

Millersville University
“Campus Connect”
Suicide Prevention Training for Gatekeepers

BASIC TERMS AND DEFINITIONS

Suicidal ideation: Thinking about suicide

Suicide threat: Stating intent to kill yourself

Suicide attempt: Actually trying to kill yourself

Intentional self-harm: Behavior related to self harm, but absent of the intent to kill yourself (e.g., cutting behavior)

Completed Suicide: Suicide death

Survivor of Suicide: Friend or family member of someone who commits suicide

WARNING SIGNS

Imminent Danger

Overt expression of suicidal thinking

Urgent - requiring a greater level of intervention

- Someone is threatening to hurt or kill themselves.
- Someone is looking for ways to kill themselves (having or developing a plan) such as seeking access to pills, weapons, or other means.
- Someone is talking or writing about death, dying or suicide.

Other Common Warning Signs

Students in some level of distress

A broader range of risk factors

- Hopelessness
- Rage, anger and seeking revenge
- Acting reckless or engaging in risky activities
- Feeling trapped
- Increased drug/alcohol use
- Withdrawing from friends/family
- Anxiety/agitation/unable to sleep
- Dramatic changes in mood
- Seeing no purpose in life, no reason for living

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SUICIDE MYTHS

- People who talk about suicide won't really do it.
(Fact) - Almost everyone who attempts suicide has given some clue or warning. Don't ignore suicidal statements!

- If a person is going to attempt suicide, nothing will stop them
(Fact) - Most individuals who attempt suicide remain uncertain of their decision until the final moment. Most suicidal people do not wish for death; they wish for the pain to stop.

- People who commit suicide are unwilling to seek help
(Fact) - Studies of suicide victims show that more than half have sought professional help within six months of their death.

- Anyone who attempts suicide must be psychotic or insane
(Fact) - Most people who commit suicide are not psychotic; they are struggling and often meet the diagnostic criteria for depression.

- Talking about suicide may give someone the idea.
(Fact) - You don't give a person suicidal thoughts by talking about suicide. The opposite is true. Bringing up the subject and discussing it is one of the most helpful things you can do, as it helps a suicidal person feel understood and demonstrates that you understand the amount of suffering the person is experiencing.

THINGS TO REMEMBER

- The only way to really know who is thinking about killing themselves is to ask them using direct and clear communication.
- According to research data emotional/physical pain was rated by both graduate and undergraduate students as the number one factor that impacted their consideration of suicide.
- “Suicide happens when pain exceeds an individual’s resources for coping with pain.”
- When talking to someone who may be thinking about suicide keep your questions simple and basic.
- Your goal is NOT to provide therapy but to provide additional resources and support to assist students with coping with their pain.
- One of the greatest resources for dealing with pain is feeling and believing that other people care about you and are there to support you. Therefore, we want to help students in crisis feel like we understand and care about them.
- Take all comments about suicide seriously.
- Some students who talk to you about suicide may ask you to not tell anyone else; always avoid promising secrecy.
- If help is refused by a student who you are concerned may be suicidal, consult with a professional or your supervisor.
- Do not leave an actively suicidal student alone.
- Refer, Refer, Refer!
- You really can make a difference in students’ lives.