



Welcome!

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Ask A Question,
Save A Life.

QUESTION. PERSUADE. REFER.



24/7 Lifeline
for Emotional,
Mental or
Substance Use Distress

3 Ways to Connect

1. CALL



2. TEXT



3. CHAT



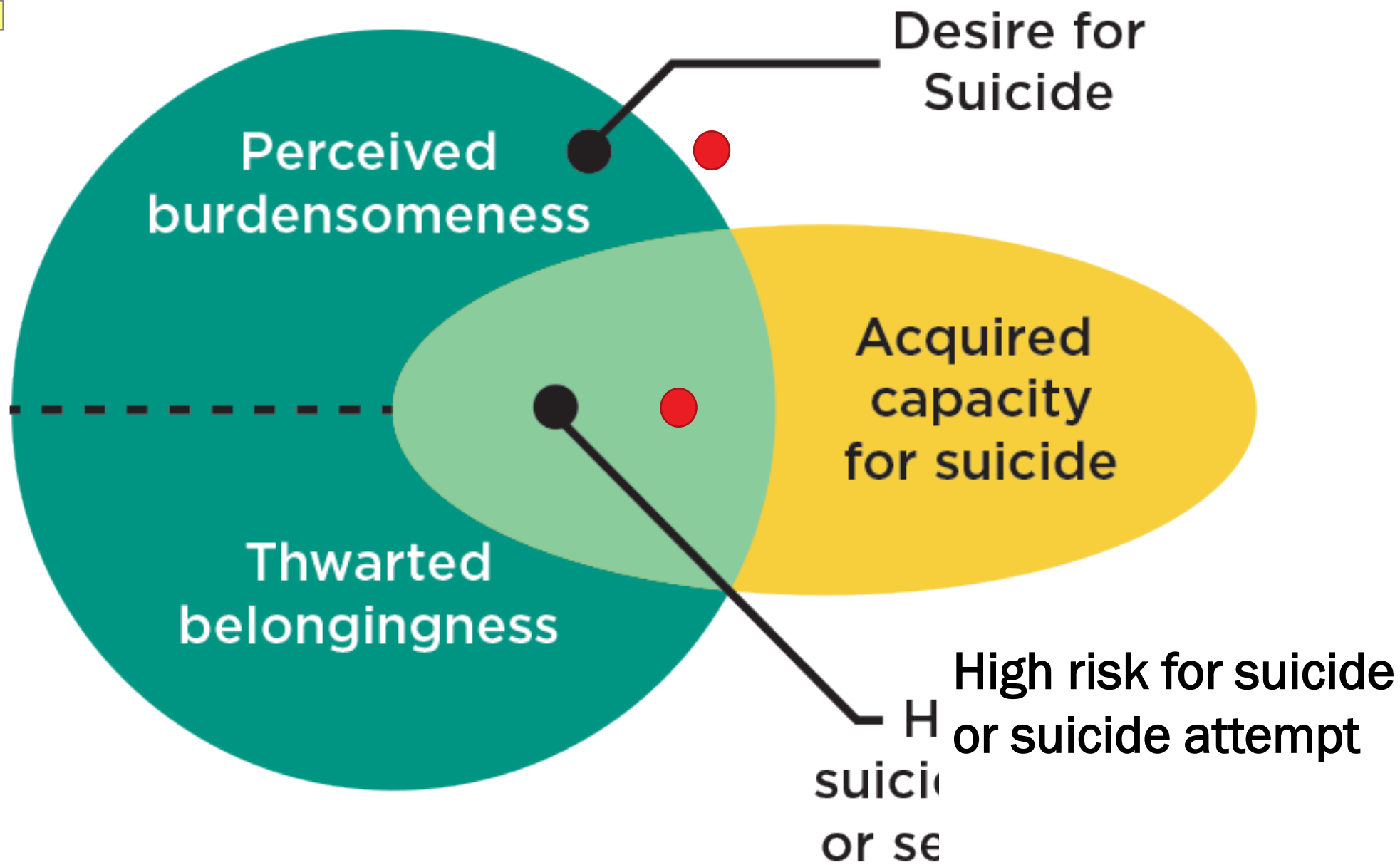
Visit 988NM.org
for more info





Heart Disease





Gun Safety

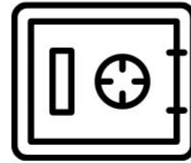
15 youth died
from suicide
with a firearm
in 2020



