

QPR

For Youth

Ask A Question, Save A Life

QPR

For Youth

Question, **P**ersuade, **R**efer

QPR For Youth

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

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Suicide Myths and Facts

- **Myth** No one can stop a suicide, it is inevitable.
- **Fact** If a young person in a crisis gets the help they need, they will probably never be suicidal again.
- **Myth** Confronting a person about suicide will only make them angry and increase the risk of suicide.
- **Fact** Asking someone directly about suicidal intent lowers anxiety, opens up communication and lowers the risk of an impulsive act.
- **Myth** Only experts can prevent suicide.
- **Fact** Suicide prevention is everybody's business, and anyone can help prevent the tragedy of suicide.

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Myths And Facts About Suicide

- **Myth** Suicidal young people keep their plans to themselves.
- **Fact** Most suicidal people communicate their intent sometime during the week 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 complete 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...

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Myths And Facts About Suicide

- **Myth** If a suicidal youth tells a friend, the friend will access help.
- **Fact** Most young people do not tell an adult.

Good Friends Don't Keep Deadly Secrets!

“Suicide is not about death. Young people who give serious consideration to suicide don’t want to die; they want an end to the incredible emotional pain they feel. . . . Young people don’t recognize that suicide is a permanent solution to a temporary problem.”

-KUTO, Kids Under Twenty-One

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Suicide Clues And Warning Signs

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

Take all signs seriously.

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Strongest Predictors

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

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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 (such and such) doesn’t happen, I’ll kill myself.”

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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.”

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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)
- Chronic truancy, running away
- Perfectionism

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Situational Clues:

- Being expelled from school /fired from job
- Family problems/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 (either their own or within the family)
- Sudden loss of freedom/fear of punishment
- Feeling embarrassed or humiliated in front of peers
- Victim of assault or bullying

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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

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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, phone numbers, counselor's name and any other information that might help

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?”

Q

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 can not 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 you are talking with. It may also imply that you are frightened by the intensity of their feelings.

Similarly, be aware of your own non-verbal clues.

P

PERSUADE

HOW TO PERSUADE A YOUNG PERSON TO STAY ALIVE

- 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

THEN ASK:

- “Will you go with me to get help?”
- “Will you let me help you get help?”
- “Will you promise me not to kill yourself until we’ve found some help?”

**YOUR WILLINGNESS TO LISTEN AND TO
HELP CAN REKINDLE HOPE.**

HOPE MAKES ALL THE DIFFERENCE.

R

REFER

- Suicidal young people often believe they cannot be helped, so you may have to do more.
- The best referral involves taking the person directly to someone who can help.
- The next best referral is getting a commitment from them to accept help, then making the arrangements to get that help.
- The third best referral is to give referral information and try to get a good faith commitment not to complete or attempt suicide.
- If the individual is resistive to help, or if you are still worried about their safety, get additional support.

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 or take the lead.

For Effective QPR

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

For Effective QPR

- **Join a Team.** Offer to work with clergy, therapists, psychiatrists or whomever is going to provide the counseling or treatment.
- **Follow up** with a visit, a phone call or a card, and in whatever way feels comfortable to you, let the person know you care about what happens to them. Caring may save a life.

**WHEN YOU APPLY QPR,
YOU PLANT THE SEEDS
OF HOPE.**

**HOPE HELPS PREVENT
YOUTH SUICIDE.**

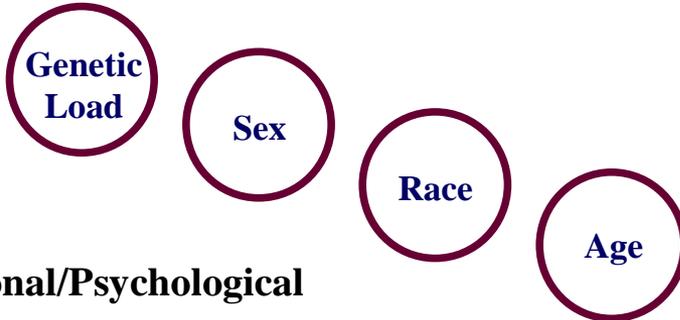


Chern
Daly

The Many Paths to Suicide

Fundamental Risk Factors

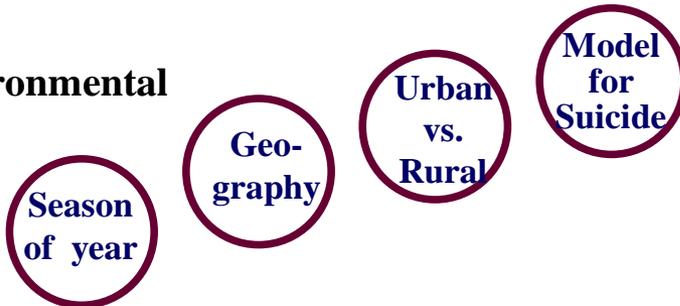
Biological



Personal/Psychological



Environmental



Proximal Risk Factors “Triggers or Final Straws”

Crisis in Relation

Loss of Freedom

Fired/Expelled

Illness

Major Loss

?

Increasing Hopelessness
Contemplation of Suicide
as Solution

WALL OF RESISTANCE

Cause of Death

Poison

Gun

Hanging

Autocide

Jumping

?

- All “Causes” are real.
- Hopelessness is the common pathway.
- Break the chain anywhere = prevention.

Wall of Resistance

Counselor or therapist	Duty to others	Others?	
Good health	Medication Compliance	Fear	
Job Security or Job Skills	Responsibility for children	Support of significant other(s)	
Difficult Access to means	A sense of HOPE	Positive Self-esteem	
Pet(s)	Religious Prohibition	Calm Environment	AA or NA Sponsor
Best Friend(s)	Safety Agreement	Treatment Availability	
-- Sobriety --			

Protective Factors