 10th leading cause of death overall in the United States
- Suicide was the 2nd leading cause of death among individuals between the ages of 10 and 34
- 4th leading cause of death among individuals between the ages of 35 and 54.
- There were more than two and a half times as many suicides (48,344) in the United States as there were homicides (18,830).

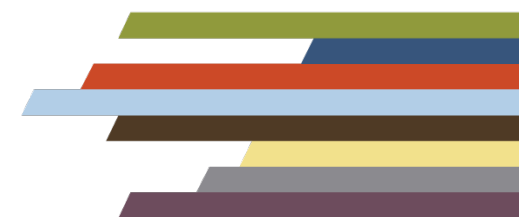
(nimh.nih.com)



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# Numbers Don't Lie

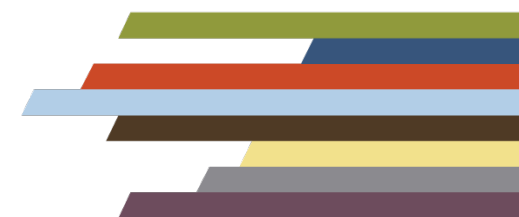
Ages 10-14	596
Ages 15-24	6211
Ages 25-34	8020
Ages 34-44	7521
Ages 45-54	8345



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# Suicide and COVID-19

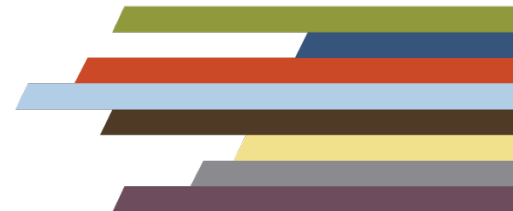
- 5% of US college and HS surveyed reported having made a suicide attempt during the pandemic
- More than 50% reported that they were worried about their mental health
- Since the outbreak 53% college and 62% HS reported experiencing stress
- 48% college and 51% HS say they suffered from anxiety. (investor.chegg.com)



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# Myths & Facts

## Myth

- It is dangerous to ask a depressed person about suicide
- People who want to die always find a way
- People kill themselves out of the blue.

## Fact

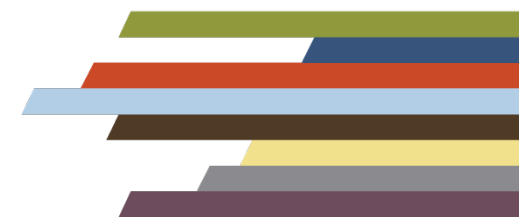
- False
- False
- False



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# Myths & Facts

## Myth

- Someone who has their act together isn't at risk for suicide.
- Most suicides happen around the winter holiday season.
- When someone recovers after hitting rock bottom, their risk of suicide declines.

## Fact

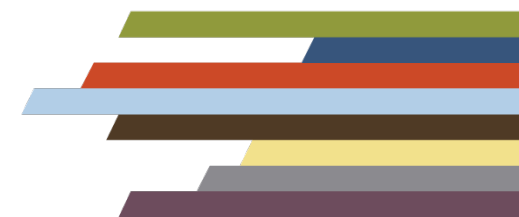
- False
- False
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# Myths & Facts

## Myth

- Giving someone a hotline # is enough.
- Once a person is suicidal they will always be.
- Suicide only affects individuals with a MH diagnosis.
- People who die by suicide are selfish and take the easy way out.

## Fact

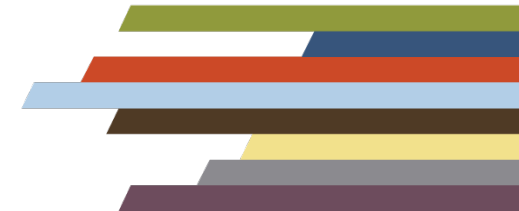
- False
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# Myths & Facts

## Myth

- Talking about suicide will lead to and encourage someone to kill
- No one can stop a suicide.
- Only experts can prevent a suicide
- Once a person decides to kill themselves there is nothing anyone can do to stop them.