2 out of 5 households
report loaded
unsecured firearms



Use Gun locks



Use Gun safes



Store ammunition
seperately



Risk

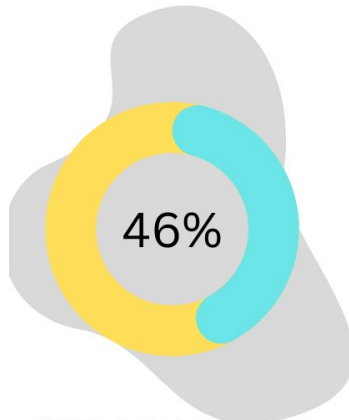
Mental Health Conditions
Substance use problems
Access to lethal means
Stressful life events
Exposure to other persons suicide
Previous suicide attempts



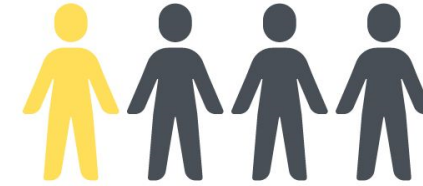
Protective Factors

Access to mental health care
Family and School Connectedness
Reduced access to lethal means
Cultural and religious beliefs
Coping Skills
Self Esteem

Mental Health and Indigenous Youth in New Mexico



46% of AI/AN high school students felt persistent sadness or hopelessness



1 in 4 AI/AN high school students engaged in nonsuicidal self-injury



1 in 7 AI/AN high school students attempted suicide in the past year

Source: 2021 YRRS (NM); NMDOH Survey Section and PED

Gun Safety

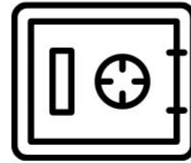
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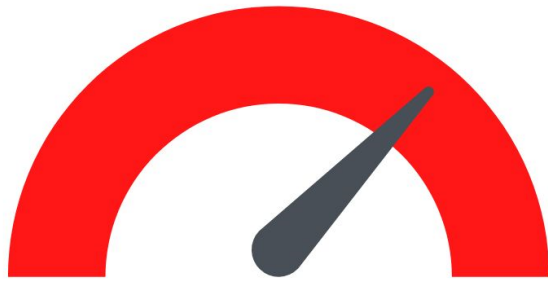
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How does discrimination affect our Indigenous Youth?

AI/AN Students who were teased or called names
because of their race or ethnicity were:



72% More Likely to experience
persistent feelings of sadness or
hopelessness

Source: 2021 YRRS (NM); NMDOH Survey Section and PED

250%

More likely to have attempted
suicide in the past year

Sexual Orientation and Gender Identity



One out of every five (21%) gay or lesbian students attempted suicide



Nearly One in Four (23%) bisexual students attempted suicide in the past year

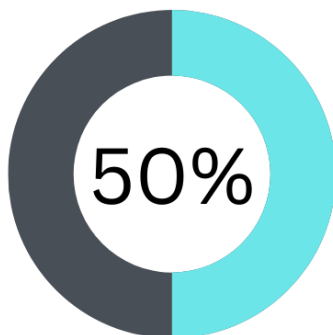


Nearly **One of Every Three** (31%) of Transgender, Genderqueer or Genderfluid students attempted suicide

Source: 2021 YRRS (NM); NMDOH Survey Section and PED



Unstable Housing



• **Half (50%)** of these students felt persistent feelings of sadness or hopelessness



