TEEN SUICIDE PREVENTION
14 - 21 FEB 2021
FREE TEACHERS CONNECT WORKSHOP
Webinar Info

• Please keep your mics on mute
• We want you to be interactive – so post questions or comments in the chat box
• You are welcome to keep your camera on if your network allows
• The webinar will be recorded
• We will share the recording link and copy of the presentations with everyone in 24-48 hours after the Webinar
<table>
<thead>
<tr>
<th>TOPIC</th>
<th>SPEAKER</th>
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| Understanding Teen Depression:  
- Signs & symptoms  
- Difference between a normal mood versus teen depression  
- Assessment tools for teen depression | Dr Frans Korb  
SADAG Board Chairperson  
Psychiatrist  
Psychologist |
| Talking to Learners about Depression  
- How to talk to learners  
- Key Counselling Skills  
- Action Plans for Teachers | Alexa Scher  
Clinical Psychologist |
| Teen Suicide Myths & Language  
Safety Plan & How to get Help | Cassey Chambers  
SADAG |
How to identify the Warning Signs

**TALK**
- talking, writing, drawing or posting online about death/dying/hurting themselves.
- Saying things like “I wish I wasn’t here anymore” or “Everyone would be better off if I was dead”

**BEHAVIOUR**
- withdrawing, drastic change in eating or sleeping habits, no energy,
- agitated, saying goodbye or giving away prized possessions

**MOOD**
- loss of interest, isolating from family and friends, rage, irritability,
- depression or anxiety symptoms

Even if you see 1 warning sign - don’t wait, don’t leave it. Talk, listen & connect to help.
**EVEN IF YOU SEE 1 WARNING SIGN - DON’T WAIT, DON’T LEAVE IT TALK, LISTEN & CONNECT TO HELP**

<table>
<thead>
<tr>
<th>HOW TO TALK TO SOMEONE WHO MAY BE FEELING OR THINKING ABOUT SUICIDE:</th>
<th>HOW TO GET HELP FOR SOMEONE WHO IS SUICIDAL:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• It is safer to ask than not asking at all</td>
<td>• Don’t leave the person alone – offer to get help together</td>
</tr>
<tr>
<td>“I’m really worried about you and I want to help you”</td>
<td>• Thank them for opening up and telling you how they really feel, and that you need to get more help</td>
</tr>
<tr>
<td>“I’ve noticed you have been very down lately, is now a good time to chat more please?”</td>
<td>• Speak to an adult, parent or teacher that you trust to get help asap</td>
</tr>
<tr>
<td>“I’ve noticed you haven’t been yourself lately, are you okay? Let’s talk about it?”</td>
<td>• Get help from a mental health professional as soon as possible (GP, psychiatrist, psychologist, social worker, school counsellor, HOD, Social Worker, nurse, etc)</td>
</tr>
<tr>
<td>“Please talk to me, I want to help.”</td>
<td>• Call the Suicide Helpline (0800 567 567) for help, suggestions and resources</td>
</tr>
<tr>
<td>Remember, their feelings matter – and they feel very real and scary</td>
<td>(remember, you are not alone in this, you don’t have to fix the problem – there is help and support!)</td>
</tr>
<tr>
<td>Listen, ask question and try to understand what they are dealing with</td>
<td>If the person has tried to hurt themselves or take their own life, get them to the nearest hospital urgently</td>
</tr>
<tr>
<td>Ask them directly if they have any thoughts or plans of suicide</td>
<td></td>
</tr>
</tbody>
</table>

**IMPORTANT CONTACT DETAILS:**

<table>
<thead>
<tr>
<th>SADAG Suicide Helpline</th>
<th>Cipla Mental Health Helpline</th>
<th>Website</th>
<th>WhatsApp (9am - 4pm)</th>
</tr>
</thead>
<tbody>
<tr>
<td>0800 567 567</td>
<td>0800 456 789</td>
<td><a href="http://www.sadag.org">www.sadag.org</a></td>
<td>076 882 2775</td>
</tr>
<tr>
<td>SMS</td>
<td>31393</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
SAD PERSONS
A Suicide Risk Assessment Tool

