

# ST. GREGORY THE GREAT ACADEMY



Welcome  
Glad you're here!

# MERCER COUNTY

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One death is too many.

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Suicide remains the third leading cause of death  
for New Jersey youth between the ages of 10  
and 24.

*New Jersey Youth Suicide Report*  
2016

# IMPORTANCE OF CARING ADULTS

Typically, when a death happens, caring adults step in provide care and comfort. We do our best to offer an explanation and advice which will soothe the surviving children.

Family and friends gather to offer solace, assurance and support.

# AN IMPORTANT DISTINCTION

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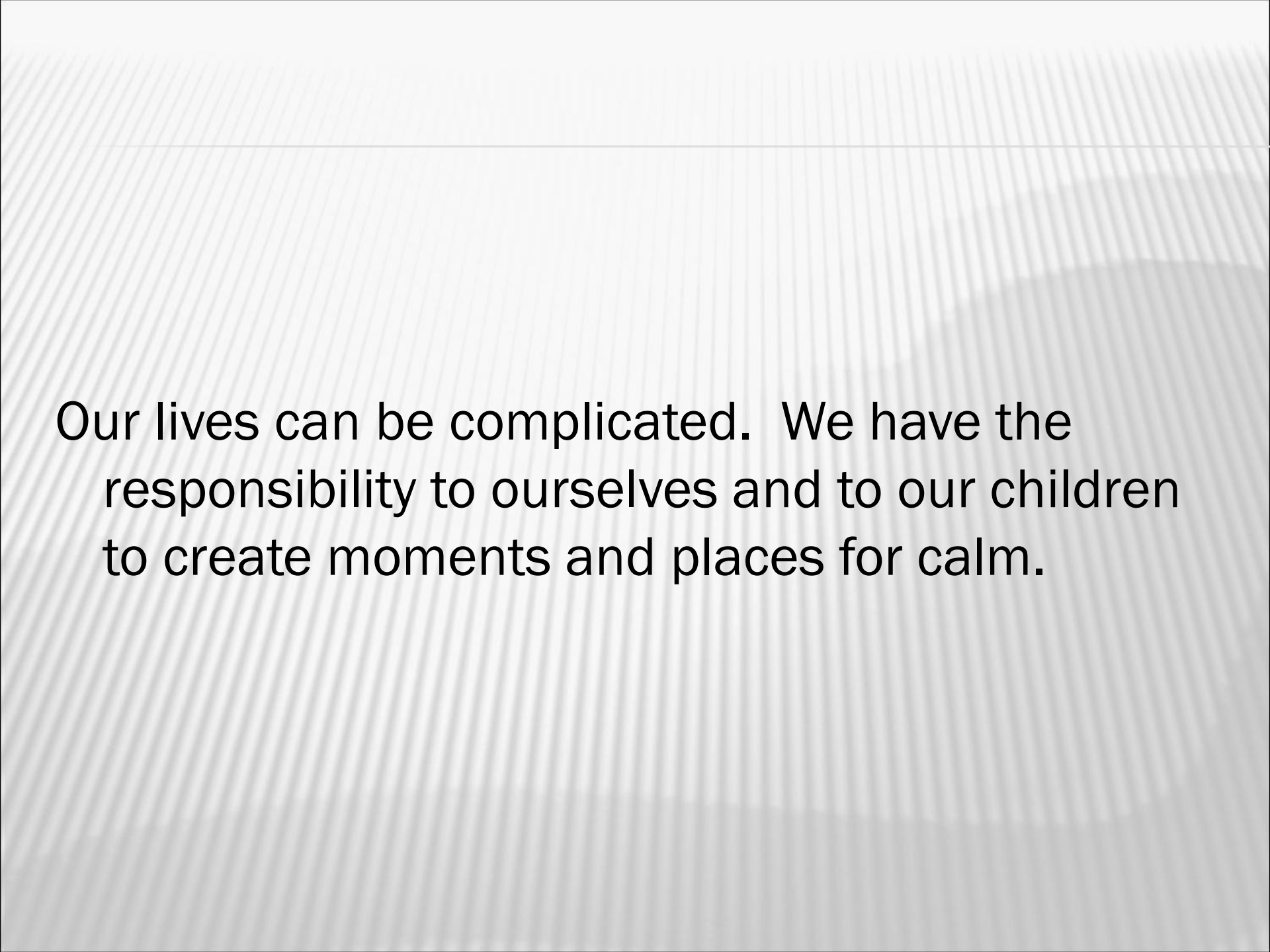
With deaths such as accidents and illness, we are likely to provide direct support to the survivors by acknowledging their loss and providing support.