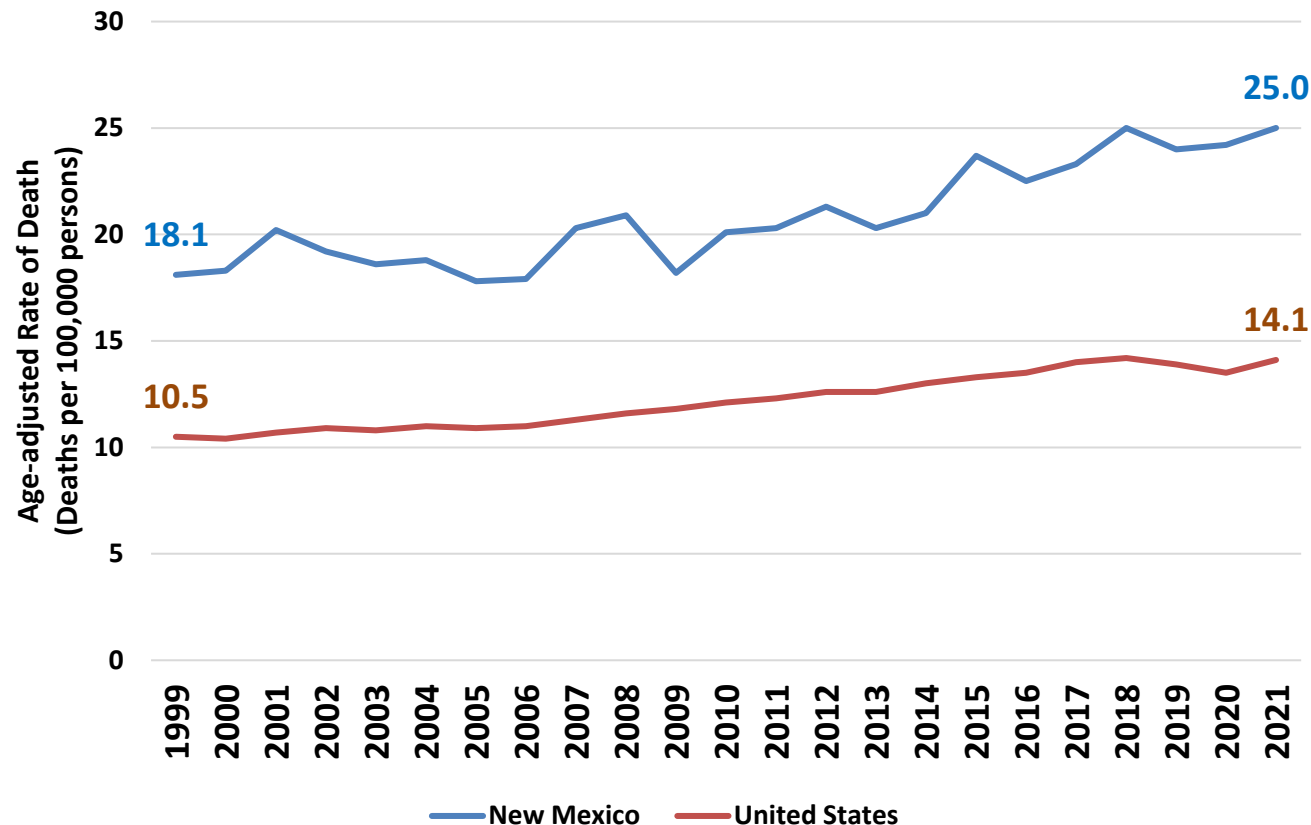
One in Every Four (26%) of these students attempted suicide

46,000 deaths annually attributed to suicide

2020	45,979
2019	47,511
2018	48,344
2017	47,173
2016	44,965
2015	44,193
2014	42,733
2013	41,149
2012	40,600

