Youth Suicide Prevention, Intervention, and Postvention Warning Signs

Specific steps should be followed to identify and help young people at risk, including a referral to someone in the school who has been trained to assess suicide risk. School systems should include efforts to recognize the warning signs, refer students to appropriate resources, and create reentry plans for students coming back to school after a crisis that coordinate with mental health treatment plans. It takes time and courage to reach out to students on a personal level, but your interest can be a lifeline to a child in crisis.

Warning Signs Requiring Immediate Action

- Talking or writing about suicide or death
- Giving direct verbal cues, such as "I wish I were dead" and "I'm going to end it all"
- Giving less direct verbal cues, such as "You will be better off without me", "What's the point of living?", "Soon you won't have to worry about me," and "Who cares if I'm dead, anyway?"
- Isolating from friends and family
- Expressing the belief that life is meaningless
- Giving away prized possessions
- Exhibiting a sudden and unexplained improvement in mood after being depressed or withdrawn
- Neglecting their appearance and hygiene
- Dropping out of school or social, athletic, and/or community activities
- Obtaining means such as a firearm or prescription medications

Warning Signs that May Indicate a Youth is at Risk

- **A sudden deteriorating academic performance**—teens who were typically conscientious about their schoolwork and who are now neglecting assignments, cutting classes, or missing school altogether.
- **Self-harm**—some individuals cope with their distress by harming themselves. Evidence of self-harm may be obvious, like cuts to one's skin, but may also be inconspicuous in the form of ingesting harmful substances,risk-taking behaviors, or depriving oneself of food.
- **A fixation with death or violence**—teens may express this fixation through poetry, essays, doodling, or other artwork. They may be preoccupied with violent movies, video games, and music, or fascinated with weapons.

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- **Unhealthy peer relationships**—teens whose circle of friends dramatically changes, who don't have friends, or who begin associating with other young people known for substance abuse or other risky behaviors may signal a change in their emotional lives.
- **Volatile mood swings or a sudden change in personality**—teens who become sullen, silent, and withdrawn, or angry and acting out. Conversely, and teen sullen by nature may start to behave uncharacteristically cheerful. Both internalizing and externalizing behaviors warrant a conversation to determine if the student is at risk.
- **Indications that the student is in an unhealthy, destructive, or abusive relationship**—this can include abusive relationships with peers or family members. Signs of an abusive relationship include unexplained bruises, a swollen face, or other injuries, particularly if the student refuses to discuss them.
- **Risk-taking behaviors**—Risk-taking behaviors often co-occur and are symptomatic of underlying emotional or social problems. Such behaviors as unprotected sex, alcohol or other drug use, driving recklessly or without a license, petty theft, or vandalism can be an indication that something is wrong.
- **Disordered Eating**—Changes in eating habits and behaviors may change quickly for someone who is trying to cope with distress. Disordered eating is not always associated with extreme weight fluctuations.
- **Difficulty in adjusting to gender identity**—gay, lesbian, bisexual, transgender, queer, and intersex teens are a vulnerable population and have higher suicide attempt rates than their heterosexual peers. While coming to terms with gender identity can be challenging for many young people, LGBTQI youth face social pressures that can make this adjustment especially difficult, particularly if they are not in a supportive environment.
- **Bullying**—children and adolescents who are bullied, as well as those who bully, are at increased risk of depression and suicidal ideation.