

## **Community Participation Packet**

Suicide is preventable, and we all have a role to play in its prevention.

To prevent suicide, we need to know more about it. We need to know how big the problem is in our communities, what the warning signs are, and what to do if we see these signs in someone we know.

September 10, 2013 is World Suicide Awareness Day. Two national organizations – the Substance Abuse and Mental Health Services Administration (SAMHSA) and the National Action Alliance for Suicide Prevention – are calling on people across the country to join in community-based activities to prevent suicide

This packet contains materials you can use in your community to raise awareness about suicide.

If you have questions, please contact Youth Suicide Prevention Program, (206) 297-5922, www.yspp.org, or email at info@yspp.org.



## TOP 10 THINGS YOU CAN DO TO INCREASE AWARENESS ABOUT SUICIDE

- 10(Easiest) Go to Suicide Prevention Resource Center, www.sprc.org/basics, and read about suicide in the United States AND listen to testimony from suicide survivors at the American Foundation for Suicide Prevention website, www.afsp.org/survivorday/watchpreviousprograms/english.
- **9** Do an internet search to find out what other community coalitions are doing about suicide prevention and think about how those approaches might work in your community AND THEN read the story of Garrett Lee Smith at <a href="https://www.jaredstory.com/garrett\_smith.html">www.jaredstory.com/garrett\_smith.html</a>.
- **8** Go to http://www.askhys.net/FactSheets and read the depression and suicide fact sheets for 8th, 10<sup>th</sup>, and 12th graders in your county AND call your county's health department and ask how many suicides there have been so far in 2013.
- **7** Find out if your local school district has an emergency response plan in place that includes a protocol for dealing with a suicide AND find out how this information is shared with school staff.
- 6 Talk with emergency responders police officers firefighters, ambulance drivers and paramedics about what they do when they are responding to a suicide AND talk with staff at your nearest hospital emergency department about what they do in response to a suicide.
- 5 Have a conversation with a co-worker or friend about suicide in your community.
- **4** Reschedule your September coalition meeting to September 10 and dedicate the agenda to talking about suicide in your county, tribe or community. Have volunteers report on their experiences with the previous six items.
- 3 Customize the Suicide Prevention Week proclamation or tribal resolution for your community and present it to your city or tribal council and ask them to declare September 8-14, 2013 as Suicide Prevention Awareness Week in your community or tribe.
- **2** Organize an event like an "Out of the Darkness" walk to build awareness about suicide, or participate in another organization's suicide prevention awareness event.
- *I* Go to www.sprc.org/basics/about-suicide and review the risk factors for suicide. If you can identify these behaviors in your friends, family or yourself...
- ...please call the National Suicide Prevention Hotline, (800) 273-TALK (8255).



# **About Suicide Prevention** (From Suicide Prevention Resource Center)

Suicide is a huge but largely preventable problem. Interventions to promote emotional health and prevent mental health problems should be chosen in the context of a strategic thinking and planning process. Taking the time to define the problem that needs to be addressed and clearly define goals will help to maximize success. Whenever possible, communities should base their interventions on evidence-based research and best practices. The model below provides guidelines for planning successful interventions using a public health approach

## Taking action

Things you can do to help prevent suicides:

- Learn the warning signs of suicide and how to respond.
   Warning signs include changes in a person's mood and sleeping pattern.
- Get involved in state and community efforts.

Visit the SPRC State and Communities page to learn more about suicide prevention activities already underway in your state. Connect with the contacts listed on those pages to learn how you can get involved.

• Make changes within your profession or organization.

Visit the SPRC customized information pages to learn more about effective suicide prevention in your work setting or professional role.

## What role will you play in suicide prevention? (Visit the links for more information)

## CO-WORKERS HAVE A ROLE...

This site provides information to help employees recognize and respond to their coworkers who may be suicidal or at high risk. It also contains a list of relevant resource materials and organizations.

