

Suicide Identification & Response

Risk Response Quick Reference Guide

This resource is intended as a quick reference guide of how to identify and respond to youth suicide risk within youth-serving organizations. Non-clinical staff are not expected to assess, diagnose, or provide counseling. Their role is to notice warning signs, respond supportively, maintain safety, and connect the youth to the appropriate supervisor, caregiver, crisis resource, or mental health support. Please consult your organization's suicide identification and response policies and procedures for more detailed guidance.

Purpose: Use this guide when a youth talks about wanting to die, expresses hopelessness, mentions self-harm or suicide, shows concerning behavior, or when another young person reports concern about a peer.

Warning Signs of Suicide

- Talking about feeling trapped or in unbearable pain
- Talking about being a burden to others
- Talking about feeling hopeless or having no reason to live
- Increase the use of alcohol or drugs
- Acting anxious or agitated; behaving recklessly
- Sleeping too little or too much
- Withdrawing or feeling isolated
- Showing rage or talking about seeking revenge
- Displaying extreme mood swings

If a youth expresses any of the following immediate warning signs, they should immediately be supported and not left alone until connected with crisis support:

- Talking about wanting to die or to kill oneself
- Looking for a way to kill oneself, such as searching online or obtaining a gun or other lethal means for suicide

Simple Response Flow

Notice □ Ask □ Stay □ Share □ Connect □ Document

Notice warning signs or concerning statement

Ask directly about suicide or self-harm

Stay with the youth if safety is a concern

Share concern with your supervisor or designated mental health lead

Connect the youth to crisis help, emergency support, or their parents/guardians

Document what happened and follow your organization policy

What to Do Right Away

If you are concerned about a youth:

- Stay calm and stay with the youth
- Take what they say seriously
- Ask directly and clearly about whether they are thinking about suicide or self-harm
- Do not leave the youth alone if there is an immediate safety concern
- Contact your supervisor or designated lead right away according to your organization's protocol

- Engage a parent or guardian and other supportive adults based on your organization's protocol and youth's level of risk
- Connect the youth to crisis or emergency support
- Document what happened and what actions were taken
- Store documentation in a secure, organization-approved space

What to Say

It is important to use clear, calm, and direct language when responding to youth in crisis.

1. Start the conversation and ask about suicide:

- “I’ve noticed you seem really overwhelmed, and I just want to check in.”
- “You seem like you are dealing with a lot right now. Can we walk about it?”
- “Have you been having any thoughts killing yourself?”
- “Sometimes when people feel like this, they think about ending their life. Is that happening to you?”

If a youth shares any thoughts of suicide or self-harm, it is important to let them know that you have a duty to report the concern. Be clear on who you will report the concern to (usually their parents and organizational lead). It is important to report all suicide concerns to parents. See page X for information on limited situations when parental notification can be waved.

2. If the youth responds yes:

- “Thank you for telling me.”
- “I’m really glad you shared this with me.”
- “You do not have to handle this alone.”
- “My job is to help keep you safe, so I need to involve additional support.”

3. If the youth responds no, but you are still concerned:

- “Thank you for talking with me. I’m still concerned about how you’re feeling.”
- “I want to connect you with more support.”
- “Let’s get another trusted adult involved so we can help in case you ever feel this way again.”

Avoid any responses or language that minimizes or shames the youth. Remember to emphasize that support is available and you are there to help them. They are not alone.

When to Escalate

It is advised to get immediate help right away if a youth:

- says they are going to act on suicidal thoughts right now
- has a plan or access to lethal means (e.g., things they can use to end their life including firearms, medication, access to a high place, etc.)
- has recently attempted suicide or engaged in serious self-harm
- is highly agitated, intoxicated, or unable to stay safe or regulate
- cannot be safely supervised in the current setting (e.g., virtual setting)

In these situations, it is important to remain with the youth and follow your organization’s emergency procedures, including contacting emergency or crisis services.

When Same-Day Follow Up Is Needed

It is recommended that you share your concern with your supervisor and youth's parents and make a referral to support services on the same-day suicide risk is identified when the youth:

- reports suicidal thoughts, even without immediate intent
- expresses hopelessness, wanting to disappear, or feeling like a burden
- shows significant emotional distress or major behavior changes
- has experienced a recent crisis, loss, or traumatic event

Communicating with Parents or Guardians

Remember to follow your organization's policy and process for notifying parents or guardians of identified suicide risk. When speaking with a parent or guardian:

- stay calm and factual
- share what the youth said or what was observed
- explain what steps have already been taken and any referrals made
- emphasize concern for safety and available support
- do not delay emergency action if youth is actively attempting suicide or at imminent risk

Example: "I am calling because we are concerned about your child's safety based on a conversation we had with him today. We want to make sure you are aware and he gets support right away."

Connecting Youth to Support

Depending on your organization's policies and procedures, available support services for youth can include:

- On-site supervisor or designated mental health/crisis lead
- School or organizational counselor, social worker, psychologist, or other mental health professionals
- Community mental health provider
- Mobile crisis team
- 988 Suicide & Crisis Lifeline
- 911 or emergency services if there is immediate danger

Organization Contact: _____

Supervisor/Lead: _____

Local Crisis Resource (988): _____

Documentation Reminders

Document your conversation and any actions taken to support a youth according to your organization's procedures. This can include:

- What the youth said
 - What Any behaviors you or another adult observed
 - What questions you asked
 - What actions were taken
 - Who was notified, explicitly recording notification date and time of parents and agreed upon next steps
 - Time and date of the conversation or incident
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- What follow-up steps were recommended and taken

Follow Up Actions

It is recommended that an organizational staff follow up with the family of the youth identified as at risk for suicide to check-in on youth wellbeing and support them in taking any previously agreed upon next steps. This can be your opportunity to help families trouble-shoot any challenges that arose in getting supports for youth.

Items to check-in on during the follow-up call

- Current safety/wellbeing of the youth
- Ability for the family to connect with any external mental health providers or resources previously discussed
- What lingering questions they might have about available mental health resources or suicide risk
- What support or information your organization might be able to provide to them during this time
- Confirming expectation that you will follow up with the family again in the coming days to check-in on the youth

Example: “I am calling to check in and see how your son/daughter is doing. I wanted to see if you have had any challenges following up on the referrals to resources and if there is any additional support or information our organization can provide your family during this time.”

Note: If families are not open to a follow-up call, that is okay. It is still recommended to do due diligence in reaching out as it shows the families you care, are available to support them, and can increase the likelihood that there is follow-through on referrals to community

resources. Additionally, research shows that “caring contacts” (outreach to individuals who have struggled with thoughts of suicide) helps to reduce future suicide attempts.

Reference

Skopp, N. A., Smolenski, D. J., Bush, N. E., Beech, E. H., Workman, D. E., Edwards-Stewart, A., & Belsher, B. E. (2023). Caring contacts for suicide prevention: A systematic review and meta-analysis. *Psychological Services*, 20(1), 74–83. <https://doi.org/10.1037/ser0000645>