With a death by suicide, however, the open support may not be as forthcoming because of the discomfort and stigma associated with suicide.

# TONIGHT'S GOALS

1. Increase understanding of:
  - Problem of youth suicide
  - Suicide risk factors
  - Suicide Warning Signs
  - Treatment and prevention of suicidal behavior in adolescents
2. Increase knowledge of warning signs of youth suicide so those who live and work with teens are better prepared to identify and refer at-risk students





Our lives can be complicated. We have the responsibility to ourselves and to our children to create moments and places for calm.



We know we cannot continue to push ahead day after day without giving thought to our personal wellbeing.



We know that the stresses of life sometimes become TOXIC stresses and affect our physical and emotional selves.



We know that at times, our children pay a price  
for all of this.

# **WELLNESS AND WELL BEING**

Feeling Connected  
Being Good Enough  
Finding Sanctuary

ST. GREGORY THE GREAT ACADEMY  
DECEMBER 12, 2017

George Scott, EdS, LMFT

# CORE PRINCIPLES

- ✖ Suicide is a **public health** problem.
- ✖ Helping survivors **deal with the loss and grief in an appropriate way** is important for everyone.
- ✖ Taking **the right action** after a suicide can be prevention for future suicides.



# CORE PRINCIPLES

- ✦ **Suicide prevention extends far beyond youth, into the entire lifespan.**
- ✦ **Education and connections** between individuals and systems will help in post-vention and prevention efforts.

# THE IMPLICATIONS OF NOT ADDRESSING SUICIDE



- ✖ Survivors of suicide loss feel isolated, blamed.
- ✖ People who were impacted may not seek help and counseling that would be beneficial.
- ✖ People who are vulnerable may be at greater risk.
- ✖ Facts may be replaced by rumor and speculation.
- ✖ The stigma of suicide reinforces the silence around suicide.

**Positive Action:** Acknowledging that the death is a suicide promotes healing and minimizes risk.

My sincere thanks to the administration of the St. Gregory the Great Academy for demonstrating the courage to offer parents and others an understanding of suicide loss...

My sincere thanks to the administration of the St. Gregory the Great Academy for demonstrating the courage to offer parents and others an understanding of suicide loss...

and what can be done to reduce the risk of other suicide attempts, and possible deaths.

Let's begin here...

**IN THE ABSENCE OF UNDERSTANDING, HUMAN  
BEINGS SUFFER...AND SOMETIMES DIE:**

# **IN THE ABSENCE OF UNDERSTANDING, HUMAN BEINGS SUFFER...AND SOMETIMES DIE:**

- ✖ Ingesting lead

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- ✖ Excessive sugar in our diet

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- ✖ Ingesting lead
- ✖ Using tobacco
- ✖ Inhaling asbestos
- ✖ Excessive sugar in our diet
- ✖ **Experiencing traumatic events AND absorbing TOXIC stress**

We are told..."What doesn't kill you makes you stronger."

**RIGHT??**

**WRONG!!!!**

Actually cutting edge research tells us that the,

**Early, Chronic and Unpredictable** stressors we  
face as children

shape our biology in ways that predetermine our  
adolescent and adult emotional and physical  
health,

and our behavior at home and at school.

# ARE ANY OF THESE BEHAVIORS FAMILIAR? (IN YOURSELF OR OTHERS?)

- Irritability, anger, hostility, self-injury
- Extreme sensitivity to rejection or failure
- Frequent complaints of physical illness
- Frequent absences/tardiness to school or work
- Decrease in school or work performance

# OR THESE?

- Temper outbursts and blaming
- Bullying or intimidating
- Aggression and physical cruelty
- Isolation
- Use of drugs and alcohol (to ease the pain)



These behaviors serve as Red Flags that let us know to stop, and pay more attention to ourselves, our partners and to our children.

