The background is a solid teal color with faint, light-colored circular patterns and a scale. The scale is a semi-circle with tick marks and numbers ranging from 150 to 260. The circular patterns consist of concentric circles, some with arrows indicating a clockwise direction.

ALABAMA SUICIDE TRAINING SCHOOL FACULTY AND STAFF

IN COMPLIANCE WITH THE JASON FLATT ACT
PREPARED BY THE ALABAMA SUICIDE
PREVENTION ADVISORY COMMITTEE

The background is a solid blue color with various white and light blue circular patterns, including dashed lines, solid lines, and arrows. A large circular scale is visible on the left side, with numbers ranging from 150 to 260. The text is centered and reads:

THIS TRAINING IS DESIGNED FOR

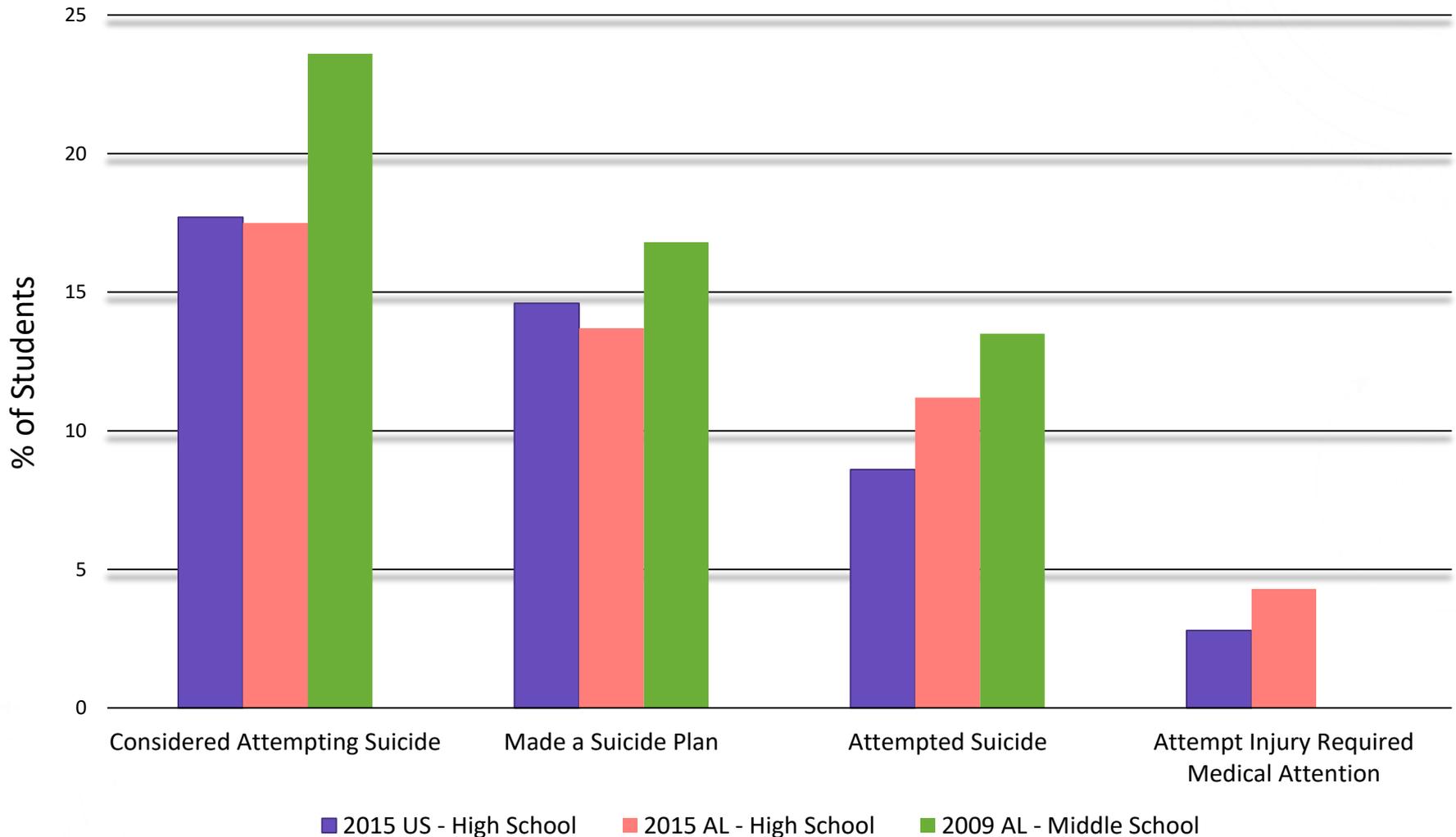
YOU

AS FIRST RESPONDERS AND MENTORS TO STUDENTS
AND TO PROVIDE RESOURCES FOR

YOU!

IS SUICIDE REALLY AN ISSUE?

Centers for Disease Control and Prevention



DID YOU KNOW?

Twice as many people in Alabama die by suicide annually than homicide.

In Alabama, suicide is the **2nd leading** cause of death for ages **10-14** & ages **15-24**.

