

In the Aftermath of Pediatric Suicide and
Loss:
A Survey of Before and After



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Today



Suicide statistics

**Common childhood grief reactions/
myths**

Adulthood grief responses

When grief gets “complicated”

Red Flags in Suicidal Youth

After a Death: What do we do now?

Suicide Related Grief

Managing Survivor’s Guilt

**Getting Through Rough Times
Together**

Suicide



Evolution of a Phenomenon

2000 BC- Eloquent Peasant

Bible-7 suicides depicted

Ancient society-criminalized

Modern society-psychological vs.
sociological

Military and foreign countries

Culture, time, circumstances
dependent

Medically assisted approved

Is it becoming an epidemic??

Some statistics:

- **Suicide rate for white males ages 15-24 has tripled since 1950.**
- **Suicide rates for children ages 10-14 have more than doubled since 1950.**
- **Suicide is the 10th leading cause of death in the U.S.**
- **Suicide is the 2nd leading cause of death for people ages 10-24. (2014 WISQARS)**





- Every day in the U.S. There are an average of over 5,240 suicide attempts by young people grades 7-12.
- Four out of five teens who attempt suicide have given clear warning signs.
- More teenagers and young adults die from suicide than from cancer, heart disease, AIDS, birth defects, stroke, pneumonia, influenza, and chronic lung disease....COMBINED.

What do statistics say about pediatric suicide?

Comparisons from 2010-2014
(Center for Disease Control)

10 Leading Causes of Death by Age Group, United States – 2010

2010

Rank	Age Groups										Total
	<1	1-4	5-9	10-14	15-24	25-34	35-44	45-54	55-64	65+	
1	Congenital Anomalies 5,107	Unintentional Injury 1,394	Unintentional Injury 753	Unintentional Injury 885	Unintentional Injury 12,341	Unintentional Injury 14,573	Unintentional Injury 14,792	Malignant Neoplasms 50,211	Malignant Neoplasms 109,501	Heart Disease 477,338	Heart Disease 597,689
2	Short Gestation 4,148	Congenital Anomalies 507	Malignant Neoplasms 439	Malignant Neoplasms 477	Homicide 4,678	Suicide 5,735	Malignant Neoplasms 11,809	Heart Disease 36,729	Heart Disease 68,077	Malignant Neoplasms 396,670	Malignant Neoplasms 574,743
3	SIDS 2,063	Homicide 385	Congenital Anomalies 163	Suicide 267	Suicide 4,600	Homicide 4,258	Heart Disease 10,594	Unintentional Injury 19,667	Chronic Low. Respiratory Disease 14,242	Chronic Low. Respiratory Disease 118,031	Chronic Low. Respiratory Disease 138,080
4	Maternal Pregnancy Comp. 1,561	Malignant Neoplasms 346	Homicide 111	Homicide 150	Malignant Neoplasms 1,604	Malignant Neoplasms 3,619	Suicide 6,571	Suicide 8,799	Unintentional Injury 14,023	Cerebro-vascular 109,990	Cerebro-vascular 129,476
5	Unintentional Injury 1,110	Heart Disease 159	Heart Disease 68	Congenital Anomalies 135	Heart Disease 1,028	Heart Disease 3,222	Homicide 2,473	Liver Disease 8,651	Diabetes Mellitus 11,677	Alzheimer's Disease 82,616	Unintentional Injury 120,859
6	Placenta Cord. Membranes 1,030	Influenza & Pneumonia 91	Chronic Low Respiratory Disease 60	Heart Disease 117	Congenital Anomalies 412	HIV 741	Liver Disease 2,423	Cerebro-vascular 5,910	Cerebro-vascular 10,693	Diabetes Mellitus 49,191	Alzheimer's Disease 83,494
7	Bacterial Sepsis 583	Septicemia 62	Cerebro-vascular 47	Chronic Low Respiratory Disease 73	Cerebro-vascular 190	Diabetes Mellitus 606	Cerebro-vascular 1,904	Diabetes Mellitus 5,610	Liver Disease 9,764	Influenza & Pneumonia 42,846	Diabetes Mellitus 69,071
8	Respiratory Distress 514	Benign Neoplasms 59	Benign Neoplasms 37	Benign Neoplasms 45	Influenza & Pneumonia 181	Cerebro-vascular 517	HIV 1,898	Chronic Low. Respiratory Disease 4,452	Suicide 6,384	Nephritis 41,994	Nephritis 50,476
9	Circulatory System Disease 507	Perinatal Period 52	Influenza & Pneumonia 37	Cerebro-vascular 43	Diabetes Mellitus 165	Liver Disease 487	Diabetes Mellitus 1,789	HIV 3,123	Nephritis 5,082	Unintentional Injury 41,300	Influenza & Pneumonia 50,097
10	Necrotizing Enterocolitis 472	Chronic Low Respiratory Disease 51	Septicemia 32	Septicemia 35	Complicated Pregnancy 163	Congenital Anomalies 397	Influenza & Pneumonia 773	Viral Hepatitis 2,376	Septicemia 4,604	Septicemia 26,310	Suicide 38,364

Data Source: National Vital Statistics System, National Center for Health Statistics, CDC.
 Produced by: Office of Statistics and Programming, National Center for Injury Prevention and Control, CDC using WISQARS™.



