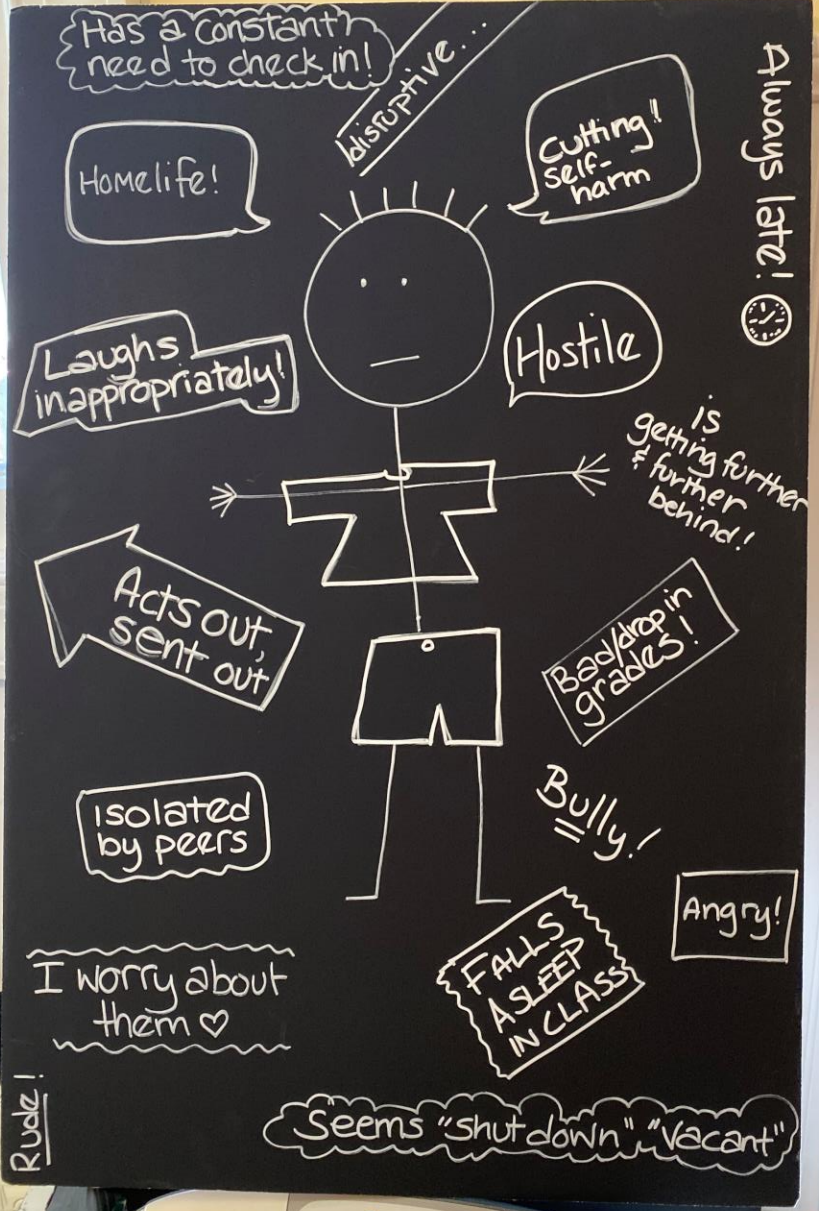


Date _____ No. _____

Ending The Silence





MENTAL HEALTH affects

ATTENDANCE Physical Health
ABILITY Developmental
TO LEARN Milestones
Relationships **LONG-TERM** **SUCCESS**
PEERS, FAMILY, SCHOOL, COMMUNITY

MENTAL HEALTH and YOUTH

70%

OF YOUTH

In the juvenile justice system have a diagnosed mental illness



1 in 6 YOUTH AGED 6-17 experience a mental health disorder each year

50%

OF CHILDREN

ages 8-15

DON'T receive treatment

17%

OF HIGH SCHOOL STUDENTS

STUDENTS seriously consider suicide

HIGH SCHOOL STUDENTS

with depression are

TWICE AS

LIKELY

to drop out compared to their peers

1/2

OF ALL LIFETIME CASES

begin by age

14

FOUR STEPS to early intervention

STEP
01



Know the
warning
signs

STEP
02



Reach out
&
respond

STEP
03



Work with
families &
students

STEP
04



Provide
resources
&
support

STEP
01

Know the **WARNING SIGNS**



Intensity:

how severe are the symptoms?