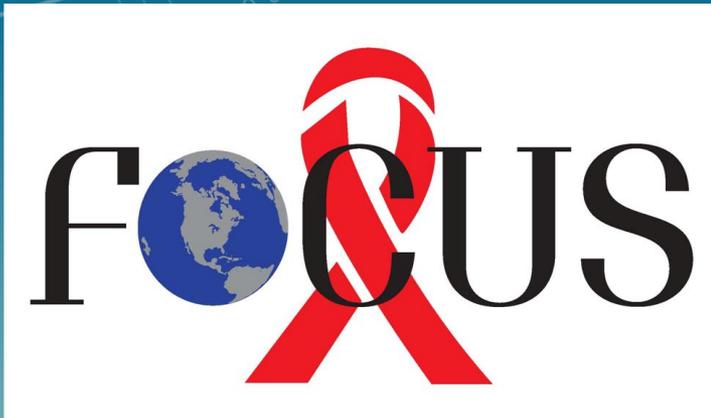
per cdc.gov

KEY TERMS & DEFINITIONS

- **Suicide** Death caused by self-directed injurious behavior with an intent to die as a result of the behavior.
- **Suicide attempt** A non-fatal, self-directed, potentially injurious behavior with an intent to die as a result of the behavior; may not result in injury.
- **Suicidal ideation** Thinking about, considering, or planning suicide.
- **Non-suicidal self-directed violence** Behavior that is self-directed and deliberately results in injury or the potential for injury to oneself.

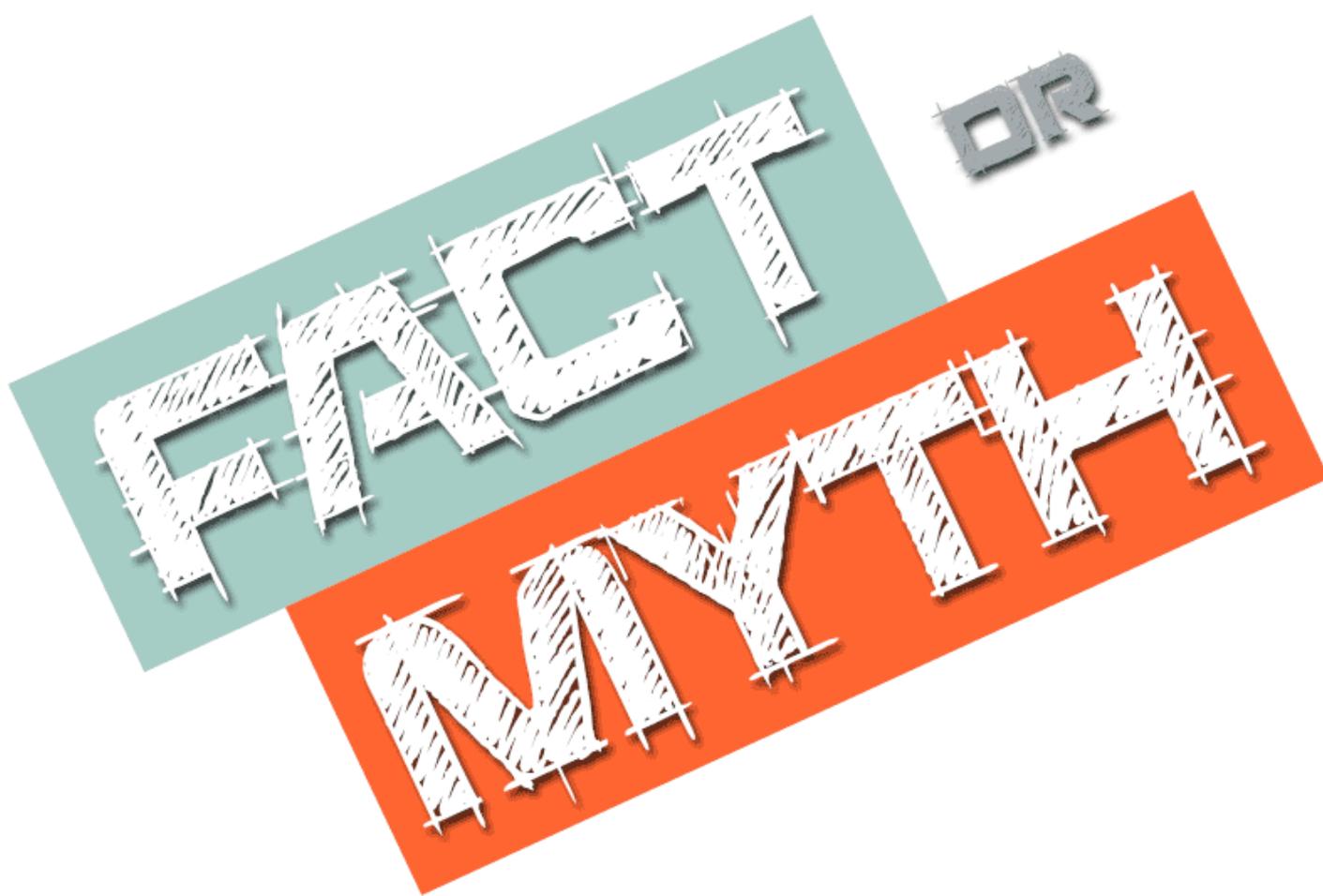
WHAT WOULD YOU DO IF YOU KNEW?