- **SEX** - Males kill themselves four times more often than females
- **AGE** - Certain age groups are more at risk (in SA 15-34 yrs)
- **DEPRESSION** - Depressed persons significantly more at risk
- **PREVIOUS ATTEMPT** - More likely to attempt in the future
- **ETHANOL** - Alcohol abuse very often implicated in suicide
- **RATIONAL THOUGHT** - More prone to suicide if psychotic
- **SOCIAL NETWORK** - Less social support, greater risk
- **ORGANISED PLAN** - Greater risk if plans are organized
- **NO SPOUSE** - Greater risk of suicide if there is no spouse
- **SICKNESS** - A chronic physical sickness makes one more prone
## SUICIDE RISK ASSESSMENT

**SAD PERSONS**

<table>
<thead>
<tr>
<th>RISK FACTOR</th>
<th>CRITERIA</th>
<th>SCORE</th>
</tr>
</thead>
<tbody>
<tr>
<td>S</td>
<td>Sex</td>
<td>1</td>
</tr>
<tr>
<td>A</td>
<td>Age: &lt;20 years; &gt; 45 years</td>
<td>1</td>
</tr>
<tr>
<td>D</td>
<td>Depression: Major (e.g. depressed mood)</td>
<td>2</td>
</tr>
<tr>
<td>P</td>
<td>Psychiatric History: Previous attempt</td>
<td>1</td>
</tr>
<tr>
<td>E</td>
<td>Excessive Drug Use: Ethanol or other drug use</td>
<td>1</td>
</tr>
<tr>
<td>R</td>
<td>Rationality Loss: Psychosis; severe depression</td>
<td>2</td>
</tr>
<tr>
<td>S</td>
<td>Separated: Loss of spouse or other single</td>
<td>1</td>
</tr>
<tr>
<td>O</td>
<td>Organised Plan: Determined suicide plan</td>
<td>2</td>
</tr>
<tr>
<td>N</td>
<td>No Supports: No community back-up; isolated</td>
<td>1</td>
</tr>
<tr>
<td>S</td>
<td>Sickness: Chronic Illness</td>
<td>1</td>
</tr>
</tbody>
</table>
How the Scoring Works?

• **Score 0 - 5**: closely monitored by mental health professional (outpatient management, action plan, follow up plan, close monitoring to ensure it doesn’t escalate, etc.)

• **Score 6 - 8**: psychiatric evaluation or consultation (enough risk for hospitalisation)

• **More than 8**: emergency hospitalisation or inpatient consultation
# Suicide Language Guide

<table>
<thead>
<tr>
<th>DO SAY</th>
<th>DON'T SAY</th>
<th>WHY?</th>
</tr>
</thead>
<tbody>
<tr>
<td>&quot;died by suicide&quot;</td>
<td>&quot;successful suicide&quot;</td>
<td>Because it suggests suicide is a desired outcome. No one wins if someone dies by suicide.</td>
</tr>
<tr>
<td>&quot;took their own life&quot;</td>
<td>&quot;unsuccessful suicide&quot;</td>
<td></td>
</tr>
<tr>
<td>&quot;took their own life&quot;</td>
<td>&quot;committed suicide&quot;</td>
<td>Because it associates suicide with crime</td>
</tr>
<tr>
<td>&quot;died by suicide&quot;</td>
<td>&quot;commit suicide&quot;</td>
<td></td>
</tr>
<tr>
<td>&quot;increasing rates&quot;</td>
<td>&quot;suicide epidemic&quot;</td>
<td>Because it sensationalises suicide</td>
</tr>
<tr>
<td>&quot;higher rates&quot;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>&quot;suicide attempt&quot;</td>
<td>&quot;failed suicide&quot;</td>
<td>It means that someone hasn’t died, they are still alive and there is an opportunity to get them help. So not dying by suicide is not a fail</td>
</tr>
<tr>
<td>&quot;non-fatal attempt&quot;</td>
<td>&quot;suicide bid&quot;</td>
<td></td>
</tr>
<tr>
<td>refrain from using the term</td>
<td>&quot;political suicide&quot;</td>
<td>Because it is an inaccurate use of the term 'suicide'</td>
</tr>
<tr>
<td>suicide out of context</td>
<td>&quot;suicide mission&quot;</td>
<td></td>
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</tbody>
</table>

**Suicide Crisis Helpline: 0800 567 567**
DEBUNKING COMMON SUICIDE MYTHS

MYTH #1 - People who talk about suicide really won't do it.