Suicide

New Mexico and the United States, 1999-2021



From 1999 to 2021,
the US rate of
suicide increased
34%

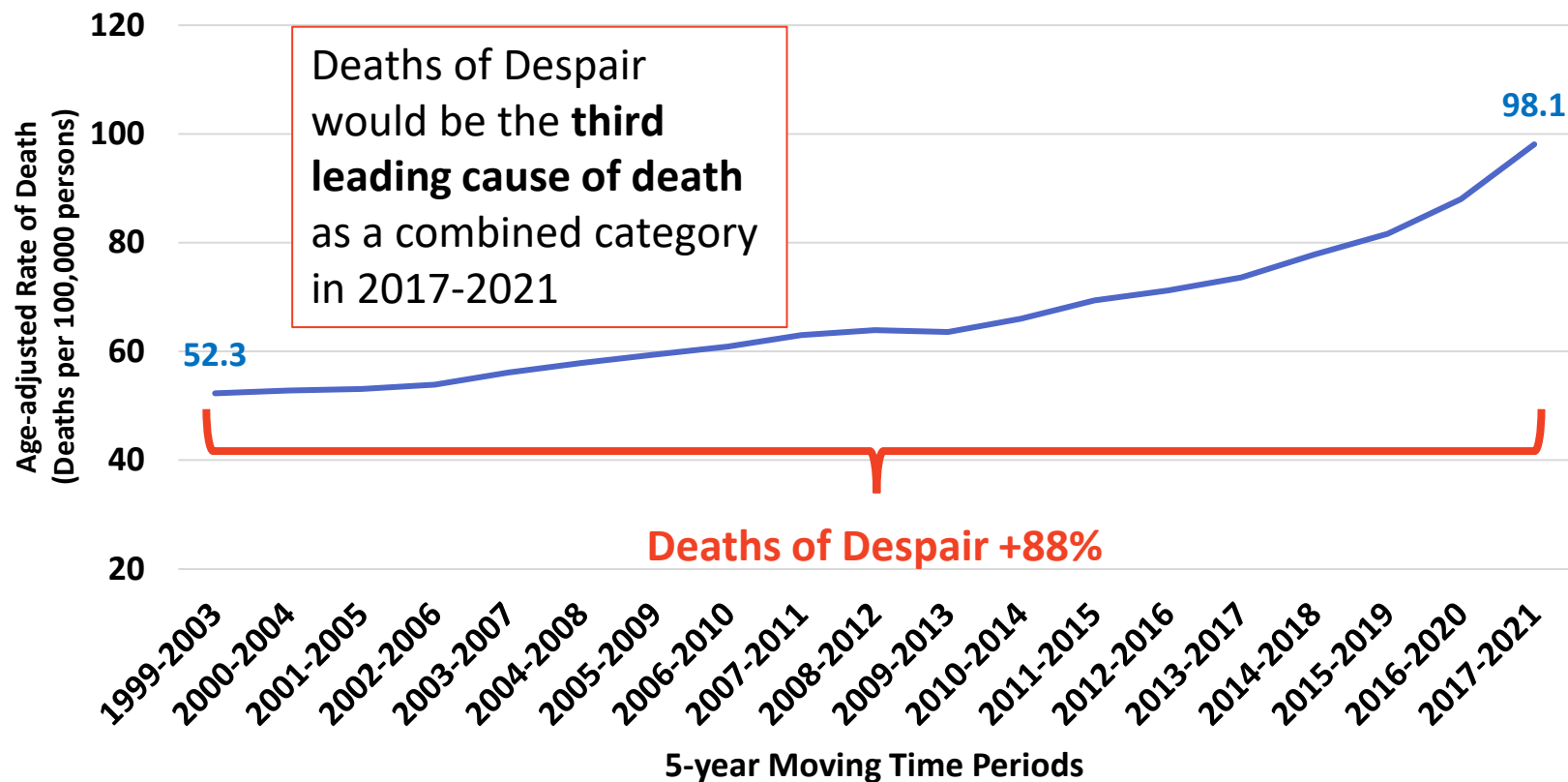
From 1999 to 2021,
the NM rate of
suicide increased
38%

In 2021, the New
Mexico suicide rate
was **77% higher**
than US rate

Source: CDC Wonder, Underlying Cause of Death Dataset. Accessed at <http://wonder.cdc.gov/ucd-icd10.html>. Data Retrieved on January 13, 2023.