## Fact

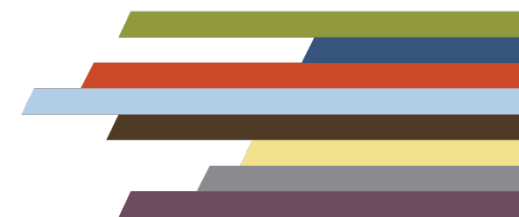
- False
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# Signs & Symptoms

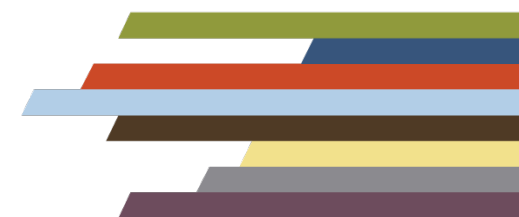
- Excessive sadness
- Mood changes
- Hopelessness
- Sleep problems
- Withdrawal/isolation
- Changes in personality
- Dangerous or harmful behavior
- Recent trauma or life crisis
- Changes in personality & appearance



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# Signs & Symptoms

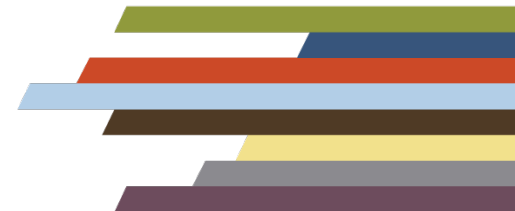
- Making preparations
- Changes in academics
- Threatening or talking about suicide
- Negative View of Self
- Irritability/Aggressiveness
- Feeling like a burden
- Self-harm or cutting
- Engaging risky behaviors
- Substance Abuse
- Family interactions



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# Signs & Symptoms

- Possession of weapons
- Stockpiling pills
- Give aways
- Truancy
- Running away
- Perfectionism
- Risk Taking

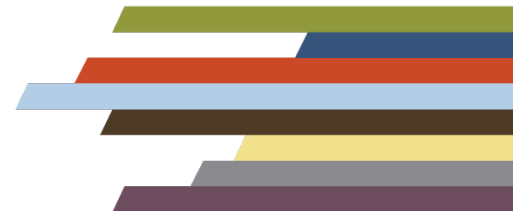


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# Virtual Signs

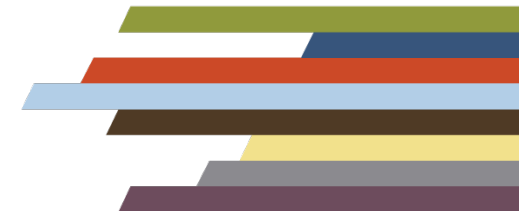
- Posting captions
- Hashtags
- Emojis
- Following Accounts
- Items Posted



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# Direct Verbal Cues

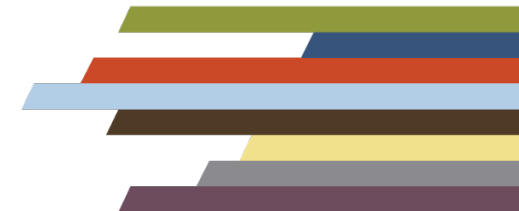
- “I wish I was dead”
- “I’m going to kill myself”
- “If I don’t (insert), I’m going to kill myself”
- “If I don’t get(insert), I’m going to kill myself”
- “I’m going to end it all”
- “I’m better off dead than alive”



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# In-Direct Verbal Cues

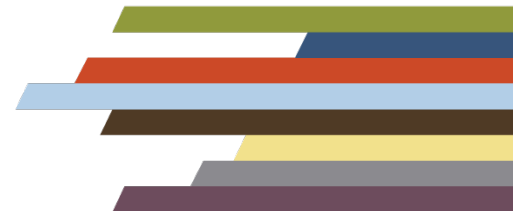
- "I can't take this anymore"
- "I wonder who would miss me if I was dead"
- "Life isn't worth living"
- "I just want it to end"
- "Everyone would be better off without me"
- "I can't do this anymore"
- "No one cares about me"



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# Risk Factors

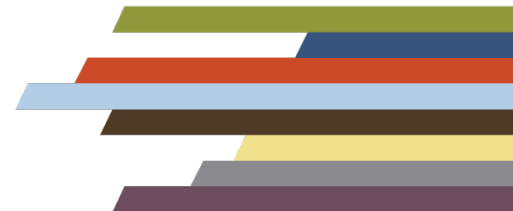
- Previous attempts
- Plan
- Death Wishes
- Depression
- Substance use
- Family suicide
- Recent Loss
- Sexual Orientation



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# Risk Factors

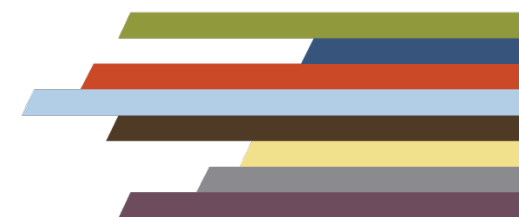
- Disappointment
- Rejection
- Legal troubles
- Financial problems
- Humiliation
- Assault
- Bullying