FACT: In many cases, teens who have thoughts of suicide or who have died by suicide have given some kind of warning sign through their behaviour or something they have said. All suicide mention or threats should be taken seriously - it could be a way for the person to let you know that something serious is wrong and they need help.

MYTH #2 - Talking about suicide makes people more likely to kill themselves.

FACT: Research shows that talking about suicide with a young person does not cause them to have thoughts of suicide or kill themselves. But not talking about it can lead to thoughts of suicide turning into actions. Talking about suicide and depression creates an opportunity to discuss feelings and thoughts that might have otherwise would remain hidden. Most teens who are thinking about suicide are actually honest and relieved when asked direct questions about their suicidal thoughts.
DEBUNKING COMMON SUICIDE MYTHS

Myth #3 - People who attempt suicide are just trying to get attention.

FACT: All threats or mentions of suicide should be taken seriously and professional help is needed. Threatening suicide may be a call for help, but something must be wrong for someone to threaten suicide in order to get attention or help.

Myth #4 - Most suicide attempts occur without warning signs.

FACT: Most teens who are suicidal or who have died by suicide have given some signs either physically or verbally. It might not always be direct, so it is important to know how to identify the warning signs and seek help.
DEBUNKING COMMON SUICIDE MYTHS

Myths #5 - Only teens who are depressed attempt suicide.

FACT: Teens and children do not have to be clinically depressed to have feelings of harming themselves or suicide. Depression is the leading cause of suicide, however, any teen that is feeling low or severely sad for a short time period could develop thoughts of suicide. And usually it is a combination of problems that lead to a teen thinking that suicide is the only way to end their problems.

Myths #6 - Only a certain type of person kills him or herself.

FACT: Suicide does not discriminate based on gender, race, upbringing, education level, ethnicity or socio-economic factors. While some factors do contribute to a higher risk for suicide and suicide attempts, all people are susceptible to having thoughts and feelings of suicide if faced with problems that they feel are too much.
DEBUNKING COMMON SUICIDE MYTHS

Myth #7 - Suicide is not preventable.

FACT: People may think that if someone wants to end their life, nothing can be done to prevent it. This is untrue – by knowing how to identify warning signs and getting professional help, it can actually prevent suicides. Suicide is preventable – not inevitable.

Myth #8 - People who die by suicide are selfish

Fact: Typically, people do not die by suicide because they do not want to live—people die by suicide because they want to end their suffering and pain. These individuals are suffering so deeply that they feel helpless and hopeless. Individuals who experience suicidal ideations do not do so by choice. They are not simply, “thinking of themselves,” but rather they are going through a very serious mental health symptom due to either mental illness or a difficult life situation.
Follow these Steps

- Ask
- Listen
- Connect
HOD/ LO Teacher or Counsellor

Parents or Guardian (adult they trust)

Hospital or Clinic

Psychiatrist or GP

Psychologist
Social Worker
Counsellor

SADAG Helpline

Another Teacher to assist

CONNECT to help together
DOES YOUR SCHOOL HAVE AN EMERGENCY CONTACT LIST?

- **DBE District Coordinator:**
  - Name:
  - Number:
  - Email:

- **SAPS:**
  - Captain:
  - Social Worker:
  - CPF:
  - Trauma Counsellor:

- **Local NGO’s or Counselling centres:**
  - 
  - 

- **Nearest Pharmacy:**
  - Name:
  - Number:
  - Email:

- **Nearest Hospital:**
  - Casualty:
  - Psychiatric Ward:
  - Psychologist:
  - Social Worker:

- **Nearest Clinic:**
  - Manager:
  - Sister:

- **Local GP:**
  - Name:
  - Number:

- **Psychologists:**

- **Psychiatrists:**

- **Social Workers:**
  - DSD: 0800 220 250

- **Helplines:**
  - Childline:
  - SADAG:
  - GBV:
  - Subs Abuse:
  - Ambulance:
  - Child Welfare:
  - Missing Children:

- **Nearest Hospital:**

- **Local NGO’s or Counselling centres:**

- **SAPS:**

- **Local GP:**

- **Psychologists:**

- **Psychiatrists:**

- **Social Workers:**
  - DSD: 0800 220 250
WHEN SOMEONE IS THINKING ABOUT SUICIDE

1. ACT ON YOUR OBSERVATIONS
   If someone seems "not quite right" or they talk about death or suicide, take it seriously.