Deaths of Despair*

New Mexico, 1999-2021 (5-year Moving Time Periods)



*Deaths of Despair includes suicide, drug overdose and 100% alcohol attributable deaths

Source: New Mexico IBIS, Mortality Query. Data accessed from: <http://ibis.health.state.nm.us/>. Retrieved on January 13th, 2023.

Nationally 6,062 young people (age 15-24)
died by suicide in 2020



That's a rate of 1 suicide every 2 hours

25 attempts for each documented death

46,000 suicides translates into 1,150,000 attempts annually

Impact of Suicide

Inclusive of blood relatives, a study at the University of Kentucky reported the following additional impacts from a single death by suicide:

- 135 are exposed
- 53 have short term disruption in life
- 25 have a major life disruption
- 11 have devastating effects on their life

Impacts especially severe in small, tight-knit communities.

Suicide risk is greater in survivors (4-fold increase in children when a parent dies by suicide)

QPR

- QPR is not intended to be a form of counseling or treatment.
- QPR is intended to offer hope through positive action.

Suicide Myths and Facts

Myth No one can stop a suicide, it is inevitable.

Myth Confronting a person about suicide will only make them angry and increase the risk of suicide.

Fact If people in a crisis get the help they need, they will probably never be suicidal again.

Fact Asking someone directly about suicidal intent lowers anxiety, opens up communication and lowers the risk of an impulsive act.

Fact Suicide prevention is everybody's business, and anyone can help prevent the tragedy of suicide.

Myth Only experts can prevent suicide.

Suicide Myths and Facts

Fact Most suicidal people communicate their intent sometime during the week of preceding their attempt.

Myth Those who talk about suicide don't do it.

Fact People who talk about suicide may try, or even complete, an act of self-destruction.

Myth Once a person decides to die by suicide, there is nothing anyone can do to stop them.

Fact Suicide is the most preventable kind of death, and almost any positive action may save a life.

How can I help? Ask the Question . . .

QPR

Suicide Clues And Warning Signs

*The more clues and signs observed,
the greater the risk.*

Take all signs seriously.



QPR

Strongest Predictors

- Previous suicide attempt
- Current talk of suicide/making a plan
- Strong wish to die/preoccupied with death(i.e. poems, music, drawings)
- Depression (hopelessness, withdrawal)
- Substance use
- Recent attempt by friend or family



QPR

Verbal Clues

- “I’ve decided to kill myself.”
- “I wish I were dead.”
- “I’m going to commit suicide.”
- “I’m going to end it all.”
- “If (_____) doesn’t happen, I’ll kill myself.”



QPR

Indirect or “Coded” Verbal Clues

- “I’m tired of life, I just can’t go on.”
- “My family would be better off without me.”
- “Who cares if I’m dead anyway.”
- “I just want out.”
- “I won’t be around much longer.”
- “Pretty soon you won’t have to worry about me.”

QPR

Behavioral Clues

- Past suicide attempt
- Getting a gun or stockpiling pills
- Giving away prized possessions
- Impulsivity/increased risk taking
- Unexplained anger, aggression, irritability
- Self-destructive acts (i.e. cutting, burning)
- Chronic truancy, running away
- Perfectionism

Situational Clues

- Being expelled from school or fired from job
- Family problems or alienation
- Loss of any major relationship
- Death of a friend or family member, especially if by suicide
- Diagnosis of a serious or terminal illness
- Financial problems (theirs or within the family)
- Sudden loss of freedom or fear of punishment
- Feeling embarrassed or humiliated in front of peers
- Victim of assault or bullying



QPR

Other Youth-Related Clues

- Change in interaction with family and friends
- Recent disappointment or rejection
- Sudden decline or improvement in academic performance
- Physical symptoms: eating disturbances, changes in sleep patterns, chronic headaches, stomach problems, menstrual irregularities
- Increased apathy

QPR

Tips for Asking the Suicide Question

- If the young person is reluctant, be persistent
- Talk to the person alone in a private setting
- Allow the person to talk freely
- Give yourself plenty of time
- If in doubt, don't wait, ask the question
- Have your resources handy: QPR Card, community resources phone numbers and know your school protocol for handling suicide risk

Remember: How you ask the question is less important than that you ask it



Q

QUESTION

HOW TO ASK THE SUICIDE QUESTION

Less Direct Approach

“Have you been unhappy lately?”

