







The OACA is proud to join forces with the OSAA, OADA and OATS in the prevention of youth suicide.

OREGON YOUTH SUICIDE AWARENESS CAMPAIGN

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Youth suicide in Oregon is a serious and preventable public health problem. The aspirational goal of the state Youth Suicide Intervention and Prevention Plan is *Zero Suicide* for Oregon.

Oregon's rate of suicide per 100,000 population ranked 12th highest among US states in 2013-2014. Oregon's rate of completed suicides among youth has been increasing since 2011.

Thirty-eight of the 2014 suicides were among elementary, middle and high school youth or recent high school graduates. Of the total, 77 percent were male. Forty-eight percent of youth died by firearm and 35 percent by hanging/suffocation.

There is no single cause of suicide. For each person, the risk factors are multidimensional and it's unlikely those left behind will ever know "why" with certainty. Suicide most often occurs when stressors exceed the coping capacity of someone with a mental health condition. However, not everyone with a mental health condition will attempt or complete suicide.

When looking at the life circumstances for youth completing suicide in 2013-2014, 76% of youth mentioned mental health problems to others before they died. Forty-four percent had a diagnosed mental disorder and 58 percent had a current depressed mood. Relationship break-ups and family stressors were involved in their life circumstances, as was experiencing a crisis within the two weeks leading up to the death. Forty percent had a history of expressed suicidal thought or plan, and 27 percent recently disclosed intent to die by suicide.

The fact that youth talk about mental health and suicide or disclose their intent to die at a relatively frequent rate opens a window for prevention. Due to their close relationships with athletes, coaches are in the position to watch for warning signs to identify students at risk. These warning signs fall into three main categories: <u>talking</u> about suicide, exhibiting <u>behaviors</u> that demonstrate suicide risk, and indicators about <u>mood</u> problems associated with risk.

While not every suicidal person will specifically talk about the intent to die, the following statements are risk factors:

- Being a burden to others
- Feeling trapped
- Experiencing unbearable pain
- Having no reason to live
- Killing themselves

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Youth often exhibit specific behaviors that can be indicators for suicide risk:

- Increased use of alcohol or drugs
- Looking for a way to kill themselves, such as searching online for materials or means
- Acting recklessly
- Withdrawing from activities
- Isolating from family and friends
- Sleeping too much or too little
- Visiting or calling people to say goodbye
- Giving away prized possessions
- Aggression

People who are considering suicide can display one or more of the following moods:

- Depression
- Loss of interest
- Rage
- Irritability
- Humiliation
- Anxiety

Other factors adults should monitor that can contribute to feelings of hopelessness and disconnectedness from school, peers or family include:

- Substance use disorders
- Serious or chronic health conditions or pain
- Stressful life events, including a death or parents' divorce
- Previous suicide attempts or family history of suicide
- Prolonged stress, including bullying, harassment
- Access to lethal means, including firearms or drugs
- Exposure to another person's suicide or to graphic or sensationalized accounts of suicide

If you are in a crisis or are concerned about someone who is, call the National Suicide Prevention Lifeline at 1-800-273-8255 (TALK).

Sources:

Suicide Prevention Resource Center American Foundation for Suicide Prevention