Duration:






how long do they last?








Level of distress:

how much do they impair daily functioning?

Know the **WARNING SIGNS**

-  Feeling very sad or withdrawn for more than 2 weeks
-  Severe out-of-control, risk-taking behaviors that cause harm to self or others
-  Sudden overwhelming fear for no reason, sometimes with a racing heart, physical discomfort or fast breathing
-  Seeing, hearing or believing things that aren't real
-  Drastic changes in mood, behavior, personality or sleeping habits

Know the **WARNING SIGNS**

-  Extreme difficulty concentrating or staying still that puts a person in physical danger or causes school failure
-  Intense worries or fears that get in the way of daily activities
-  Throwing up, using laxatives or not eating to lose weight; significant weight loss or weight gain
-  Using alcohol or drugs excessively
-  Trying to harm oneself, attempting suicide or making plans to do so



SUICIDE and YOUTH

From

2001-2017

OVERALL SUICIDE RATE

increased by

31%

2nd

LEADING CAUSE

OF DEATH

for individuals ages 10-24

Grades 9-12

IN THE LAST 12 MONTHS

8.6%

ATTEMPTED

17.7%

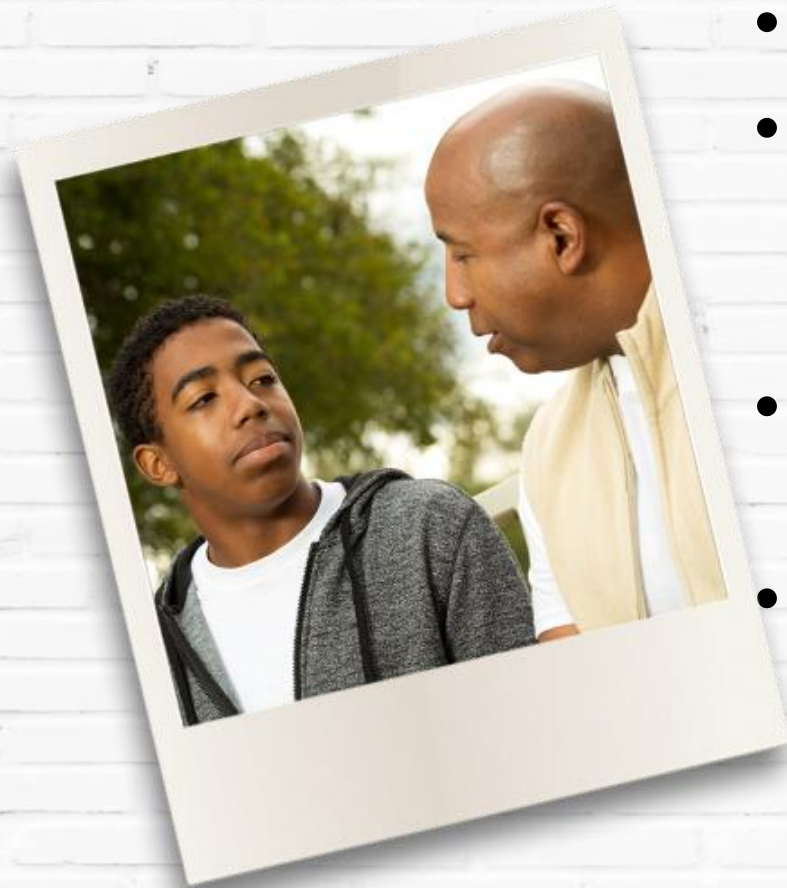
SERIOUSLY CONSIDERED

42.8%

LGB STUDENTS
SERIOUSLY CONSIDERED



POTENTIAL Risk Factors



- Previous suicide attempts
- Traumatic life experience (physical/sexual abuse, divorce, losing a parent)
- Presence of mental health condition
- Being involved in bullying in anyway



Common Warning signs of **SUICIDE**

- Talking, writing or drawing about death
- Talking about having no reason to live, being a burden
- Loss of interest in the things they care about



STEP 02

REACH OUT and RESPOND

If you believe a young person is contemplating suicide:

Don't ignore the signs!