What happens in life, that some of our children  
will grow up to appear like this...











While other children grow up like this...



× **Feeling sad and disconnected**





**Unsure how to resolve hurt feelings**



**Unable to manage intense fear and fright**



Not knowing what to do with the anger.





**Overwhelmed by relationships at home and at school.**



**Feeling isolated and disconnected**

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What has happened to so many of our  
children?

**WHY DO TOO MANY WIND UP HERE...**



# **WHY DO TOO MANY WIND UP HERE...**

- **drinking and drugging to numb the pain**



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- **inflicting harm on others**



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- cutting or burning to relieve the hurt
- failing in spite of immense potential
- isolating and avoiding
- inflicting harm on others
- wanting and trying to end their life
- dying



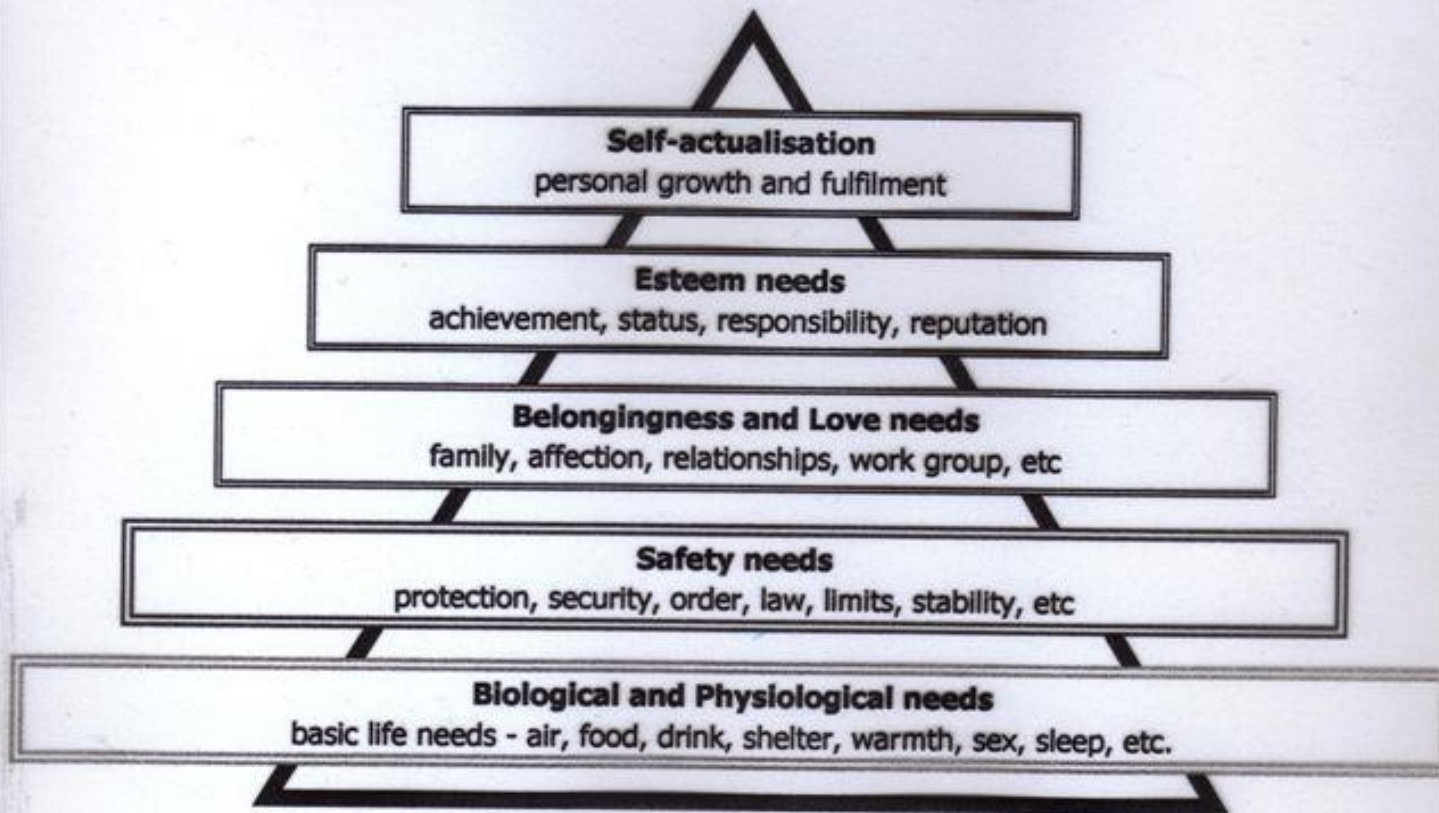
# TRAUMATIC EVENTS

- ✖ Neglect
- ✖ Emotional, physical and sexual abuse
- ✖ Domestic Violence
- ✖ Addictions in the family
- ✖ Harsh and demeaning language toward others
- ✖ Exposure to suicide attempts and deaths
- ✖ Lack of appropriate supervision
- ✖ Being a bully and being bullied

- So what's the secret?
- How do our children get to be the best they can be?