## **EMERGENCY RESPONDERS HAVE A ROLE...**

Find information to help EMS providers recognize and respond to people who may be suicidal or at high risk. It also contains a list of relevant resource materials and organizations.



## THE FAITH COMMUNITY HAS A ROLE...

Information is available here to help faith community leaders recognize and respond to people who may be suicidal or at high risk. It also contains a list of relevant resource materials and organizations.

## **FOSTER PARENTS HAVE A ROLE...**

This information is designed to help foster parents on how to recognize and respond to warning signs for suicide, access help, and build resiliency in youth in foster care.

## **JAIL STAFF HAVE A ROLE...**

This site has information for corrections professionals on recognizing and responding to warning signs, resource materials about suicide prevention, including programs and the role of corrections professionals in preventing suicides.

## LAW ENFORCEMENT HAS A ROLE...

Find information to help law enforcement officers recognize and respond to people who may be suicidal or at high risk. It also contains a list of relevant resource materials and organizations. Extensive input and review from law enforcement officers at the national and local levels were obtained in developing the sheet.

## **MENTAL HEALTH PROVIDERS HAVE A ROLE...**

Information is available here about recognizing and responding to warning signs, resource materials about suicide prevention, including programs, as well as other suicide prevention information relevant to school health providers.

## SUICIDE SURVIVORS HAVE A ROLE...

This information is designed to help those who have experienced the loss of a loved one to suicide. Includes information on self-care, helping children cope, and survivor support groups.

## **TEACHERS HAVE A ROLE...**

This site provides information created for high school teachers, that contains information on recognizing and responding to warning signs, resource materials about suicide prevention, including programs, as well as other suicide prevention information relevant to teachers.

## **TEENS HAVE A ROLE...**

Find information to help teens recognize warning signs for suicide and how to help themselves as well as their peers.



## Other key ingredients

A strategic prevention planning process cannot ensure success on its own. A number of other key ingredients are essential for successful suicide prevention initiatives:

- Leaders who help a group articulate its vision and mission, guide data-driven decision-making, clarify roles and responsibilities, and ensure that diverse views are heard and considered
- Collaborative partnerships among key stakeholders who form a planning team or coalition of public and private agencies, organizations, and individuals, each bringing unique perspectives and resources
- Capacity and infrastructure to implement and sustain the plan
- Marketing and communication strategies targeting key stakeholders to gain support for the program's goals and outcomes and shape community values and norms
- **Public policy advancements** through the work of legislators and others that support the priorities of the plan
- Resources, including funding, human resources, and other elements of community capacity

# Connect with national suicide prevention organizations

Learn more about national organizations involved in suicide prevention.

## Read the resources in the SPRC Online Library

The SPRC Online Library contains a section called Suicide Prevention 101, which is a great place to start if you are new to suicide prevention.



## **Know the Warning Signs**

(From Youth Suicide Prevention Program, www.yspp.com/about\_suicide/what\_to\_do.htm#ShowYouCare)

Most suicidal young people don't really want to die; they just want their pain to end. About 80% of the time, people who kill themselves have given definite signals or talked about suicide. The key to prevention is to know these signs and what to do to help.

Watch for these signs. They may indicate someone is thinking about suicide. The more signs you see, the greater the risk.

- A previous suicide attempt
- Current talk of suicide or making a plan
- Strong wish to die or a preoccupation with death
- Giving away prized possessions
- Signs of depression, such as moodiness, hopelessness, withdrawal
- Increased alcohol and/or other drug use
- Hinting at not being around in the future or saying good-bye

These warning signs are especially noteworthy in light of:

- a recent death or suicide of a friend or family member
- a recent break-up with a boyfriend or girlfriend, or conflict with parents
- news reports of other suicides by young people in the same school or community

Other key risk factors include:

- Readily accessible firearms
- Impulsiveness and taking unnecessary risks
- Lack of connection to family and friends (no one to talk to)



# EVERYONE PLAYS A ROLE IN SUICIDE PREVENTION: TURNING STRATEGY INTO ACTION

## What to do if you see the warning signs?

If a friend mentions suicide, take it seriously. If he or she has expressed an immediate plan, or has access to a gun or other potentially deadly means, **do not leave him or her alone. Get help immediately.** 

## These steps can be effective:

## Show You care

Often, suicidal thinking comes from a wish to end deep psychological pain. Death seems like the only way out. But it isn't. Let the person know you really care. Talk about your feelings and ask about his or hers. Listen carefully to what they have to say.

