**Suicide Prevention Key Messages**

*This message set represents a collection of messages from Each Mind Matters to guide conversations, interviews and presentations for Suicide Prevention Week activities. You will see that each message leads with a statement followed by facts, statistics and supporting information. These are meant to be delivered as complete thoughts. While we don’t want to force memorization, it is important with this subject matter that we choose our words carefully, and that’s why we have taken the time here to build out each. Please review all messages here and then construct your speech, responses, etc. based on what you feel most comfortable delivering and which messages are appropriate for each circumstance.*

On Suicide Prevention Day/Week:

* **September 7 through 13 marks the 41st annual Suicide Prevention Week.** People in California and across the globe will come together to spread awareness about the warning signs of suicide and offer support to those who have lost someone to suicide.  This year the theme for suicide prevention week is *Preventing Suicide: Reaching Out and Saving Lives*. For more information on local events and ways to get involved, visit eachmindmatters.org.
* **Thursday, September 10 is World Suicide Prevention Day**, a global event that invites everyone to join together to work towards the common goal of preventing suicide. Check in on someone you may be concerned about, listen to what they say, how they say it and show them kindness and support. For more information and tips, visit suicideispreventable.org.

On Suicide Prevention

* **Suicide can be prevented** **and people with suicidal thoughts and feelings can be helped**. In addition, many people find that their periods of suicidal feelings are temporary; getting through the immediate crisis can avert suicide attempts. It’s important to know that people who have struggled with thoughts of suicide, and even those who have attempted suicide, can and do recover and go on to lead full and active lives.

On Suicide Prevention Efforts in California:

* Since the passage of the Mental Health Services Act (Prop 63), a landmark initiative passed by voters in 2004, **California has made a significant investment in programs that are intended to prevent suicides, prevent mental illness, promote mental wellness and connect individuals with help before they reach a crisis point**. Funds have been pooled across the state and used in each county to improve the mental health of Californians with strategies that empower everyone from youth to seniors with the tools, technologies, resources and crisis support needed to prevent suicide.
* **Investing in suicide prevention in California will save lives and dollars**. For example, an independent analysis found that just one year of CalMHSA’s funding of the ASIST (Applied Suicide Intervention Skills Training) program is projected to prevent at least 140 deaths and 3,600 suicide attempts over the next three decades.[[1]](#endnote-1) Additionally, for every $1 the state invests in CalMHSA’s suicide prevention program, the state will receive an estimated $1,100 in economic benefits, such as reduced spending on emergency care and increased earnings.[[2]](#endnote-2)
* **California is now leading the nation in the number of people trained in suicide intervention skills**. Since 2012, more than 525 Californians have been certified to train others in ASIST and/or safeTALK, and over 9,000 Californians have been trained in ASIST and/or safeTALK. The ASIST and safeTALK programs instruct gatekeepers who are more likely to come in contact with people at risk for suicide on how to recognize risk factors, take action and link those at risk with appropriate resources.
* **Know the Signs, the suicide prevention initiative of Each Mind Matters: California’s Mental Health Movement**, **has engaged more than one million people** online, empowering them with information to know the warning signs of suicide, find the words to offer help to someone, and reach out to local resources, such as crisis hotlines and support groups that can provide care. Suicide prevention materials in English, Spanish, Chinese, Hmong, Khmer, Korean, Lao, Tagalog, and Vietnamese can be downloaded or ordered at eachmindmatters.org/shop.
* **Californians are now more prepared to help those at risk for suicide.** Research has found that over half of Californians were exposed to Know the Signs messaging and those who had been reported higher levels of confidence to intervene with someone at risk for suicide. The campaign was rated by an expert panel to be aligned with best practices and one of the best media campaigns on the subject.
* **Efforts in California have also focused on strengthening crisis centers with positive results.** Individuals who call an accredited suicide prevention hotline in California have decreased suicidal intent after the call*,* Common Metrics monthly report from April 2014 - April 2015*.*

Understanding the Problem:

*It is important in message delivery to not overemphasize the problem, focus too heavily on suicide statistics or to imply a social norm. The following represents an agreement within our team of the statistics that may be shared, but it is not necessary to include all in every dialogue and/or document. Please choose sparingly and carefully as is appropriate to the conversation, interview or presentation.*

* **Suicide is an international problem and a major public health concern.** Suicide claims more than 800,000 lives worldwide each year.[[3]](#endnote-3) But even that devastating number belies the depth of the problem. For every person who dies, there are many more who think about, plan or attempt suicide. It is estimated that for every completed suicide there are 25 attempts.[[4]](#endnote-4)
* **California communities are not immune to this global tragedy.** More than 3,800 Californians die by suicide each year, which is comparable to the number of residents killed in traffic collisions.[[5]](#endnote-5)Other data suggest that many Californians have attempted suicide or experienced crises. For example, over 16,000 people were hospitalized in one year for self-inflicted injuries in the state.[[6]](#endnote-6) However evidence suggests that many Californians are seeking support. The National Suicide Prevention Lifeline reports that nearly 150,000 calls a year originate in California.[[7]](#endnote-7)
* **Suicide and suicidal behavior affects all ages, genders, races and religions worldwide**, however some populations are disproportionately affected. Nationwide, the highest rates of suicide are found among Caucasian males, adults over age 65, Hispanic female teens, and American Indian/Alaska Native youth. California, like every other state, has seen increases in suicide deaths over the last decade, with the largest increases among middle-aged adults (ages 35 to 64). While certain populations are disproportionately affected by suicide, targeted prevention programs have been shown to decrease the risk of suicide among these populations, including removing access to lethal means, and detection of suicidal risk in primary care settings.
* **Suicide devastates individuals, families and communities.** An estimated 4.8 million Americans are “suicide loss survivors” after the death of a friend, family member, or loved one.[[8]](#endnote-8) For those left behind, the loss of someone to suicide is often painful and unexpected and their grieving is complex with emotions ranging from denial, guilt and anger to confusion, despair and depression. The risk of suicide may increase for these loss survivors. It is important that loss survivors receive the necessary support and understanding for healing to happen.
* **Mental illness is a contributing factor for many people who attempt or complete suicide**. Sadly, stigma about suicide and mental health challenges, lack of access to care, or lack of knowledge about their symptoms prevent too many from seeking the life-saving help that is available. When people at risk are surrounded by supportive communities that encourage help seeking and treatment for mental health concerns, stigma can be overcome and treatment can be sought, which can lead to people being helped and lives saved.