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# Risk Factors

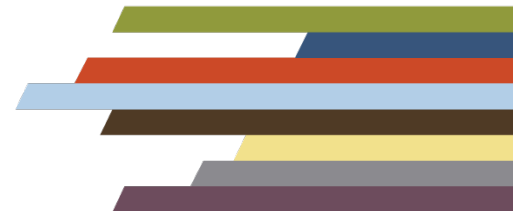
- Relationship loss
- Terminal illness
- Expulsion
- Family Problems
- Job loss
- Death



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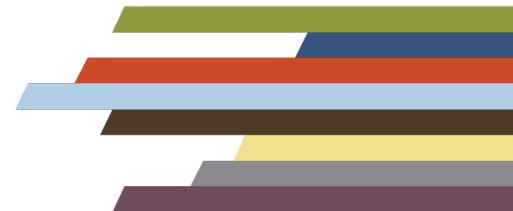
# The Teen Voice



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# {SUICIDE}

IS 100% PREVENTABLE

SPEAK UP  
REACH OUT

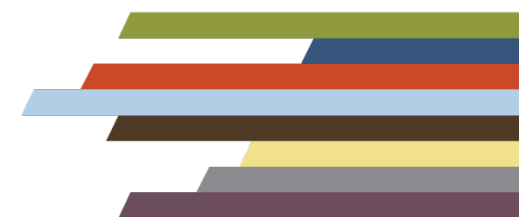


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# The Conversation

## Rules/recommendations

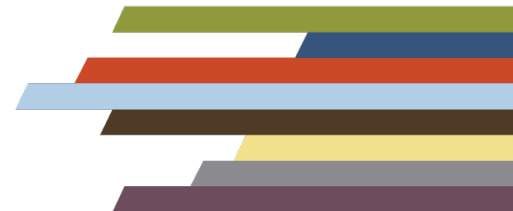
- Location
- Be persistent
- The ASK
- Listening
- Allowance
- No Fixing
- Have resources



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# The Conversation

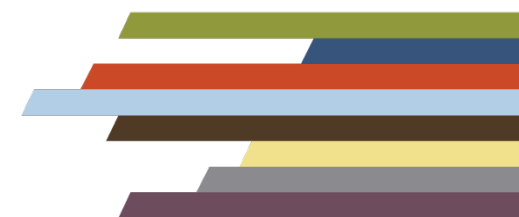
- “Seems like something’s up. Do you want to talk about what’s going on?”
- “I’ve noticed you’ve been down lately. What’s going on?”
- “Seems like you haven’t been yourself lately, what’s up?”
- “This is awkward but I’d like to know if you’re really all right?”



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# The Conversation

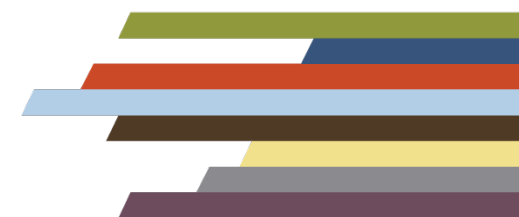
- “I’m worried about you and would like to know what’s up so I can help”
- “Is there anything you want to talk about?”
- “I know you are going thru some stuff, I’m here for you.”



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# Asking the Question

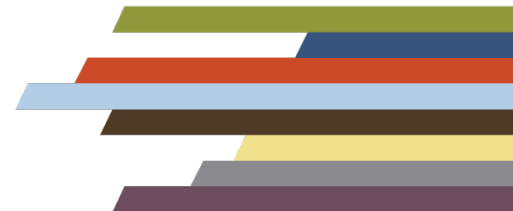
- Sometimes when people are so upset they think about killing themselves. I'm wondering if you are feeling that way too?
- Are you thinking about killing yourself?
- Do you wish that you were dead?
- Are you thinking about ending your life?
- Do you wish you would go to sleep and never wake up?



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# Recommendations

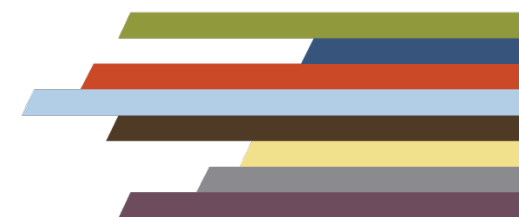
- Avoid sarcasm
- Avoid telling them how they feel
- Avoid saying you know how they feel
- Reserve all judgments
- Stay off your phone
- Pay REAL attention
- REALLY listen



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# Recommendations

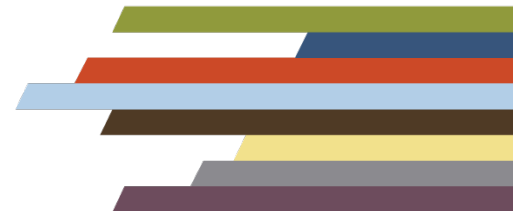
- Avoid joking
- Offer hope
- Resource use