Video Production By:
The FOCUS Program & Hewitt-Trussville High School FOCUS Program

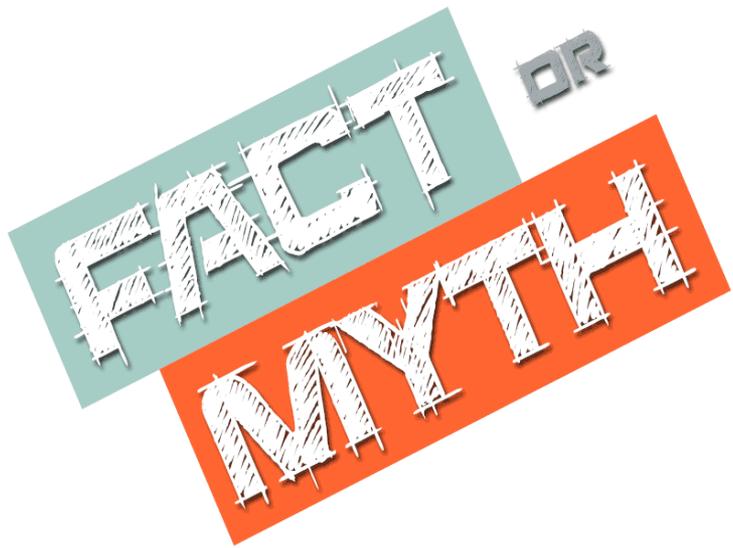


https://youtu.be/5yD_mqUe1bQ





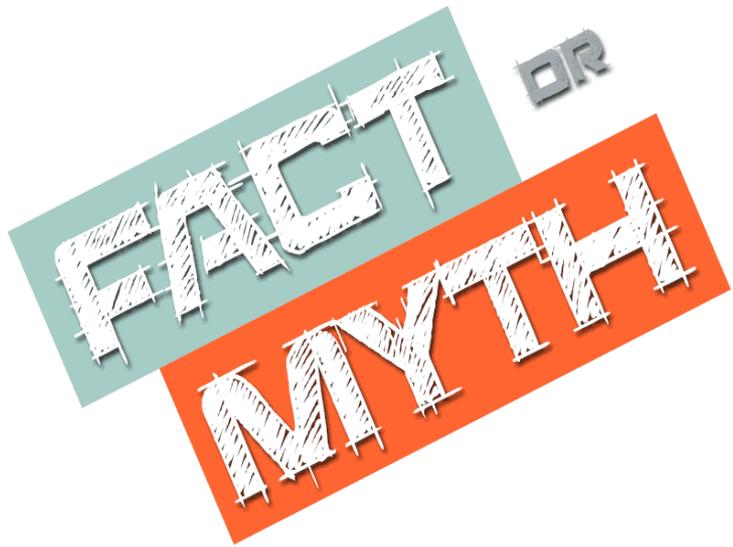
Test Your Knowledge
About Suicide



Asking someone if they are thinking of suicide will give them the idea.

MYTH

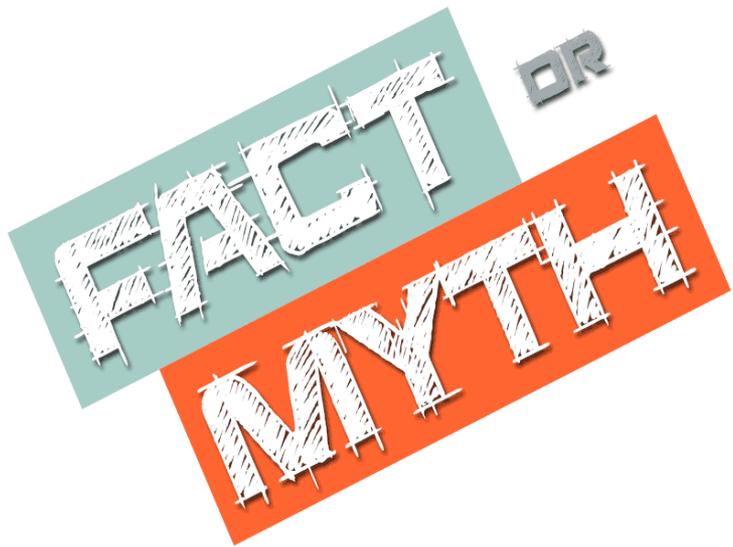
Directly asking someone if they are thinking about suicide gives them a sense of relief and support as it opens the door to allow them to discuss their thoughts.



A suicide attempt is
done to seek
attention.

MYTH

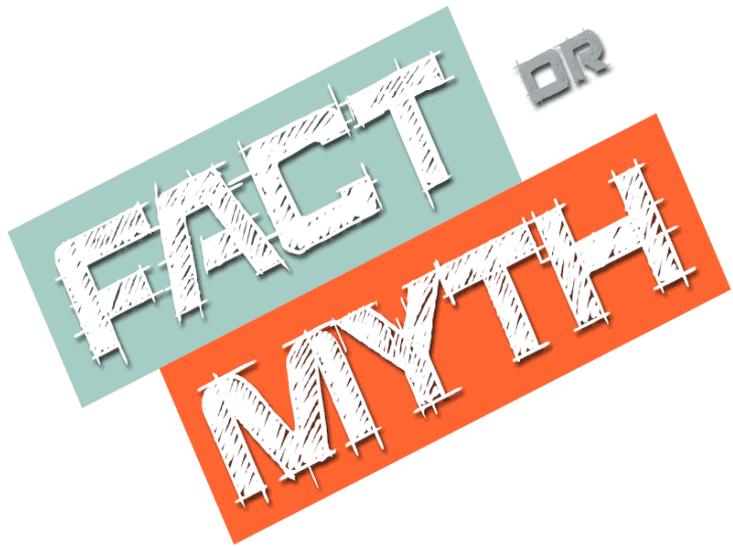
A suicide attempt is an individual trying to cope with an intense amount of pain who sees no other option.