- What is that we can do, to support them as they make their way...**to the top?**



## Maslow's Hierarchy of Needs (original five-stage model)



© alan chapman 2001-4, based on Maslow's Hierarchy of Needs

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## **EMOTIONAL SAFETY NEEDS**

Security, protection, stability, predictability

## **BELONGING AND LOVE NEEDS**

Family, Affection, Relationships, Hugs

# WHAT CAN GET IN THE WAY?

→ Living in a chaotic family, neighborhood or school

- Pervasive anger and rage
- Addictions, and abuse of alcohol and drugs
- Violence toward others, especially mom
- Feeling afraid and not feeling important
- Untreated mental health concerns
- Sexual, physical, emotional abuse
- Absence of a caring adult for protection
- Suicidal thinking, attempts

# **SAFETY FOR OUR CHILDREN MEANS**

- 1. Creating a safe classroom/home physically and emotionally**
- 2. Nurturing attachments**
- 3. Avoiding shame and embarrassment**
- 4. Avoiding negative judgment and harsh language**
- 5. Being predictable**
- 6. Affirming the value of the children**
- 7. Never giving up**
- 8. Always believing change is possible**

“Children who are more resilient after facing adversity often had an important, reliable adult to turn to in their youth;

a grown-up who stepped in and helped them understand that what was happening wasn't about them and wasn't their fault.”

(**Childhood Disrupted**, Donna Jackson Nakazawa)