"I'm worried about you, about how you feel."
"You mean a lot to me. I want to help."
"I'm here, if you need someone to talk to."

## Ask the Question

Don't hesitate to raise the subject. Talking with young people about suicide won't put the idea in their heads. Chances are, if you've observed any of the warning signs, they're already thinking about it. Be direct in a caring, non-confrontational way. Get the conversation started.

"Are you thinking about suicide?" "Do you really want to die?" "Do you want your problems to go away?"

## Get Help

Never keep talk of suicide a secret, even if they ask you to. It's better to risk a friendship than a life. Do not try to handle the situation on your own. You can be the most help by referring your friend to someone with professional skills to provide the help that he or she needs, while you continue to offer support.

"I know where we can get some help."
"Let's talk to someone who can help...let's call the crisis line now."
"I can go with you to get some help."



## **Resources for Help**

- School counselor, teacher or coach
- Crisis telephone helplines [1-800-273-TALK or LGBTQ Focus 1-866-4-U-Trevor]
- Private therapist, or counselor
- Mental health agency
- Hospital emergency room
- Clergy or religious leader



## **Crisis Lines in Washington State**

## National Suicide Prevention Hotline 1-800-273-8255, TTY Users 1-800-799-4TTY (4889)

| County                 | Crisis Service Provider   | r Phone Number(s)  |  |
|------------------------|---|--|--|
| Adams County           | Spokane County Regional Support Network                         | 509-488-4611,  |  |
|                        |   | 866-268-5105   |  |
| Asotin County          | Greater Columbia Behavioral Health Regional Support Network     | 888-475-5665   |  |
| Benton County          | Greater Columbia Behavioral Health Regional Support Network     | 800-783-0544   |  |
| Chelan County          | Chelan Douglas Regional Support Network                         | 800-852-2923   |  |
| Clallam County         | Peninsula Regional Support Network                              | East County 360-452-<br>4500 or 877-410-4803<br>West County 360-374-<br>6177 or 877-410-4803 |  |
| Clark County           | Southwest Washington Behavioral Health Regional Support Network | 800-626-8137   |  |
| Columbia County        | Greater Columbia Behavioral Health Regional Support Network     | 866-382-1164   |  |
| Cowlitz County         | Southwest Washington Behavioral Health Regional Support Network | 800-803-8833   |  |
| Douglas County         | Chelan Douglas Regional Support Network                         | 800-852-2923   |  |
| Ferry County           | Spokane County Regional Support Network                         | 866-268-5105   |  |
| Franklin County        | Greater Columbia Behavioral Health Regional Support Network     | 800-783-0544   |  |
| Garfield County        | Greater Columbia Behavioral Health Regional Support Network     | 888-475-5665   |  |
| Grant County           | Spokane County Regional Support Network                         | 509-765-1717,<br>877-467-4303  |  |
| Grays Harbor<br>County | Grays Harbor Regional Support Network                           | 800-685-6556   |  |
| Island County          | North Sound Regional Support Network                            | 800-584-3578   |  |
| Jefferson County       | Peninsula Regional Support Network                              | East County 360-385-<br>0321 or 877-410-4803<br>West County 360-374-<br>6177 or 877-410-4803 |  |