There are warning signs of suicide ideation and attempts.

FACT

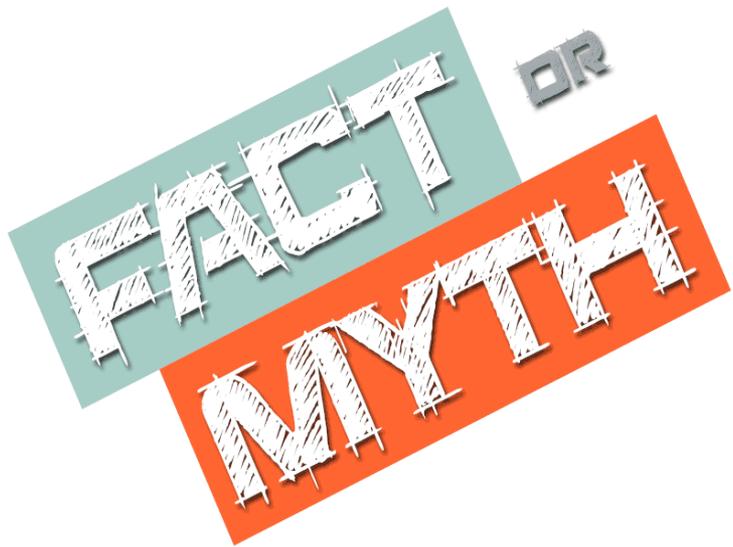
People do give warning signs such as mentioning suicide or making suicidal comments to others as well as making uncharacteristic behavioral changes.



Individuals who attempt suicide have no plans for the future.

MYTH

Many do have goals and plans for the future. Their desire is not to die but to alleviate pain that seems endless and incurable.

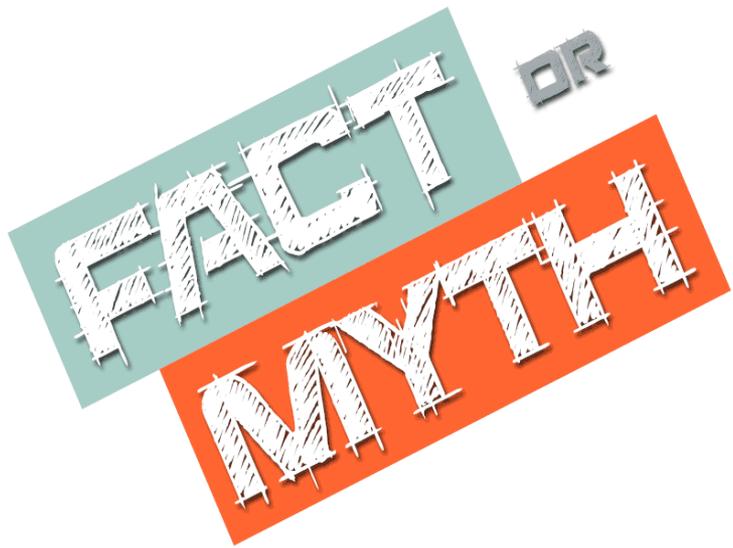


MYTH

People can appear sad or happy before attempting suicide.

Socio-economic status does not matter – people from all income levels die by suicide.

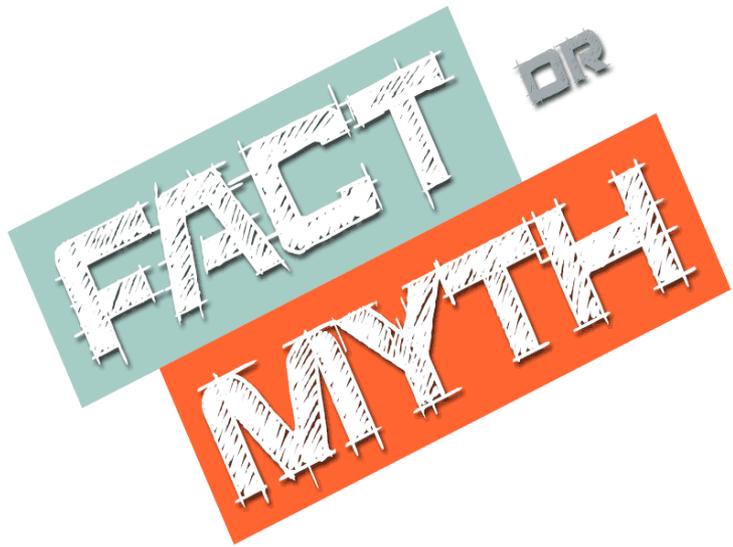
A suicidal person is easy to spot based on their appearance; they are usually from a low income household.



Only people with a mental illness will attempt suicide.