On Everyone’s Role in Suicide Prevention:

* **When someone is experiencing thoughts of suicide, the pain they are feeling is real.** Experts believe that most suicidal individuals do not want to die, but they may not know how to go on living with the pain they are experiencing. While these crises are often temporary, people with thoughts of suicide are unable to see alternatives. Just by staying with the person, acknowledging their pain and helping them seek support, you could save a life.
* **Pain isn’t always obvious.** The warning signs for suicide manifest in different ways. Some signs are more critical, and may indicate an imminent danger. It’s up to us to learn to recognize the warning signs and how to offer support to someone we care about.
* **It is important to take suicidal talk and the warning signs seriously.** While there is no single sign that someone is thinking about suicide, behaviors might include talk about suicide or about feeling trapped, helpless, or hopeless, and withdrawal. Dramatic changes in eating and sleeping habits, reckless behavior and increased use of alcohol and drugs may also be signs.
* **Even surrounded by friends and family, someone experiencing emotional pain can feel isolated.** You may sense something is wrong, but not realize how serious it is.  Trust your instincts. Studies show that people who know the signs of suicide and resources are more likely to take action that could save a life. Visit [www.suicideispreventable.org](http://www.suicideispreventable.org) to know the signs, find the words to offer support to someone you are concerned about and reach out to local resources.
* **You can make a big difference just by showing care and concern to someone who may be vulnerable to suicide.** Asking whether they are okay, listening to what they have to say in a non-judgmental way, and letting them know you care can all have a significant impact. Isolation increases the risk of suicide, and, conversely having strong social connections is protective against it, so being there for someone who has become disconnected can be life-changing.
* **Youth are in a powerful position to stop suicide.** Although 40 to 68 percent of young people experiencing suicidal ideation turn to peers for support, fewer than 25 percent of the peers tell an adult or get the young person to an adult for help.[[9]](#endnote-9) [[10]](#endnote-10)
* **Take the time to learn how to help now, so you’re ready to be there when it matters most.** Never underestimate the power that you have to help save a life. We can all know the signs, find the words and reach out to identify and support those we love who might be thinking about suicide. Get the info and tools you need at suicideispreventable.org.
* **Trained crisis counselors are just a phone call away 24 hours a day, 7 days a week.** If you or someone you know is having thoughts of suicide, or if you need guidance on how to help someone else, please call the National Suicide Prevention Lifeline: 1-800-273-TALK (8255). Calls are answered by the nearest crisis center in California.

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1. Ashwood, J., B. Briscombe, R. Ramchand, E. May, and M. Audrey Burnam, “Analysis of the Benefits and Costs of CalMHSA’s Investment in Applied Suicide Intervention Skills Training (ASIST),” May 2015. <http://www.rand.org/content/dam/rand/pubs/research_reports/RR1100/RR1115/RAND_RR1115.pdf> [↑](#endnote-ref-1)
2. Ibid. [↑](#endnote-ref-2)
3. http://www.who.int/mental\_health/prevention/suicide/suicideprevent/en/ [↑](#endnote-ref-3)
4. American Association of Suicidology, “Suicide in the USA – Based on 2011 Data.” Fact sheet, 2014. As of August 2015: http://www.suicidology.org/Portals/14/docs/Resources/FactSheets/2011/SuicideUSA2014.pdf [↑](#endnote-ref-4)
5. California Department of Public Health, Safe and Active Communities Branch. Report generated from http://epicenter.cdph.ca.gov on: August 8, 2012 [↑](#endnote-ref-5)
6. California Department of Public Health, Safe and Active Communities Branch. Report generated from http://epicenter.cdph.ca.gov on: August 8, 2012 [↑](#endnote-ref-6)
7. National Suicide Prevention Lifeline. California Call Volume Report 2013. [↑](#endnote-ref-7)
8. <http://www.suicidology.org/Portals/14/docs/NSPW/MediaKit2015.pdf> (page 14) [↑](#endnote-ref-8)
9. Collins, R.L., E.C. Wong, E. Roth, J.L. Cerully and J. Marks, “Changes in Mental Illness Stigma in California During the Statewide Stigma and Discrimination Reduction Initiative.” April, 2015.

<http://www.rand.org/content/dam/rand/pubs/research_reports/RR1100/RR1139/RAND_RR1139.pdf> [↑](#endnote-ref-9)
10. Michelmore, L., and Hindley, P. (2012). Help-seeking for suicidal thoughts and self-harm in young people: A systematic review. Suicide and Life-Threatening Behavior, 42(5):507-24. [↑](#endnote-ref-10)