Behavior out of the Classroom

There is a heightened risk if there has been:

- A recent loss in close relationships. Losses of significant others are misfortunes that adults learn to handle. For developing adolescents, these events can be devastating and can overtax their current coping skills. Examples are death or divorce of parents, losing a close friend, breaking up with a steady, being cut from an athletic team.
- Heavy use of alcohol or drugs. Students who are substance abusers tend to be at higher risk for suicide. Heavy drug and alcohol users are likely to be depressed youngsters who are seeking relief. Eventually these substances stop working and, in fact, contribute to a greater depression. These substances also contribute to compulsive behavior which often leads to accidents and suicide.
- A recent suicide in the family or of a friend. A recent suicide in the family significantly increases the suicide risk of survivors for the following reasons: a) a pervading sense that they, too, are doomed to commit suicide; b) an unbearable grief, depression and/or guilt over the loss of a loved one; c) a fear of mental illness; and d) a realization that suicide presents an optional way out of an unwelcome and painfully unhappy life.

This material was adapted from the Yellow Ribbon Suicide Prevention Program.

National Suicide Hotline: 1-800-273-TALK (8255) Helpline: 570-829-1341

How You Can Help a Suicidal Teenager

- 1. Listen, don't lecture.
- 2. Do not leave the youth alone.
- 3. Accept what is said and take it seriously.
- 4. Ask directly if the youth is thinking of suicide.
- 5. Determine if the youth has a plan.
- 6. Try to focus on the problem.
- 7. Help increase the perception of alternatives.
- 8. Help the youth recall how they used to cope.
- 9. Evaluate the resources available and help identify the resources needed to improve things.
- 10. Do not be misled by comments that he/she is past the emotional crisis.
- 11. Act respectfully.
- 12. Do not avoid asking for assistance and consultation.

The idea of young people wanting to kill themselves is difficult for adults to grasp. The first reaction is often shock or denial. Trust your feelings when you think someone may be suicidal.



Teen Suicide: Recognizing the Signs

A behavioral health organization providing 150 years of hope, help, and healing to children, adolescents and families.

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Identifying Risks

- Abrupt changes in personality
- Giving away possessions
- Previous suicide attempts
- Breaking up with a boyfriend/girlfriend
- Inability to tolerate frustration
- Use of drugs and/or alcohol
- Change in eating patterns; significant weight changes
- Unwillingness or inability to communicate
- Sexual promiscuity
- Extreme or extended boredom
- Inability to concentrate
- Accident prone (carelessness), hostile or reckless behavior
- Unusually long grief reaction
- Unusual sadness, discouragement and loneliness
- Neglect of personal appearance, lack of self esteem
- Major loss (of loved one, home, through divorce, trauma, relationship)
- Running away from home or truancy from school, rebelliousness
- Withdrawal (from people, especially close friends, family or favorite activities)
- Perfectionism
- Restlessness, anxiety, stress
- Problems with school or the law
- Unexpected pregnancy
- A stressful family life
- Family history of suicide

Behavior In the Classroom

- Abrupt changes in attendance Remain alert to excessive absenteeism in a student with a good attendance record, particularly when the change is sudden.
- Dwindling academic performance
 Question any unexpected and sudden decreases in school performance. Inability to
 concentrate is frequently found in depressed adolescents, leading to poor school performance.
- Sudden failure to complete assignments. This may be due to a variety of factors, however, it is often seen in suicidal and depressed young people.
- Lack of interest in activities and surroundings. It is difficult to maintain surveillance over so many adolescents, but one of the first signs of a potentially suicidal adolescent is general withdrawal, disengagement and apathy.
- Changed relationships with friends and classmates. Additional evidence of personal despair may be abrupt changes in friendships and social relationships.
- Increased irritability, moodiness or aggressiveness. Depressed, stressed and potentially suicidal individuals demonstrate wide mood swings and unexpected displays of emotion.
- Withdrawal and displays of sadness. Some students who are seen as non-participatory but do not cause problems in the classroom, are often overlooked.
- Death and suicidal themes evident in reading selections and written essays.

 These should be viewed as warning signs for teachers, particularly if it occurs on more than one occasion.

Behavior Out of the Classroom

- Neglect/apathy about personal hygiene and appearance.
- Unusual changes in eating or sleeping patterns. There may be a noticeable decrease or increase in appetite with significant weight change, insomnia or a desire to sleep all the time.
- Overt sadness and depression. The young person may often appear sad and depressed and show signs of tension and extreme anxiety.
- Acting out behavior. Behavior may include substance abuse, refusal to go to school, sexual promiscuity, running away, fighting, recklessness, purposely hurting one's body, delinquency, preoccupation with revenge.
- Marked emotional instability. Distraught students are likely to have wide and unpredictable mood swings. Particular attention should be given to a sudden change in mood from depression to cheerfulness, as if the answer to the problem is now clear.
- Remarks indicating profound unhappiness or despair. Statements might include references to feeling constantly hassled, under stress or unable to concentrate or rest properly.
- Loss of interest in extracurricular activities.
- Giving away prized possessions. Students who do not care about the future or have decided that they will not be around are likely to give away possessions they value.
- Direct suicide threats or attempts. All suicide threats and attempts should be taken seriously. At added risk are students who have threatened or attempted suicide before. In this case, the usual inhibitions against hurting themselves have been removed.