# EVERYONE PLAYS A ROLE IN SUICIDE PREVENTION: TURNING STRATEGY INTO ACTION

| County Crisis Service Provider |   | Phone Number(s) |  |
|--------------------------------|---|-----------------|--|
| King County                    | King County Regional Support Network                            | 866-427-4747    |  |
| Kitsap County                  | Peninsula Regional Support Network                              | 360-479-3033,   |  |
|                                |   | 800-843-4793    |  |
| Kittitas County                | Greater Columbia Behavioral Health Regional                     | 509-925-9861,   |  |
|                                | Support Network   | 800-572-8122,   |  |
| Klickitat County               | Greater Columbia Behavioral Health Regional                     | 509-773-5801,   |  |
|                                | Support Network   | 800-572-8122    |  |
| Lewis County                   | Timberlands Regional Support Network                            | 800-559-6696    |  |
| Lincoln County                 | Spokane County Regional Support Network                         | 888-380-6823    |  |
| Mason County                   | Thurston Mason Regional Support Network                         | 360-754-1338,   |  |
|                                |   | 800-270-0041    |  |
| Okanogan County                | Spokane County Regional Support Network                         | 509-826-6191,   |  |
|                                |   | 866-826-6191    |  |
| Pacific County                 | Timberlands Regional Support Network                            | 800-884-2298    |  |
| Pend Oreille County            | Spokane County Regional Support Network                         | 866-847-8540    |  |
| Pierce County -<br>OptumHealth |   |                 |  |
| San Juan County                | North Sound Regional Support Network                            | 800-584-3578    |  |
| Skagit County                  | North Sound Regional Support Network                            | 800-584-3578    |  |
| Skamania County                | Southwest Washington Behavioral Health Regional Support Network | 509-427-3850    |  |
| Snohomish County               | North Sound Regional Support Network                            | 800-584-3578    |  |
| Spokane County                 | Spokane County Regional Support Network                         | 509-838-4428,   |  |
|                                |   | 877-678-4428    |  |
| Stevens County                 | Spokane County Regional Support Network                         | 888-380-6823    |  |
| Thurston County                | Thurston Mason Regional Support Network                         | 360-754-1338,   |  |
|                                |   | 800-270-0041    |  |
| Wahkiakum County               | Timberlands Regional Support Network                            | 800-635-5989    |  |
| Walla Walla County             | Greater Columbia Behavioral Health Regional Support Network     | 509-524-2999    |  |
| Whatcom County                 | North Sound Regional Support Network                            | 800-584-3578    |  |
| Whitman County                 | Greater Columbia Behavioral Health Regional Support Network     | 866-871-6385    |  |
| Yakima County                  | Greater Columbia Behavioral Health Regional                     | 509-575-4200,   |  |
|                                | Support Network   | 800-572-8122    |  |



## **Media Release Template**

Guidelines for localizing this model media release:

- Interview emergency responders and mental health crisis service providers to find out about your local situation.
- Use your local information, as appropriate, in this media release. Talk to someone
  in the news department before you send the release. Ask them to contact you if
  they need more information.
- Let the newsroom know if you are providing the media release on behalf of a local coalition.
- And always remember that establishing effective working relationships with media is a key to getting them to use the information you provide. So, it is almost always better to make an appointment with someone in the news department and personally hand them the release.

## National effort to draw attention to suicide prevention

| This year we may see a high number of deaths due to suicide in County, said, director of So far this year, people have taken their  |
|---|
| ives. The total for last year was   |
| About 100 Americans die by suicide each day, more than double the average number of nomicides. Eight million adults in the United States had serious thoughts of suicide within the past 12 months.   |
| Fortunately, suicide is preventable. There is strong evidence that a comprehensive bublic health approach is effective in reducing suicide rates.   |
| Our community needs to be aware of this problem, what each of us can do to help, and now to connect with crisis counselors and others who can help," said, director of  |
| Groups in County are participating in a national campaign called 'Everyone Has a Role in Suicide Prevention" to focus more attention on what people can do to prevent suicide. The point of the campaign, sponsored by the Substance Abuse and Mental Health Services Administration, is to raise the level of public awareness before World Suicide Awareness Day on September 10, 2013. |

# EVERYONE PLAYS A ROLE IN SUICIDE PREVENTION: TURNING STRATEGY INTO ACTION

Between now and then, there will be a number of events locally to bring attention to suicide and suicide prevention.