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# Rule of Thumb

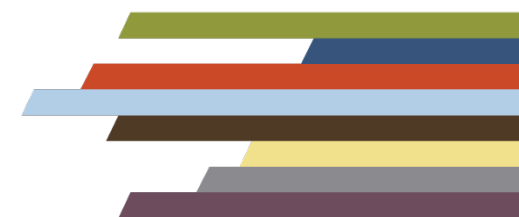
- Don't leave the person alone
- Suggest they speak with someone
- Offer to go with them
- Determine a trusted adult
- Choosing life
- Get help!!
- Follow up
- Get trained



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**NATIONAL**

**SUICIDE  
PREVENTION**

**LIFELINE™**

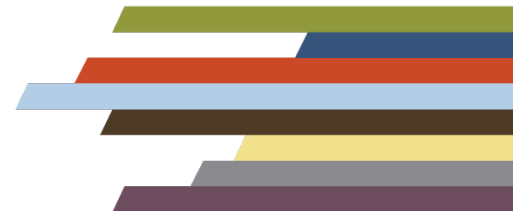
**I-800-273-TALK**  
**[www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org)**



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# LGBTQ+ The Trevor Project

**YOU**

You are never alone. You are not responsible for anyone who chooses to take their own life. As friends, family and loved ones, all you can do is listen, support and assist the person in getting the help they need.

**CONNECT**

the person to resources and to a supportive, trusted adult.

**ACCEPT**

and listen to the person's feelings and take them seriously.

**RESPOND**

if a person has a plan to attempt suicide and tell someone you trust.

**EMPOWER**

the person to get help and to call The Trevor Lifeline (866-488-7386).

**Because...**

suicide is the third leading cause of death among 15 to 24-year-olds.

**Because...**

LGB youth are up to 4 times more likely to attempt suicide than their straight peers

**Because...**

depression is treatable and suicide is preventable

**Because...**

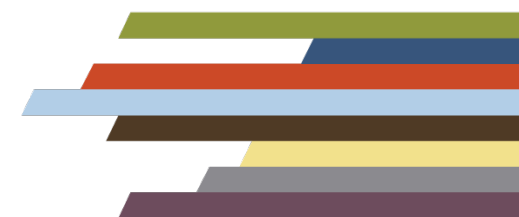
when You CARE, you can help save a life!



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# Resources

- Guild Wars 2 | Seize the Awkward | Ad Council

<https://www.youtube.com/watch?v=sDqwerhnQ0k&feature=youtu.be>

- [NAMI-https://www.nami.org/Blogs/NAMI-Blog/September-2018/5-Common-Myths-About-Suicide-Debunked](https://www.nami.org/Blogs/NAMI-Blog/September-2018/5-Common-Myths-About-Suicide-Debunked)

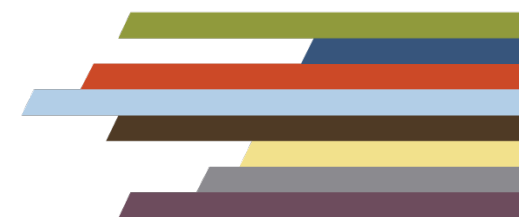
- <https://www.nimh.nih.gov/health/statistics/suicide.shtml>



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# Resources

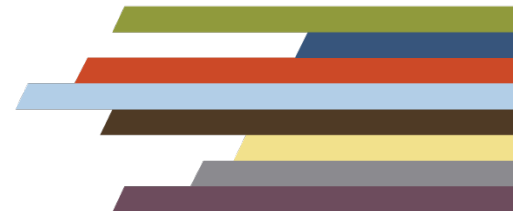
- QPR <https://qprinstitute.com>
- YMHFA  
<https://www.mentalhealthfirstaid.org/population-focused-modules/youth/>



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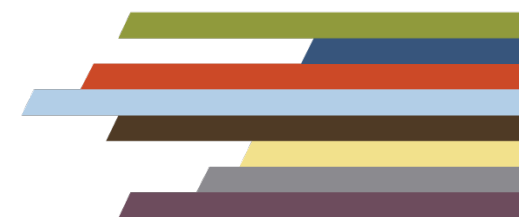
# Q and A



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# Evaluation Information

The MHTTC Network is funded through SAMHSA to provide this training. As part of receiving this funding we are required to submit data related to the quality of this event.

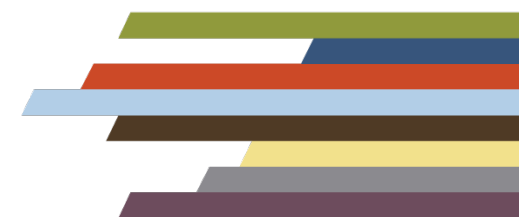
Please take a moment to complete a **brief** survey about today's training.



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# Connect With Us!

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