“Have you been very unhappy lately?”

“Have you been so unhappy lately that you’ve been thinking about ending your life?”

“Do you ever wish you could go to sleep and never wake up?”



QUESTION

HOW TO ASK THE SUICIDE QUESTION

Direct Approach

- “You know, when people are as upset as you seem to be, they sometimes wish they were dead. I’m wondering if you’re feeling that way, too?”
- “You look pretty miserable, I wonder if you’re thinking about suicide?”
- “Are you thinking about killing yourself?”

Note: If you cannot ask the question, find someone who can.

WAYS NOT TO ASK THE QUESTION

“You’re not thinking about suicide are you?”

OR

“You’re just kidding about killing yourself, right?”

Asking in this way encourages a negative response from the young person. It may also imply that you are frightened by the intensity of their feelings.

Be aware of your own non-verbal clues.

P

PERSUADE

FOR QPR IN SCHOOL SETTINGS

- Listen to the problem and give them your full attention
- Remember, suicide is the solution to a perceived insoluble problem. Suicide is not the problem.
- Do not rush to judgment
- Offer hope in any form

P

PERSUADE continued...

Then ask:

- “Are you willing to talk to your counselor within the next 10-15 minutes?”
- If they say “yes” ask them, “Will you promise me not to kill yourself in between now and the time you talk to your school counselor?”
- Continue to monitor them closely until they are with the counselor.



P

PERSUADE continued...

- “Will you go with me to talk with your school counselor?”
- “Would you like me to tell your school counselor that you would like to talk them?”



P

PERSUADE continued...

- “If you are unable or unwilling to talk to your counselor, I want you to know that I care enough about you that I will let them know.”

NOTE: The school counselor and/or administrator must be informed if you believe you are seeing suicidal clues or warning signs from a student.

R

REFER FOR QPR IN SCHOOL SETTINGS

Suicidal young people often believe they cannot be helped, so you may have to do more.



R

REFER FOR QPR IN SCHOOL SETTINGS

The best “referral” involves taking the person directly to see the school counselor.

R

REFER FOR QPR IN SCHOOL SETTINGS

The next best “referral” is when the student wants you to talk to the counselor first, or when they agree to talk to the counselor on their own within the immediate future.

The young person should be monitored closely in the interim.

If the person refuses help, you may need to get others involved.

R

REFER FOR QPR IN SCHOOL SETTINGS

The third best option is to make sure the student is safe, is under observation by an adult, and then you tell the school counselor the warning signs you have observed.

NOTE

*You are not being disloyal or violating a trust
when you share of a young person's
suicidality with a school counselor or
administrative staff.*

You are being disloyal if you do not!

For Effective QPR

- **Say:** “I want you to live,” or “I’m on your side and we’ll get through this.”
- **Communicate** with the school counselor and administration.
- **Get Others Involved.** Ask the person who else might help. Family? Friends? Teachers? Brothers? Sisters? Pastors? Priest? Rabbi? Bishop? Physician?

For Effective QPR Cont.

- **Join the Team.** Offer to work with other school personnel and concerned members of the community members to help reduce youth suicide.
- **Follow up** with a visit, a phone call, a card, or in whatever way feels comfortable to you, to let the young person know you care about what happens to them. Caring may save a life.

REMEMBER

Since almost all efforts to persuade a young person to live instead of attempt suicide will be met with agreement and relief, don't hesitate to get involved.

*When you apply QPR, you plant
the seeds of hope.*

*Hope helps prevent youth
suicide.*

THANK YOU



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