MYTH

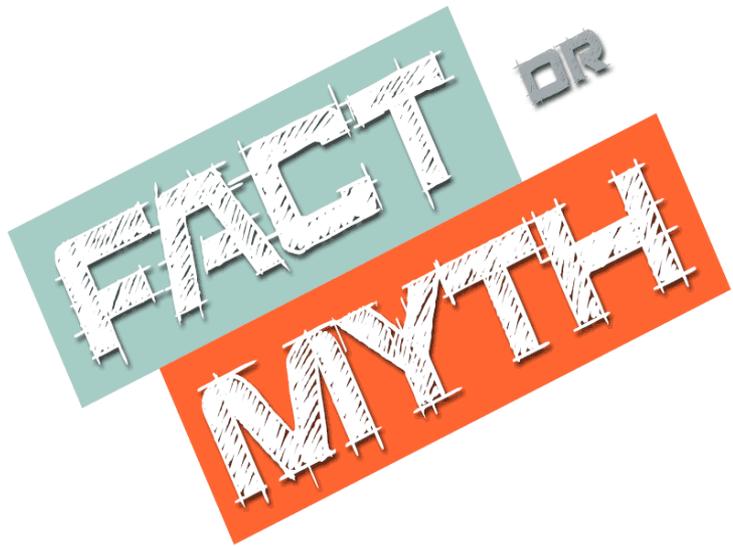
A mental illness does increase one's risk; however, many people have attempted and completed suicide who did not have a mental illness or diagnosis.



Suicide is a character defect; it's cowardly or selfish.

MYTH

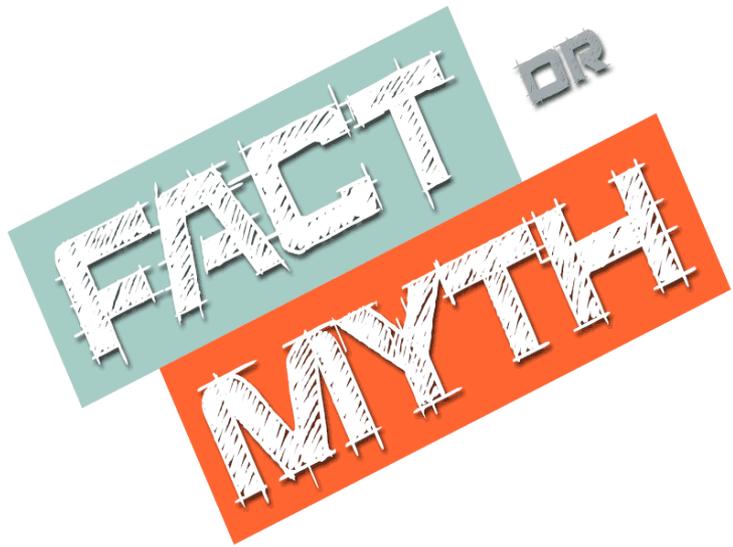
Having suicidal thoughts is not a character defect. Those experiencing suicidal thoughts may see suicide as the only “answer” to their pain.



FACT

You do not have to be a mental health professional to help someone who has suicidal thoughts. You need to listen and pay attention to the risk factors and warning signs.

Anyone can
intervene and help
support someone
who is suicidal.



FACT

Disregarding a comment or overlooking changes in behavior may reinforce the thoughts that “no one cares and help is not available.”

Failing to ask a student if he or she needs help when you have concerns puts him or her at greater risk.

WHAT'S THE DIFFERENCE?

Risk Factors

Characteristics or conditions associated with an increased risk of suicide.

Warning Signs

Signs displayed that signal a person is in imminent danger of attempting suicide. These signs require immediate action.

LEVELS OF ENGAGEMENT

Prevention

While the causes of suicide are complex, the goals of suicide prevention are simple:

- Reduce factors that heighten risk
- Strengthen factors that promote resilience or coping

Intervention

A direct effort to stop a person from attempting suicide.

Postvention

Activities that facilitate recovery after a suicide attempt or loss, and prevent adverse outcomes at home and at school.

TEST YOUR KNOWLEDGE: SUICIDE OVERVIEW

QUESTION 1 - TRUE or FALSE:

Suicide is the 3rd leading cause of death for youth ages 10-24?

FALSE - Suicide is the 2nd leading cause of death for youth ages 10-24

QUESTION 2 - TRUE or FALSE:

People who attempt suicide may or may not have a mental illness.

TRUE - A mental illness does increase one's risk; however, many people have attempted and completed suicide who did not have a mental illness or diagnosis.

QUESTION 3 - TRUE or FALSE:

Only counselors and principals can intervene and help a student who is suicidal.

FALSE - Anyone can intervene and help support someone who is suicidal. You need to listen and pay attention to the risk factors and warning signs.

SUICIDE PREVENTION: KNOW THE RISK FACTORS

- Academic Pressures
- Access to Lethal Means
- Loss or Suicide of a Loved One
- Previous Suicide Attempt
- Family Dysfunction
- Health Issues (physical and mental)
- Bullying (all forms) / Harassment
- Substance Use / Addiction
- Abuse (all types)
- Lack of Purpose or Self-worth
- No Sense of Belonging
- PTSD / Complex Trauma
- Relationships:
 - Social Challenges
 - Dating Issues
 - Social “Drama”

Higher Risk Populations

Native Americans | Caucasians | LGBTQ | Men | Military Families | Perfectionists

PREVENTION PROTECTIVE FACTORS

- Encourage and model help-seeking behaviors
- Promote life skills:
 Assertiveness, problem-solving, patience, healthy coping, etc.
- Be a mentor or “touchpoint” person by having a purposeful and meaningful relationship
- Become knowledgeable of and facilitate your school’s referral process

Every child must know that there is someone at their school who knows him or her, who has their ear, who communicates that the child matters!