According to <u>Fatal Injury</u> data collected by the Washington State Department of Health, there were 566 completed suicides among the 10-24 year old age group in our state between 2007-2011. That was up 5.5 percent from the previous five-year period. Both the number of suicides (up 16.1 percent between 2007 and 2011) and the overall age-adjusted suicide rate in Washington State (up 8.5 percent between 2007 and 2011) have increased in each of the past five years.

According to the 2012 Washington State Healthy Youth Survey, 8 8% of 8<sup>th</sup> and 10<sup>th</sup> grade students, and 6% of 12<sup>th</sup> grade students reported making a suicide attempt in the 12 months prior to the survey. Further, 13.8 of 8<sup>th</sup> and 12<sup>th</sup> grade students and 19% of 10<sup>th</sup> grade students thought seriously about committing suicide during the 12 months prior to the survey.

According to Jeff Reed, director of the Suicide Prevention Resource Center, "Suicide has a ripple effect. That suicide doesn't just affect the individual who died by suicide. It affects their family, their neighborhood, their places of worship, and their schools."

For those contemplating suicide or for loved ones of someone contemplating suicide, help is immediately available by calling the National Suicide Prevention Lifeline, (800) 273-TALK (8255) or the Washington Recovery Helpline, (866) 789-1511.

| For more | information about what can be | edone to prevent suicide contact _ |  |
|----------|-------------------------------|------------------------------------|--|
| at       | or by email at                |                                    |  |

# EVERYONE PLAYS A ROLE IN SUICIDE PREVENTION:

# TURNING STRATEGY INTO ACTION

# RECOMMENDATIONS FOR REPORTING ON SUICIDE®

Developed in collaboration with American Association of Suicidology, American Foundation for Suicide Prevention, Annenberg Public Policy Center, Associated Press Managing Editors, Canterbury Suicide Project - University of Otapo, Christchurch, New Zealand, Columbia University Department of Psychiatry, ConnectSafely.org, Emotion Technology, International Association for Suicide Prevention Task Force on Media and Suicide, Medical University of Vienna, National Alliance on Mental Illiness, National Institute of Mental Health, National Press Photographers Association, New York State Psychiatric Institute, Substance Abuse and Mental Health Services Administration, Suicide Awareness Voices of Education, Suicide Prevention Resource Center, The Centers for Disease Control and Prevention (CDC) and UCLA School of Public Health. Community Health Sciences.



### IMPORTANT POINTS FOR COVERING SUICIDE

- More than 50 research studies worldwide have found that certain types of news coverage can increase
  the likelihood of suicide in vulnerable individuals. The magnitude of the increase is related to the amount,
  duration and prominence of coverage.
- Risk of additional suicides increases when the story explicitly describes the suicide method, uses dramatic/ graphic headlines or images, and repeated/extensive coverage sensationalizes or glamorizes a death.
- Covering suicide carefully, even briefly, can change public misperceptions and correct myths, which can
  encourage those who are vulnerable or at risk to seek help.

Suicide is a public health issue. Media and online coverage of suicide should be informed by using best practices. Some suicide deaths may be newsworthy. However, the way media cover suicide can influence behavior negatively by contributing to contagion or positively by encouraging help-seeking.

Suicide Contagion or "Copycat Suicide" occurs when one or more suicides are reported in a way that contributes to another suicide.

References and additional information can be found at: www.ReportingOnSuicide.org.