# FACING THE FACTS

## Suicide is:

**2<sup>nd</sup>** leading cause of death among **college students**.

**2<sup>nd</sup>** leading cause of death for people **aged 25-34**.

**2<sup>nd</sup>** leading cause of death for people **aged 10-24**.

**4<sup>th</sup>** leading cause for people aged of **18 and 65**.

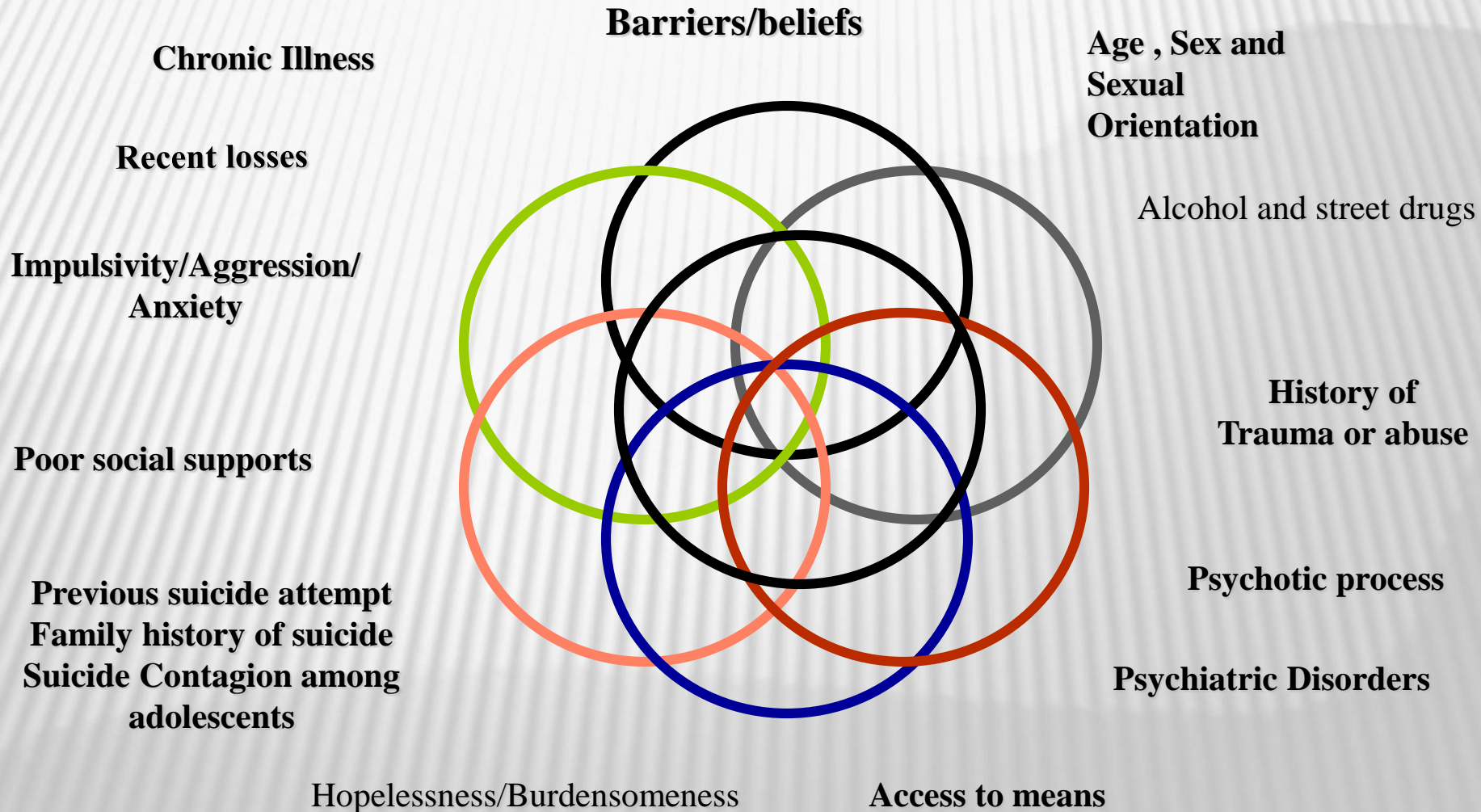
# KEY RISK FACTORS- TEEN SUICIDE

- **Unrecognized/untreated mental health problems**
  - Mental illness in >90% of cases of suicide
    - Major depression disorder
    - Anxiety disorders
    - Alcohol/drug abuse
    - Conduct disorder

# OTHER SUICIDE RISK FACTORS

- Impulsivity
- Family history of suicide or mental illness
- Childhood physical or sexual abuse
- Exposure to suicide, esp. peers or role models
- Social isolation, lack of social support
- Access to lethal means

# SUICIDE RISK FACTORS



# INCREASED RISK FACTORS FOR SUICIDE

<i>Compared to the general population, individuals with a history of...</i>	<i>Have a suicide risk that is...</i>
<b>Prior Suicide Attempt</b>	Almost 40 times greater than the expected rate
<b>Major Depression</b>	20 times greater than the expected rate
<b>Mixed Drug Abuse</b>	19 times greater than the expected rate
<b>Bipolar Disorder</b>	15 times greater than the expected rate
<b>Schizophrenia</b>	Almost 9 times greater than the expected rate
<b>Alcohol Abuse</b>	Almost 6 times greater than the expected rate

\*Note: The mental health issues above represent a smaller subset of the larger US population. It is important to consider only that there is an **elevated risk** for these mental health/substance abuse issues.

# FOCUS ON TEEN DEPRESSION

- Untreated depression is responsible for more suicide deaths than any other single risk factor.
- Depression can also negatively impact academic performance and social development.
- An estimated 8-12% of high-school aged youth will suffer from clinical depression during a given year.
- Only one out of every three adolescents with depression gets help.



# WARNING SIGNS OF SUICIDE

People who kill themselves exhibit one or more warning signs, either through what they say or what they do.