- Ask them the question, “Are you thinking about suicide?”
- Don't leave them alone
- Escort them to the school mental health contact
- Share relevant information with the mental health contact
- Determine who will contact their family



REACH OUT to...

1
the school
mental
health
contact

2
the
student

3
the
family

...and **RESPOND**



REACH OUT to the school MENTAL HEALTH CONTACT



Share concerns



Give specific examples



Inform them of past discussions



Ask how to approach the conversation

Who do you go to in **YOUR** school?



REACH OUT to the STUDENT



Share SPECIFIC, concerning behaviors you've observed



Listen, express concern, reassure



Focus on being understanding, caring and nonjudgmental



Ask what you can do to help





REACH OUT to FAMILIES

- **Share** SPECIFIC, concerning behaviors you've observed
- **Listen**, express concern, reassure
- **Remove** feelings of blame
- **Acknowledge** frustration and anger as normal
- **Communicate** empathy and compassion
- If the family mentions a possible mental health condition:
 - **De-stigmatize** the topic by normalizing mental health issues
 - **Emphasize** that the earlier their child gets help, the better



PARTNERING with STUDENTS

Communicate

- Make sure the student is involved, what do they want/need?
- Maintain regular communication between home and school
- Involve staff members they're most comfortable with
- Offer flexible check in times
- Share in a note instead of talking

Educate

- Improve communication and problem-solving skills
- Reduce stigma through mental health education
- Share tips on how to get and stay organized
- Openly discuss the effects of bullying
 - Foster a culture of kindness in the classroom

STEP
04

Provide **RESOURCES & SUPPORT**

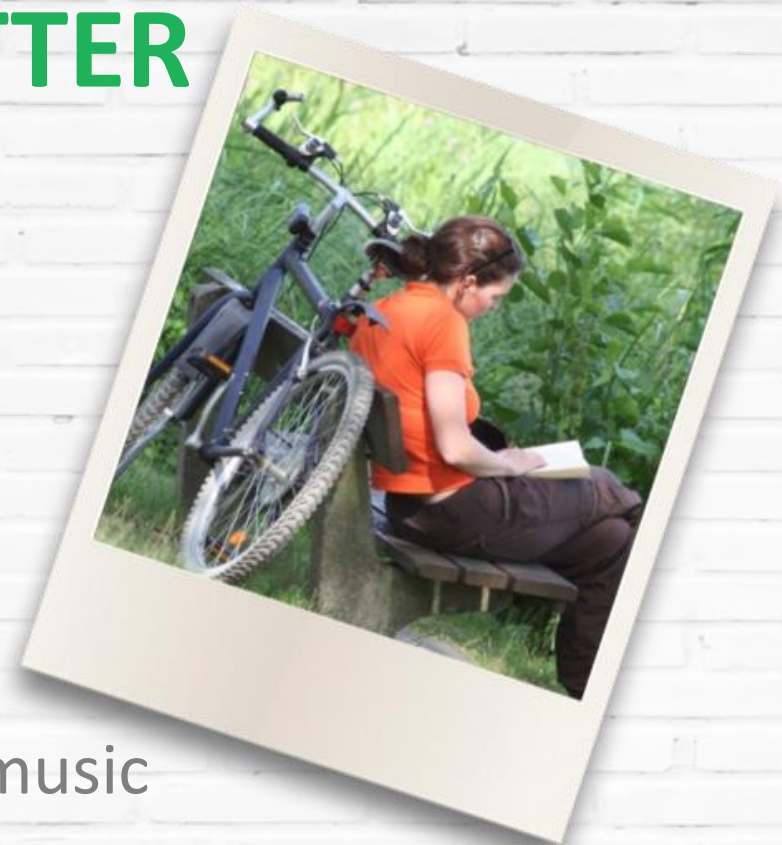


Making symptoms **BETTER**

Positive coping strategies

- Get enough sleep
- Exercise and eat healthily
- Write (journal/blog) or listen to music
- Be active: Join a club, sports, hobbies, hang out with friends