2. MANAGE YOUR HESITATION
   You can help.
   It is better to ask and be mistaken than not to say anything.

3. PREPARE IN ADVANCE
   If you can, plan to talk in private and in person.
   Write down your concerns so it’s easier to talk about.

4. START THE CONVERSATION
   You can start by saying that you’re worried, and what’s got you concerned.
   "I’m really worried about you, I’ve noticed..."

5. LISTEN, DON’T JUDGE
   Let them express their feelings without interrupting.
   Give support and understanding.

6. GET THEM TALKING
   Ask them about their situation and feelings, without trying to fix anything.

7. ASK THEM ABOUT SUICIDE DIRECTLY
   To find out if they’re suicidal, build the connection then ask them directly.
   "Do you think about suicide or ending your life?"

8. ASK ABOUT THEIR PLANS
   Find out if they’re in immediate danger.
   Ask if they’ve thought about how or when.

9. FIND OUT THE RISK
   Ask about past suicide attempts or any recent loss or life crisis.

10. KEEP THEM SAFE
    If they are at risk now, call SADAG or a mental health professional. Stay with them.
    Get them to hand over anything deadly.

11. ENCOURAGE THEM TO GET HELP
    Help them to think of professionals, friends or family who might be able to help.

12. TAKE CARE OF YOURSELF
    Supporting someone can be emotional for you.
    Get help for yourself if you need it.

www.sadag.org
Suicide Helpline: 0800 567 567
SMS 31393
MY SAFETY SUPPORT:
If things get too much and I can’t distract myself with self help in my Safety Plan, these people can be contacted and I know they will be there for me

Name: __________________________________________
Contact Number: _______________________________

Name: __________________________________________
Contact Number: _______________________________

Name: __________________________________________
Contact Number: _______________________________

MY SAFETY:
If I don’t feel safe now and I feel at risk, how can I get myself into a safer environment?

1. __________________________________________
2. __________________________________________
3. __________________________________________
4. __________________________________________
5. __________________________________________

MY DISTRACTIONS:
If I am having bad thoughts or I feel very down, here is a list of things that can distract me

1. __________________________________________
2. __________________________________________
3. __________________________________________
4. __________________________________________
5. __________________________________________

MY STAY SAFE RULES:
My thoughts may have subsided, but it’s important I stay with someone for now to give me support. These people will help

1. __________________________________________
2. __________________________________________
3. __________________________________________
4. __________________________________________
5. __________________________________________
MY VISUAL PROMPTS

Here are some visual prompts (pictures, drawings, art, song lyrics, poems, colours, quotes) to help keep me calm
A LIST OF MY REASONS FOR LIVING

It will refer to this list when I'm feeling down or suicidal, it will remind me to focus on positive things that I may have forgotten, it will give me hope and remind me I do have purpose and I do matter.
Remember…

If after trying all of the above distractions and it hasn’t helped you, and you still feel down or have thoughts of suicide, please call someone from your contact list and tell them you need help.

Or call a counsellor at SADAG

0800 567 567 (24 hours, 7 days a week)

SMS 31393 and a counsellor will call you back

There is always help – you are not alone!
Resources for Teachers & Educators

• Brochures and posters
• SADAG Website (www.sadag.org) – online toolkit
• Helpful apps and website (eg. CALM, Headspace, etc.)
• Previous webinars and manuals
• Helpful Videos
  • Understanding Depression Video with Zamo Mbele
  • Identifying Symptoms, how to talk to a suicidal friend & what to do to get help with Dr Sindi van Zyl
  • Previous Teachers Webinar on Suicide Shouldn’t be a Secret (2020)
  • Helpful tips for Parents on how to help a suicidal teen
**SUICIDE PREVENTION**

# LetsTalk

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**Myth**

Myth: Talking about suicide can be seen as telling a suicidal person to take their own life.