We as community members and leaders can be part of a SAFETY NET.

- Listen to others' **words**
- Notice **behaviors**, especially change in behavior
- Be sensitive to **mood**, especially change from baseline

# **TALK: SUICIDE WARNING SIGNS**

Listen for talk about:

- Killing themselves
- Having no reason to live
- Being a burden to others
- Feeling trapped
- Feeling ashamed or humiliated
- Unbearable pain

# **BEHAVIOR: SUICIDE WARNING SIGNS**

When a behavior is new or has increased, especially if it's related to a painful event, loss, or change= Warning Sign

- Increased use of alcohol or drugs
- Looking for a way to kill themselves, such as searching online for materials or means
- Acting recklessly
- Withdrawing from activities

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-Isolating from family and friends

-Sleeping too much or too little

-Visiting or calling people to say  
goodbye

-Giving away prized possessions

-Aggression

# **MOOD: SUICIDE WARNING SIGNS**

People who are at risk for suicide often display one or more of the following moods.

- Depression
- Loss of interest
- Rage
- Irritability
- Humiliation
- Anxiety
- Impulsivity

# KEY CONCEPTS

- Suicide stems from multiple factors coming together.
- Mental health distress is a key risk factor and often missed.
- Life stressors can play a precipitating role in suicidal behaviors, but not in isolation.
- 
- Suicide is not a single cause-effect phenomenon.



# PERFECT PARENTING??? WHAT'S THAT??

A good childhood or a bad childhood doesn't hang on a single moment or even a string of moments.

“...there is no such thing as perfect parenting”...

(Dr. Daniel Siegle)

# PERFECT PARENTING??? WHAT'S THAT??

To continually chastise and blame yourself for your past errors and mis-steps in parenting, keeps you focused on your own “stuff”, and keeps you out of relationship with your children.

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It's never too late to make changes and move toward greater personal health and harmony.

# PERFECT PARENTING??? WHAT'S THAT??

... living with supportive, compassionate and loving adults.

“With someone to lean on, and with love, the brain can recover from what might otherwise be damaging effects.”

(Center on the Developing Child; Jack Shonkoff)

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2. Understand that childhood's chronic challenges are different than childhood's chronic stresses.
3. Offer “facetime” with your child, without a “yuk” face, using a soothing eye gaze.

# WHAT IS A PARENT TO DO?

4. If you lose your temper, apologize—Right Away!
5. Validate (not condone) and normalize all of their emotions.
6. Strengthen attachments

# WHAT IS A PARENT TO DO?

7. Amplify the good feelings.
8. Use the incredible power of the 20 second hug.
9. Make what's happening a safe and open conversation.
10. Consider how to use mindfulness

# WHAT ELSE CAN YOU DO?

- Engage your children in regular conversations (not interrogations) about school, friends, and how things are going in their lives;
- Share your worries and concerns; let your children know you're thinking about their well being;
- Remind your children they are important and you love them. Tell them again.

# WHEN YOU ARE CONCERNED...

- Tell your child, and your spouse/partner you are concerned...
- Call the school counselor for advice...
- Ask for the names of private counselors and agencies, and then make an appointment...
- Speak with your child's physician, express your worries and concerns...
- If your "gut feeling" keeps you concerned, don't ignore the feeling.



# WHO IS YOUR SUPPORT TEAM?

We can't do this alone. Often it requires us to partner with others who we TRUST. Consider creating a support team to include:

- School Counselors

- School Child Study Team Members

- Local YMCA to help with health

- Pastors, priests, rabbi, imam

- Private Therapist

# HAVING ACCESS TO OTHER HELPERS

What can you do? Who can you call?

