SUICIDE PREVENTION AND AWARENESS

For Individuals with ASD

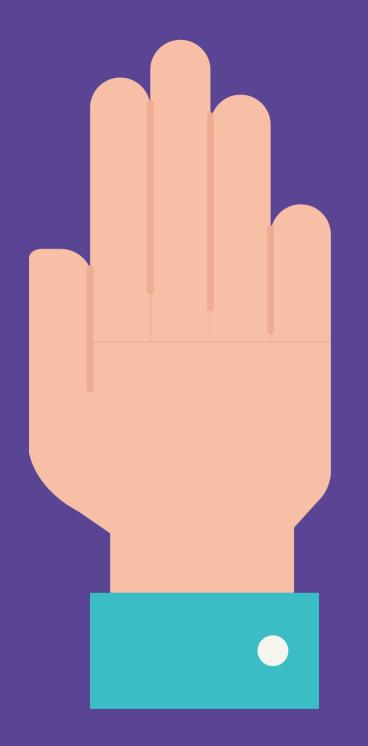
Lauren Stallings, MS, LMFT



TODAY'S AGENDA

- REVIEW THE CURRENT STATISTICS
- KNOW THE SIGNS
- RISK FACTORS FOR ASD
- HOW TO TALK TO YOUR CHILD ABOUT SUICIDE
- WHERE TO GO TO GET HELP





TALKING ABOUT SUICIDE CAN BE DIFFICULT

01

02 We will save time at the end for any questions you may have

Please take time for yourself during this call as needed.

CURRENT STATISTICS AMERICAN FOUNDATION FOR SUICIDE PREVENTION

- SUICIDE IS THE SECOND LEADING CAUSE OF DEATH FOR AGES 10-34
- SUICIDE OCCURS IN ALL DEMOGRAPHIC GROUPS-RATE DIFFERENCES DEPENDING ON AGE, GENDER, ETHNICITY AND RACE
- FEMALES ATTEMPTED ALMOST TWICE AS OFTEN AS MALES (11% VS. 6.6%)
- MALES HAVE HIGHER COMPLETION RATES
- 8.9% OF YOUTH IN GRADES 9-12 REPORTED THAT THEY HAD MADE AT LEAST ONE SUICIDE ATTEMPT IN THE PAST 12 MONTHS CITED FROM HTTPS://AFSP.ORG/SUICIDE-STATISTICS



KNOW THE SIGNS

4 OUT OF 5 ATTEMPTS WILL SHOW SIGNS BEFORE

SUICIDE IS PREVENTABLE

AWARENESS COULD PREVENT AN ATTEMPT/COMPLETION





KNOW THE SIGNS SUICIDEISSPREVENTABLE.ORG

BEHAVIORAL

MOOD

STATEMENTS

Withdrawl, loss interest, neglect in personal appearance, changes in sleep, changes in eating, substance abuse, giving away personal belongings, reckless behavior

Sudden change in mood (elevated or depressed), personality change. In children can appear as anger or aggitation

Any verbal or written statements of wanting to harm self or wishing they were not here anymore, statements of wanting to complete suicide, can include social media posts and statements written in schoolwork assignments.

LOOK AT THE EXAMPLES





John has recently broken up with a girlfriend. He has withdrawn to his bedroom and told a friend he doesn't feel like living anymore.



Beth has been bullied at school for the past few years. She just posted on social media that she doesn't know if she can take this anymore.





EXAMPLE

Eli is an A student and has many friends at school. Recently, his parents noticed he has been avoiding socializing with friends and teachers report he is not turning in work.

RISK FACTORS FOR AN INDIVIDUAL WITH ASD

MENTAL HEALTH

90 percent of people with Autism who attempted suicide or died by suicide had a co-occuring psychiatric condition (i.e depression, anxiety, bipolar)

SOCIAL MILESTONES

Able to be successful in a K-12 environment with support from school and their parents. However, as they age certain scenarios can become more challenging. Reports of distress in watching peers and siblings have a romantic partner, get their first job, and live independently while this can be very difficult for them

GAPS IN CARE

Delayed diagnosis for girls Healthcare staff not properly educated and trained on working with an individual with ASD

Cited from <u>https://www.healthline.com/health-news/rate-of-suicide-3-times-higher-for-autistic-people</u>



RISK FACTORS FOR FEMALES WITH ASD

Autistic girls and women had a four-fold higher risk of suicide attempt compared to men.

One potential reason for this higher risk may be that autistic females are typically diagnosed and treated later in life than males.