### INSTEAD OF THIS:



- Big or sensationalistic headlines, or prominent placement (e.g., "Kurt Cobain Used Shotgun to Commit Suicide").
- Including photos/videos of the location or method of death, grieving family, friends, memorials or funerals.
- Describing recent suicides as an "epidemic," "skyrocketing," or other strong terms.
- Describing a suicide as inexplicable or "without warning."
- "John Doe left a suicide note saying...".
- Investigating and reporting on suicide similar to reporting on crimes.
- Quoting/interviewing police or first responders about the causes of suicide.
- Referring to suicide as "successful," "unsuccessful" or a "failed attempt."

### DO THIS:



- Inform the audience without sensationalizing the suicide and minimize prominence (e.g., "Kurt Cobain Dead at 27").
- Use school/work or family photo; include hotline logo or local crisis phone numbers.
- Carefully investigate the most recent CDC data and use non-sensational words like "rise" or "higher."
- Most, but not all, people who die by suicide exhibit warning signs. Include the "Warning Signs" and "What to Do" sidebar (from p. 2) in your article if possible.
- "A note from the deceased was found and is being reviewed by the medical examiner."
- Report on suicide as a public health issue.
- Seek advice from suicide prevention experts.
- Describe as "died by suicide" or "completed" or "killed him/herself."

# EVERYONE PLAYS A ROLE IN SUICIDE PREVENTION:

## TURNING STRATEGY INTO ACTION

#### AVOID MISINFORMATION AND OFFER HOPE

- Suicide is complex. There are almost always multiple causes, including psychiatric illnesses, that may not have been recognized or treated. However, these illnesses are treatable.
- Refer to research findings that mental disorders and/or substance abuse have been found in 90% of people who have died by suicide.
- Avoid reporting that death by suicide was preceded by a single event, such as a recent job loss, divorce or bad grades.
   Reporting like this leaves the public with an overly simplistic and misleading understanding of suicide.
- Consider quoting a suicide prevention expert on causes and treatments. Avoid putting expert opinions in a sensationalistic context.
- Use your story to inform readers about the causes of suicide, its warning signs, trends in rates and recent treatment advances.
- Add statement(s) about the many treatment options available, stories of those who overcame a suicidal crisis and resources for help.
- Include up-to-date local/national resources where readers/viewers can find treatment, information and advice that promotes help-seeking.



## SUGGESTIONS FOR ONLINE MEDIA, MESSAGE BOARDS, BLOGGERS & CITIZEN JOURNALISTS

- Bloggers, citizen journalists and public commentators can help reduce risk of contagion with posts or links to treatment services, warning signs and suicide hotlines.
- Include stories of hope and recovery, information on how to overcome suicidal thinking and increase coping skills.
- The potential for online reports, photos/videos and stories to go viral makes it vital that online coverage of suicide follow site or industry safety recommendations.
- Social networking sites often become memorials to the deceased and should be monitored for hurtful comments and for statements that others are considering suicide.
   Message board guidelines, policies and procedures could support removal of inappropriate and/or insensitive posts.

# HELPFUL SIDE-BAR FOR STORIES WARNING SIGNS OF SUICIDE

- Talking about wanting to die
- · Looking for a way to kill oneself
- Talking about feeling hopeless or having no purpose
- Talking about feeling trapped or in unbearable pain
- Talking about being a burden to others
- Increasing the use of alcohol or drugs
- · Acting anxious, agitated or recklessly
- · Sleeping too little or too much
- Withdrawing or feeling isolated
- Showing rage or talking about seeking revenge
- · Displaying extreme mood swings

The more of these signs a person shows, the greater the risk. Warning signs are associated with suicide but may not be what causes a suicide.

## WHAT TO DO

If someone you know exhibits warning signs of suicide:

- Do not leave the person alone
- Remove any firearms, alcohol, drugs or sharp objects that could be used in a suicide attempt
- Call the U.S. National Suicide Prevention Lifeline at 800-273-TALK (8255)
- Take the person to an emergency room or seek help from a medical or mental health professional

## MORE INFORMATION AND RESOURCES AT:

www.ReportingOnSuicide.org or the following local resources:

# THE NATIONAL SUICIDE PREVENTION LIFELINE 800-273-TALK (8255)

A free, 24/7 service that can provide suicidal persons or those around them with support, information and local resources.