**Fact**

It is not easy to talk about suicide but talking about it can help prevent suicide. Giving a person time to think again and at times even give them hope that there is help.

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**Myth**

People who talk about suicide do not mean to do it.

**Fact**

People who talk about suicide may be reaching out for help or support. Many people thinking about suicide are feeling very sad or lost hope and may feel that there is no other way out.

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# ACT

ASK. CARE. TREAT

#StopSuicide

0800 567 567

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The South African Depression & Anxiety Group

www.sadag.org
@TheSADAG
More Contact Details

Petri Greef
help@sadag.org

Cassey Chambers
office@anxiety.org.za

www.sadag.org
www.thoughtsfirst.com
www.nami.org
www.beyondblue.org.au
www.mind.org.uk

Calm app
MoodFit
Headspace - meditation
Griefshare
Psych Central
PUT ON YOUR OWN MASK FIRST
Coronavirus: 10 ways to look after your mental health

- Rest
- Reach out
- Set Goals
- Less News
- Exercise
- Communicate
- Balance
- Keep a routine
- Get Sunlight
- Maintain a diet
10 ways to look after your mental health

- Talk about your feelings
- Keep active
- Eat well
- Take a break
- Drink sensibly
- Keep in touch
- Do something you’re good at
- Accept who you are
- Ask for help
- Care for others
Tips for Teachers

- Know the warning signs
- Easy access to list of resources or contact details (e.g. Staffroom, office, classroom, etc.)
- Take every threat or mention seriously
- You are not the counsellor/therapist
- Your role is to facilitate the help → transfer of responsibility
  - Notify fellow teacher, HOD or school counsellor
  - Refer to resources
  - Notify parents
  - Access resources available (district DBE coordinator, counsellor or social workers)
  - Call SADAG for help, resources & action plan
- Check-in with learner & school counsellor for progress
- Follow up on action plan/treatment plan
Tips for Teachers

• Develop School Support Team
  o Identify key group of teachers who can assist in an emergency
  o Make sure teachers & learners know who is part of that Team

• Teacher Buddy System
  o Someone to chat to learner
  o Someone to notify School Support Team, school counsellor, HOD, parents or DBE District Coordinator
  o Someone to action an emergency if urgent help is needed (ambulance, clinic, hospital, etc.)
Does your school have an Emergency Contact List?

**DBE District Coordinator:**
- Name:
- Number:
- Email:

**Nearest Pharmacy:**
- Name:
- Number:

**DBE District Social Worker:**
- Name:
- Number:
- Email:

**Nearest Hospital:**
- Casualty:
- Psychiatric Ward:
- Psychologist:
- Social Worker:

**Nearest Clinic:**
- Manager:
- Sister:

**Local GP:**
- Name:
- Number:

**SAPS:**
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- -

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**Social Workers:**
- -

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**Helplines:**
- Childline:
- SADAG:
- GBV:
- Subs Abuse:
- Ambulance:
- Child Welfare:
- Missing Children:


**Local NGO’s or Counselling centres:**
- -
- -
Helping at-risk or suicidal learner

- Remain calm
- Ask the learner directly if he or she is thinking about suicide
e.g. "Are you thinking of suicide?"
  “Have you had thoughts of hurting yourself?"
- Focus on your concern for their well-being
e.g. “I am really worried about you…”
  “I can see that you have been really down and I am
  worried about you”
- Listen
- Reassure them that there is help and they will not feel like this forever
- Do not judge
- Provide constant supervision - Do not leave the learner alone
- Remove means for self harm
What to say to a depressed or suicidal learner

- I’m worried about you...

- Is everything okay? I have noticed that you have been very down lately, can we talk about it?

- I have noticed that you haven't been yourself lately, how are you really doing?

- I’ve seen that you have been really sad lately, what’s been happening to make you so sad?
What to say to a depressed or suicidal learner

• I really want to help you and get you the help you need, can we do it together?

• How you feeling is pretty serious and you need urgent help, who can we talk to first? Your parents or can we speak to xxxx (HOD/School counsellors)?

• I am not leaving you, I am just getting some help but I’m going to be right back