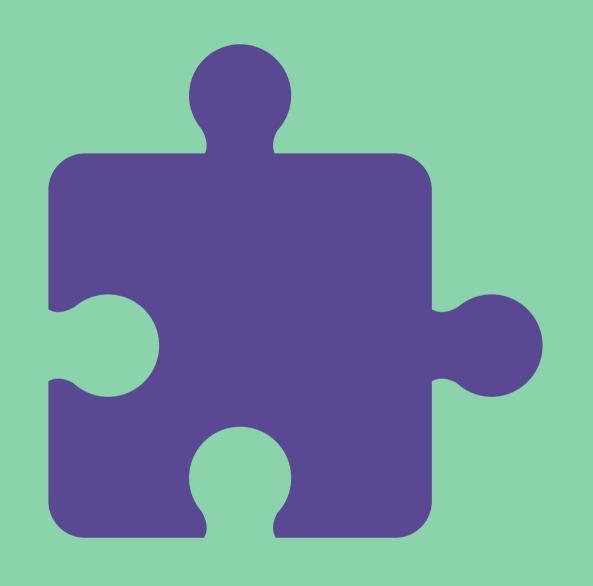
Females are more likely to experience anxiety and affective disorders, like depression, which, as the study demonstrated, are strong risk factors of suicide in autistic people.

Cited from <u>https://www.healthline.com/health-news/rate-</u> of-suicide-3-times-higher-for-autistic-people

UNIQUE DIFFERENCES

- provider.

Cited from https://www.autismspeaks.org/expert- opinion/suicide-risk-autism



• Signs of depression and anxiety in people with ASD can be different than among people without. If you notice any changes in their regular mood and are concerned about depression, talk with your healthcare

• If your child is nonverbal, you can look for other clues. Changes in appetite or sleep, or lack of interest in typical activities, are also signs of depression. Social withdrawal, low energy and flat facial expressions, while common in autism, can also signal depression if they are new symptoms.

HOW TO TALK ABOUT SUICIDE SUICIDEISPREVENTABLE.ORG

- START THE CONVERSATION
- LISTEN, EXPRESS CONCERN, REASSURE
- CREATE A SAFETY PLAN
- GET HELP

STARTING THE CONVERSATION

LET'S REVIEW THE DO'S AND DON'TS



DO'S

Practice what you will say Be specific- "Are you thinking about suicide?"

Plan the conversation during a time when you are not hurried and can spend time with them



yourself are you?" "no" as the answer.

Say- "You're not thinking about killing Don't ask in a way that indicates you want

DON'TS

LISTEN, EXPRESS CONCERN, REASSURE

SUICIDEISPREVENTABLE.ORG

LISTEN

Listen before answering. Re-state what you have heard them say to show you were listneing.

EXPRESS CONCERN

Let them now you are concerned and you take this seriously.

EXAMPLE

I hear you saying that your life is difficult and you don't want to be here anymore

EXAMPLE

I am very worried about you. How can i support you through this?

REASSURE

Let them know this path can be difficult, but you plan to support them all the way.

EXAMPLE

I can imagine this will be difficult, but I want to support you in getting help. Let's make an appointment with a therapist.

CREATE A SAFETY PLAN

REMOVE MEDICATIONS

Lock or remove all medications from their access. This includes vitamins, allergy medicine, pain medications, etc.

REMOVE DANGEROUS OBJECTS

Remove access to any sharp objects or firearms. Place them in locked areas or remove them completely from the home

CLOSELY MONITOR

Monitor your child. Allow for independence, but be aware if they are in their rooms or bathrooms unattended for long periods. Be in contact with their therapist or other health care provider for any emergencies.

WHERE TO GET HELP

1-800-273-8255

CRISIS TEXT LINE **TEXT- HOME TO 741741**

IF IMMENINT- CALL 911

NUMBER

CONTACT SCHOOL STAFF



- NATIONAL SUICIDE PREVENTION LIFELINE
- TRANSPORT TO LOCAL EMERGENCY ROOM
- FIND YOUR LOCAL CRISIS SUPPORT
- MAKE AN APPOINTMENT WITH PRIMARY CARE DOCTOR FOR REFERRALS
- CONTACT THERAPIST FOR GUIDANCE

RECAP OF TODAY'S DISCUSSION

RECAP 01

Suicide does not discriminate against demographic characteristics.

RECAP 03

It's okay to be nervous to have the talk, but talking about suicide aids in prevention

PAGE 15



RECAP 02

Know the Signs

RECAP 04

Know who and where your supports are for help.

THANK YOU!

PLEASE ASK ANY QUESTIONS YOU MAY HAVE



REFERENCES

HTTPS://WWW.SUICIDEISPREVENTABLE.ORG/

HTTPS://AFSP.ORG/SUICIDE-STATISTICS

HTTPS://WWW.AUTISMSPEAKS.ORG/EXPERT-OPINION/SUICIDE-RISK-AUTISM

HTTPS://WWW.HEALTHLINE.COM/HEALTH-NEWS/RATE-OF-SUICIDE-3-TIMES-HIGHER-FOR-AUTISTIC-PEOPLE