NJ Hopeline      1-855-654-6735

2<sup>nd</sup> Floor Helpline    888-222-2228

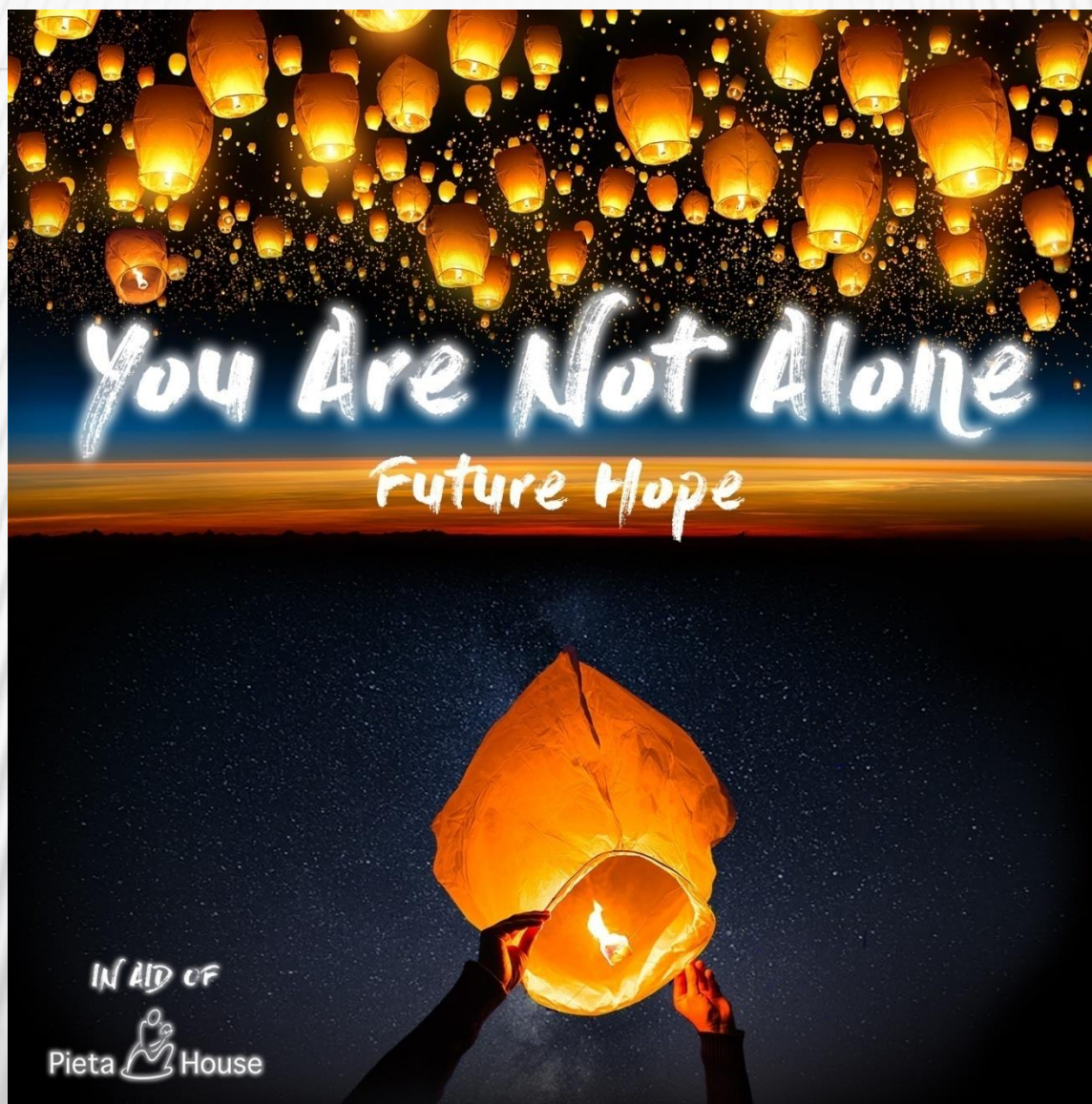
Talk and TEXT

You do not have to be alone in this.

It is never too late to make a difference in the life of your child. Never!!

# PRACTICE AND ROLE MODEL SELF-CARE

- ✖ Get plenty of rest.
- ✖ Maintain proper diet and nutrition.
- ✖ Drink plenty of water.
- ✖ Exercise.
- ✖ Use spiritual practices and/or relaxation skills.
- ✖ Seek out supportive people.
- ✖ Avoid use of alcohol, caffeine, and other substances.
- ✖ Ask for help.



IN AID OF  
Pieta  House





Thank you for being part of this!!

Just being here shows that you care.



# QUESTIONS