These strategies are key to improving and maintaining mental health



FOUR STEPS to early intervention

STEP
01



Know the
warning
signs

STEP
02



Reach out
&
respond

STEP
03

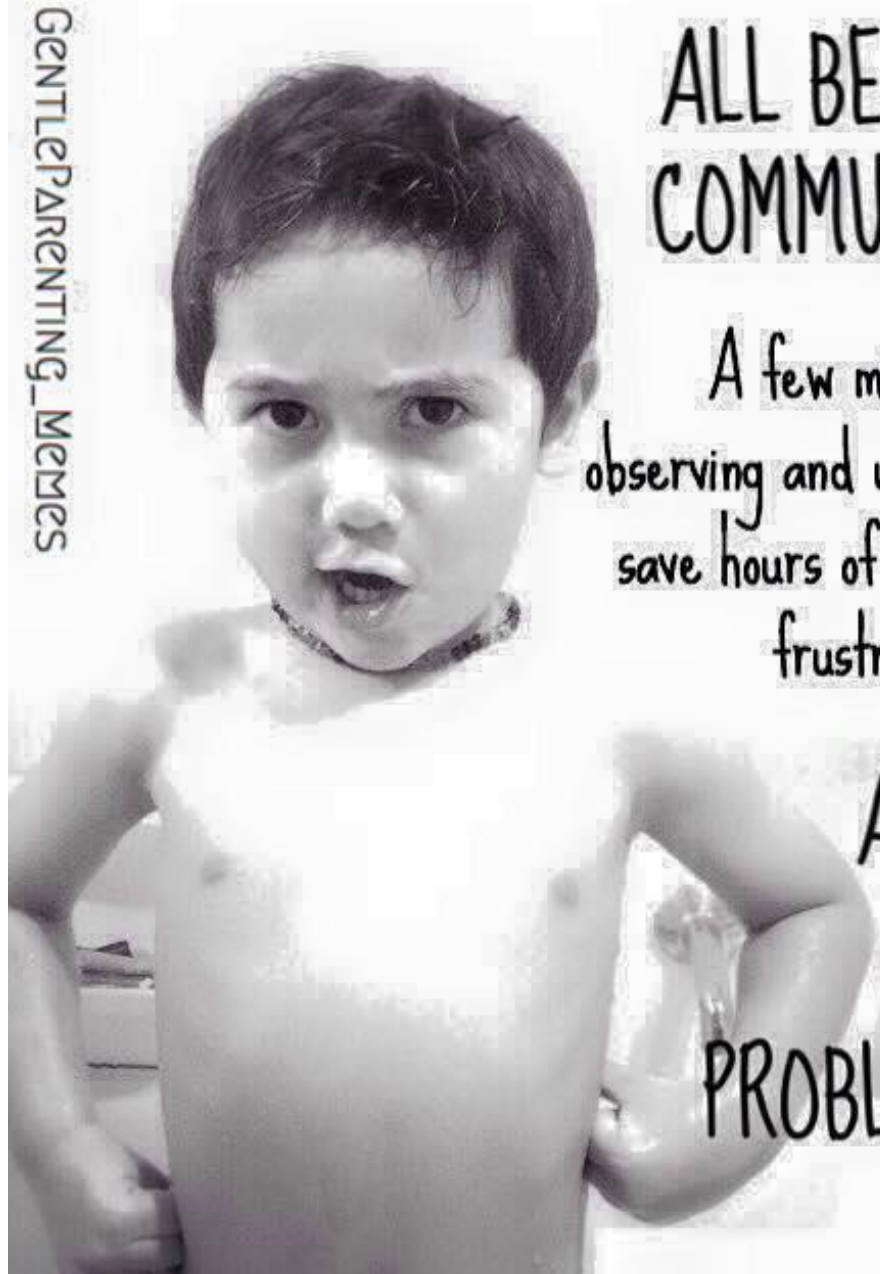


Work with
families &
students

STEP
04



Provide
resources
&
support



ALL BEHAVIOR IS
COMMUNICATION.

A few minutes of listening,
observing and understanding, can
save hours of miscommunication,
frustration and conflict.

A NEED MET
is a
PROBLEM SOLVED.

- LR Knost

EMPATHY is the Doorway to Understanding



THANK YOU



NAMI HelpLine 800-950-6264
24/7 Crisis Text Line: Text "NAMI" to 741741

Acknowledgements

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