## **Sample Suicide Prevention Week Proclamation**

WHEREAS, in the State of Washington suicide is the 8<sup>th</sup> leading cause of all deaths, 2<sup>nd</sup> leading cause of death for 15 to 24 year olds and 3<sup>rd</sup> leading cause of death among 10 to 14 year olds; and

WHEREAS, the numbers of suicides are increasing among people 50 years and over and among American Indian and GLBTQ populations;

WHEREAS, there are 6 military bases in Washington and nationally one service member dies by suicide every 36 hours; and

WHEREAS, the stigma associated with mental illness often discourages persons at risk for suicide from seeking life-saving help and that suicide can traumatize survivors and create a ripple effect in a community; and

WHEREAS, 50% percent of Washingtonians who die by suicide use a firearm and where 78% of successful suicides are males;

WHEREAS, a great many suicides are preventable;

Now, therefore, I, \_\_\_\_\_ (insert name of local or tribal official), do hereby proclaim, September 8-14, 2013 as

## Suicide Prevention Week in Washington

and call on residents to participate in efforts to increase awareness about suicide, to become trained to recognize suicide signs and symptoms to make referrals to appropriate helping resources, and, to talk with friends and families about suicide signs and symptoms.



## **Reporting Your Work**

Everyone Counts. Everything You Do Counts. Every Day You Do Something Counts.

Please write down the date that you accomplished any or all of these actions. Then, just take the form to the coalition or organization coordinator.

| What did you do?  | Date or dates when you did it? |
|---|--------------------------------|
| 10 (Easiest) - Go to Suicide Prevention Resource Center, www.sprc.org/basics, and read about suicide in the United States AND listen to testimony from suicide survivors at the American Foundation for Suicide Prevention website, www.afsp.org/survivorday/watchpreviousprograms/english. |                                |
| 9 - Do an internet search to find out what other community<br>coalitions are doing about suicide prevention and think about how<br>those approaches might work in your community AND THEN read<br>the story of Garrett Lee Smith at<br>www.jaredstory.com/garrett_smith.html.               |                                |
| 8 - Go to http://www.askhys.net/FactSheets and read the depression and suicide fact sheets for 8th, 10 <sup>th</sup> , and 12th graders in your county AND call your county's health department and ask how many suicides there have been so far in 2013.                                   |                                |
| 7 – Find out if your local school district has an emergency response<br>plan in place that includes a protocol for dealing with a suicide AND<br>find out how information is disseminated to school staff about the<br>protocol.  |                                |
| 6 – Talk with emergency responders – police, fire, ambulance – about what they do when they are responding to a suicide AND talk with staff at your nearest hospital emergency department about what they do in response to a suicide.  |                                |

| What did you do?  | Date or Dates When You Did It? |
|---|--------------------------------|
| 5 - Have a conversation with a co-worker or friend about suicide in your community.   |                                |
| <ul> <li>4 - Reschedule your September coalition meeting to September 10,</li> <li>2013 and dedicate the agenda to discussion about suicide in your county or community - have volunteers report on their experiences with the previous 6 items.</li> </ul>   |                                |
| 3 - Customize the Suicide Prevention Week proclamation or tribal<br>resolution for your community and arrange for a town or city council,<br>county commission, tribal council, school board or other<br>organization to declare September 10, 2013 as World Suicide<br>Prevention Day in your community. |                                |
| 2 - Organize an event like the American Foundation for Suicide<br>Prevention's "Out Of The Darkness" walk to build awareness about<br>suicide OR participate in another organization's suicide prevention<br>awareness event.   |                                |
| I - Go to www.sprc.org/basics/about-suicide and review the risk factors for suicide and think about whether you have seen the risk factor behaviors in your friends, family or yourself in the past.  |                                |

If you need help, call the National Suicide Prevention Hotline, (800) 273-TALK (8255).