- Dr. Tamala R. Maddox

TEST YOUR KNOWLEDGE:

SUICIDE PREVENTION

DISCUSSION 1:

TRUE or FALSE: Only one risk factor is ever known for each suicide attempter.

FALSE – There are typically multiple factors that are associated with an individual's suicide attempt.

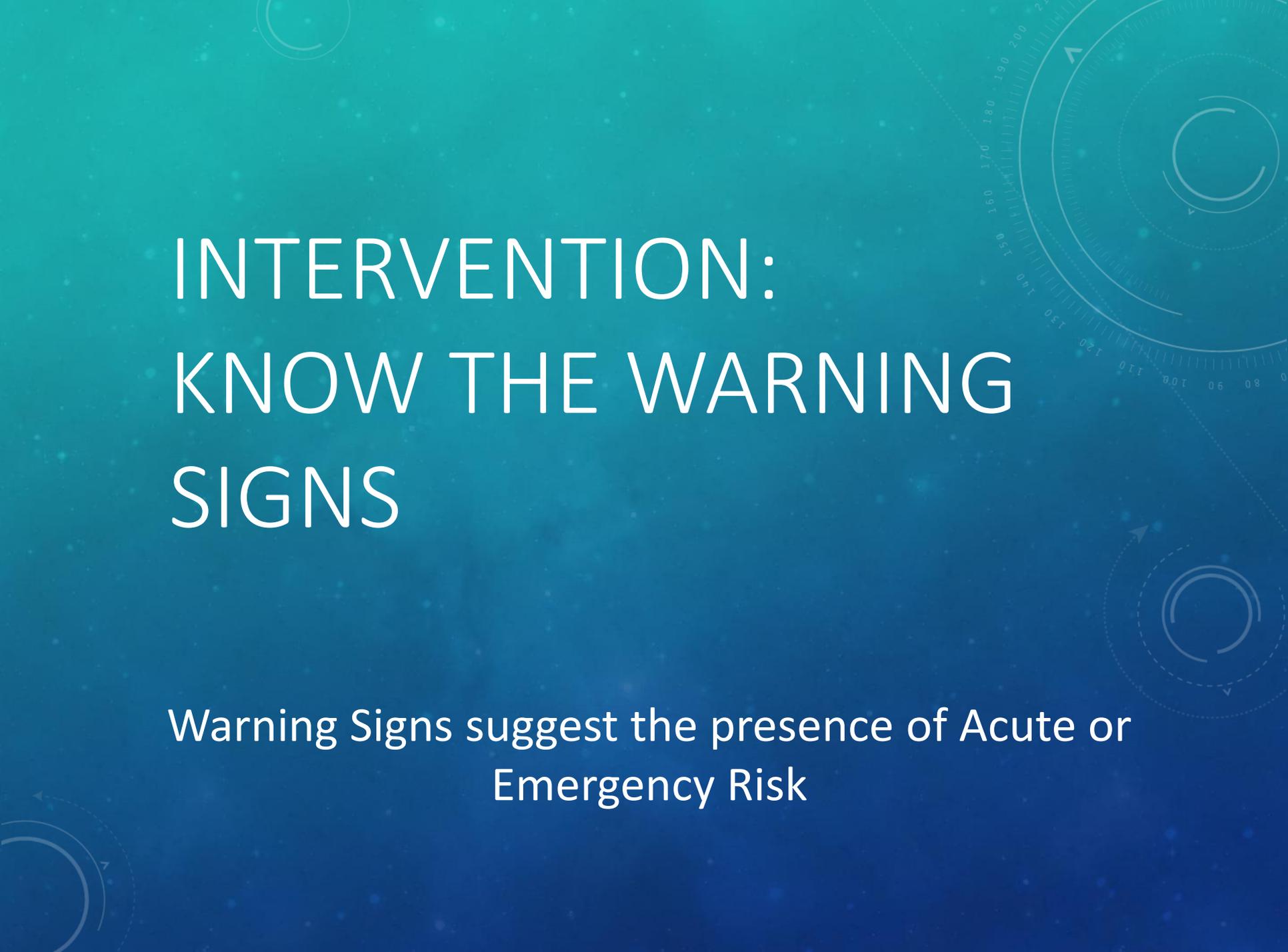
What are three of the potential youth risk factors?

DISCUSSION 2:

TRUE or FALSE: September is known as Suicide Prevention Month, and this is the only time in which suicide prevention activities should take place.

TRUE & FALSE – September is Suicide Prevention Month. However, Suicide Prevention should be an ongoing event in September and year round.

What ways can your school promote suicide awareness year round?

The background is a teal-to-blue gradient with technical graphics. On the right side, there are several circular gauges or dials with numerical scales (0, 80, 100, 110, 120, 130, 140, 150, 160, 170, 180, 190, 200, 210, 220) and arrows. There are also some faint circular patterns and lines scattered across the background.

INTERVENTION: KNOW THE WARNING SIGNS

Warning Signs suggest the presence of Acute or
Emergency Risk

SUICIDE WARNING SIGNS

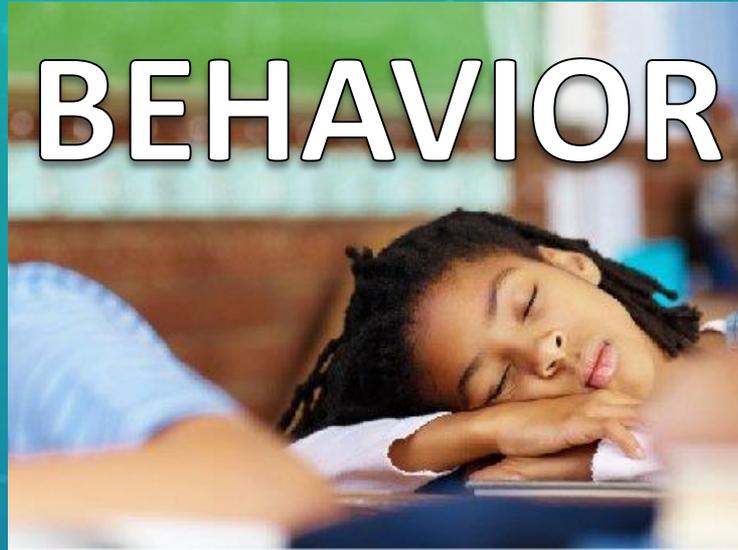
TALK



- Being a burden to others
- Feeling trapped or hopeless
- Experiencing unbearable pain
- Having no reason to live
- Feeling unnoticed
- A preoccupation with death; wanting to kill themselves
- Having a suicide plan

SUICIDE WARNING SIGNS

BEHAVIOR



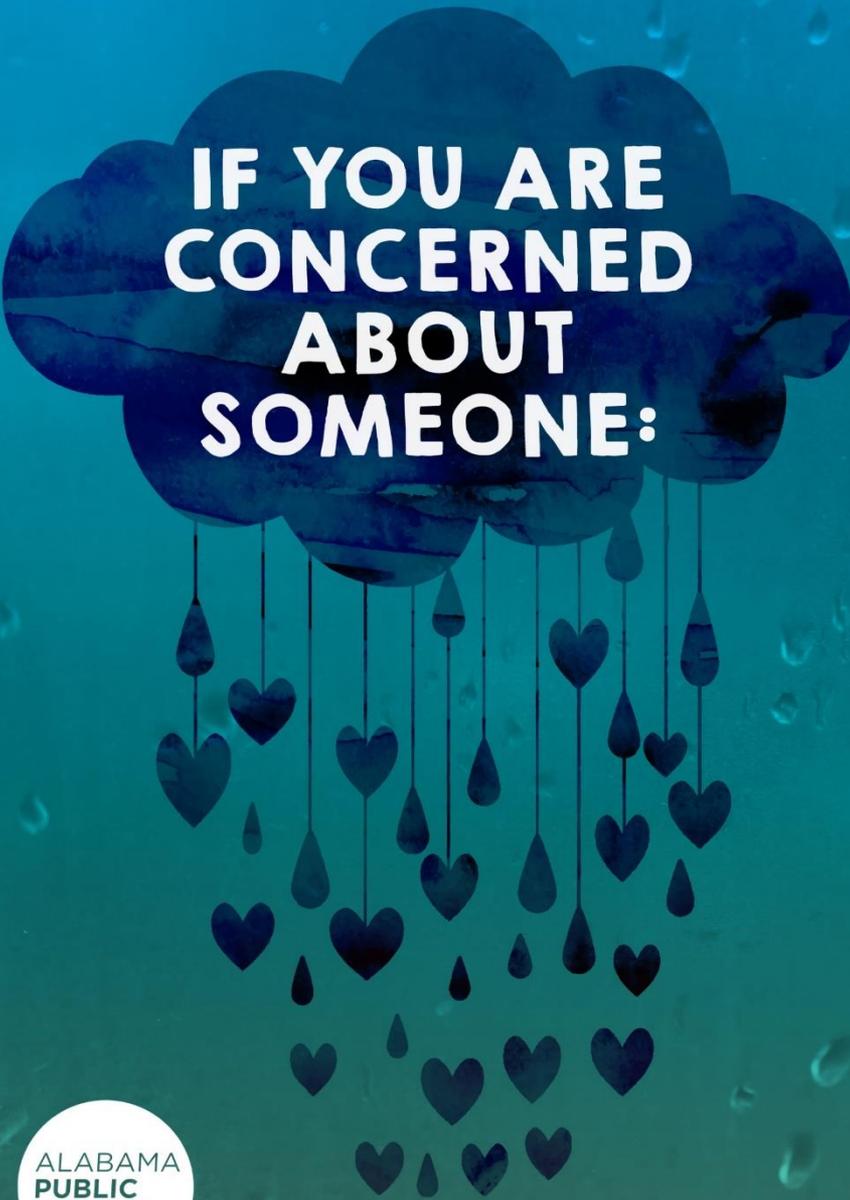
- Increasing substance use
- Taking unhealthy risks
- Withdrawing from family, friends, and activities
- Changing eating and sleeping behaviors
- Visiting or calling people to say goodbye
- Giving away prized possessions
- Displaying aggression

SUICIDE WARNING SIGNS

MOOD

- Depression
- Loss of interest
- Rage
- Irritability
- Humiliation
- Anxiety
- Feeling helpless or hopeless
- Mood swings





**IF YOU ARE
CONCERNED
ABOUT
SOMEONE:**

1.

**Show them that
you care**

“I’m really worried
about you”

2.

**Ask if they are thinking
about suicide**

“Have you been thinking
about suicide?”

3.

Get help

“Who do you trust to
talk with about this?”

4.

**Don’t promise to
keep it a secret**

SAMPLE ACTION PLAN



1. Faculty / Staff and Suicidal Student

Walk with the student to the School Counselor, School Nurse or Administrator

2. School Counselor, School Nurse or Administrator contact Parents or Guardian

Student remains with an adult at all times

School faculty provides resources to parents or guardian

3. Follow-up!

School faculty who identified student – touch base with student on a regular basis

School faculty who contacted parents or guardian – follow up with them

4. Faculty / Staff Self-Care

Talk to your support

Stress Management Activities

NATIONAL
SUICIDE
PREVENTION
LIFELINE
TM
1-800-273-TALK (8255)
suicidepreventionlifeline.org

TEST YOUR KNOWLEDGE:

SUICIDE INTERVENTION

DISCUSSION:

Scenario 1: A student has shared with you that one of their peers said in the restroom, “No one would notice if I were gone. I am just a burden to everyone.”

What do you do? What is your immediate first step?

Scenario 2: Walking through your classroom you see a student’s drawing on his desk. The drawing is of a gun and the words, “I’m Done.”

What do you do? What is your immediate first step?

What is your school’s referral process?

POSTVENTION

Suicide Attempt

- Watch for reappearing warning signs in the attempter
- Watch for other students who seem to be affected

Suicide or the sudden death of a student, a faculty or staff member, or a well-known person

- Know or develop the response / crisis team
- Focus on the loss, acknowledge it has happened
- Bring in experts to answer the hard questions and educate on facts

CONTINUOUS ENGAGEMENT



REMEMBER...

- If you see something, say something.
- Take every warning sign from a student seriously.
- Use your referral process; there's no such thing as over reporting.
- Create a nonjudgmental, supportive environment.
- Take every concern from a student about another student seriously.
- There is no cookie cutter response; every situation is unique.
- Remember to take care of yourself!

ADDITIONAL RESOURCES

- National Suicide Prevention Lifeline 1-800-273-TALK (8255)
- Dial 2-1-1 for local resources
- Alabama Department of Public Health – Suicide Prevention Page www.adph.org
- Alabama State Department of Education Prevention and Support Division
- Jennifer Claire Moore Foundation – Peer Helper Programs www.peerhelpers.org
- Jason Flatt Foundation – Suicide Training Modules, Information www.jasonfoundation.com
- Comprehensive Suicide Prevention Resource Directory www.asparc.org
- List of additional resources from school counselor including:
 - Phone apps for professionals and for students
 - Case Studies and Articles on Suicide
 - Nationally accredited or recognized agencies

I AM ME

Video Production By:
Peer Helper Program & Bay Minette Middle School



<https://youtu.be/iDPFh2Ld5KY>



One Positive Action

Can

Save A Life

Thank you for being suicide prevention advocates!

Alabama State Department Of Education
Suicide Prevention Advisory Committee

Ms. Allison Faircloth

Chairperson Suicide Prevention Advisory Committee
Executive Director
Jennifer Claire Moore Foundation

Mrs. Amy Bryan
Superintendent

Butler County Board of Education
School Superintendent Association

Dr. Tamala R. Maddox
Principal

R. F. Bumpus Middle School
Council for Leaders in Alabama Schools

Ms. Mary Hooks

Macon County Board of Education
Alabama Association of School Boards

Mrs. Sheila Remington

President
Alabama Education Association

Alabama State Department Of Education
Suicide Prevention Advisory Committee

Mrs. Carissa Anthony

Prevention & Development Coordinator
Safe and Healthy Homewood Coalition
Homewood City Schools

Dr. David W. Coombs

Professor
School of Public Health
University of Alabama Birmingham

Ms. Janet Shaw Gabel

Executive Director
Crisis Services of North Alabama

Dr. Judith Harrington

Asst. Professor, Graduate Counseling
University of Montevallo

Shannon Murphy MD FAAP

Pediatrician

Ms. Chalise Peltier

Call Center Manager
Lifelines Counseling Services

Alabama State Department Of Education
Suicide Prevention Advisory Committee

Alabama Department of Mental Health

Ms. Lauren Blanding
Office of Prevention

Alabama Department of Public Health

Mrs. Betsy Cagle
Injury Prevention Branch Director

Mrs. Renae Carpenter
Director, Social Work Division

Mrs. Elana Parker-Merriweather
Health Services Administrator

Alabama State Department of Education

Dr. Erica Butler
Education Specialist
Prevention and Support Services

Mr. Gregory DeJarnett
Education Administrator
Prevention and Support Services

Mrs. Wanda Langley
Education Specialist
Counseling and Guidance

Dr. Marilyn Lewis
Program Coordinator
Prevention and Support Services