Centers for Disease Control and Prevention
 National Center for Injury Prevention and Control

10 Leading Causes of Death by Age Group, United States – 2014

Rank	<1	1-4	5-9	10-14	15-24	25-34	35-44	45-54	55-64	65+	Total
1	Congenital Anomalies 4,746	Unintentional Injury 1,216	Unintentional Injury 730	Unintentional Injury 750	Unintentional Injury 11,836	Unintentional Injury 17,357	Unintentional Injury 16,048	Malignant Neoplasms 44,834	Malignant Neoplasms 115,282	Heart Disease 489,722	Heart Disease 614,348
2	Short Gestation 4,173	Congenital Anomalies 399	Malignant Neoplasms 436	Suicide 425	Suicide 5,079	Suicide 6,569	Malignant Neoplasms 11,267	Heart Disease 34,791	Heart Disease 74,473	Malignant Neoplasms 413,885	Malignant Neoplasms 591,699
3	Maternal Pregnancy Comp. 1,574	Homicide 364	Congenital Anomalies 192	Malignant Neoplasms 416	Homicide 4,144	Homicide 4,159	Heart Disease 10,368	Unintentional Injury 20,610	Unintentional Injury 18,030	Chronic Low. Respiratory Disease 124,693	Chronic Low. Respiratory Disease 147,101
4	SIDS 1,545	Malignant Neoplasms 321	Homicide 123	Congenital Anomalies 156	Malignant Neoplasms 1,569	Malignant Neoplasms 3,624	Suicide 6,706	Suicide 8,767	Chronic Low. Respiratory Disease 16,492	Cerebro-vascular 113,308	Unintentional Injury 136,053
5	Unintentional Injury 1,161	Heart Disease 149	Heart Disease 69	Homicide 156	Heart Disease 953	Heart Disease 3,341	Homicide 2,588	Liver Disease 8,627	Diabetes Mellitus 13,342	Alzheimer's Disease 92,604	Cerebro-vascular 133,103
6	Placenta Cord. Membranes 965	Influenza & Pneumonia 109	Chronic Low. Respiratory Disease 68	Heart Disease 122	Congenital Anomalies 377	Liver Disease 725	Liver Disease 2,582	Diabetes Mellitus 6,062	Liver Disease 12,792	Diabetes Mellitus 54,161	Alzheimer's Disease 93,541
7	Bacterial Sepsis 544	Chronic Low Respiratory Disease 53	Influenza & Pneumonia 57	Chronic Low Respiratory Disease 71	Influenza & Pneumonia 199	Diabetes Mellitus 709	Diabetes Mellitus 1,999	Cerebro-vascular 5,349	Cerebro-vascular 11,727	Unintentional Injury 48,295	Diabetes Mellitus 76,488
8	Respiratory Distress 460	Septicemia 53	Cerebro-vascular 45	Cerebro-vascular 43	Diabetes Mellitus 181	HIV 583	Cerebro-vascular 1,745	Chronic Low. Respiratory Disease 4,402	Suicide 7,527	Influenza & Pneumonia 44,836	Influenza & Pneumonia 55,227
9	Circulatory System Disease 444	Benign Neoplasms 38	Benign Neoplasms 36	Influenza & Pneumonia 41	Chronic Low Respiratory Disease 178	Cerebro-vascular 579	HIV 1,174	Influenza & Pneumonia 2,731	Septicemia 5,709	Nephritis 39,957	Nephritis 48,146
10	Neonatal Hemorrhage 441	Perinatal Period 38	Septicemia 33	Benign Neoplasms 38	Cerebro-vascular 177	Influenza & Pneumonia 549	Influenza & Pneumonia 1,125	Septicemia 2,514	Influenza & Pneumonia 5,390	Septicemia 29,124	Suicide 42,773

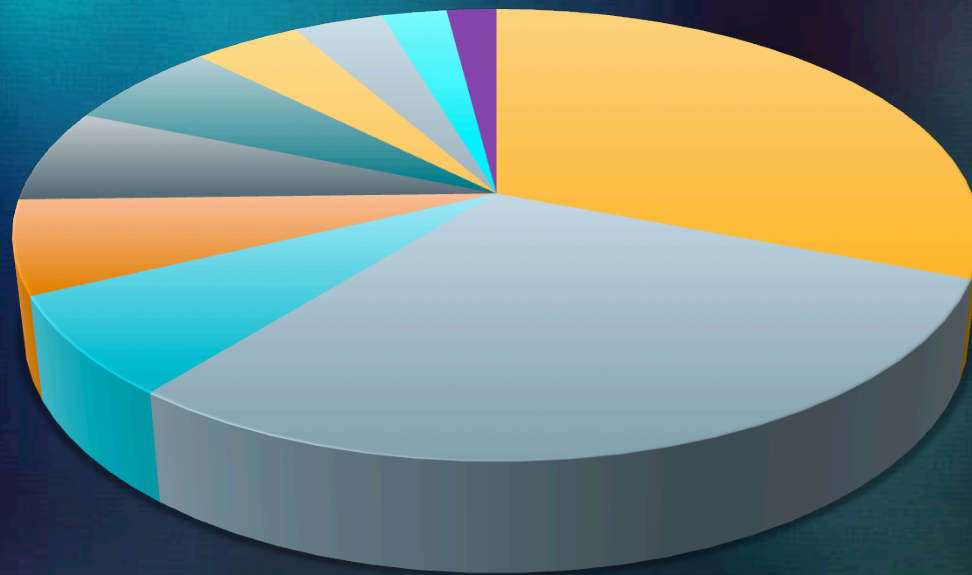
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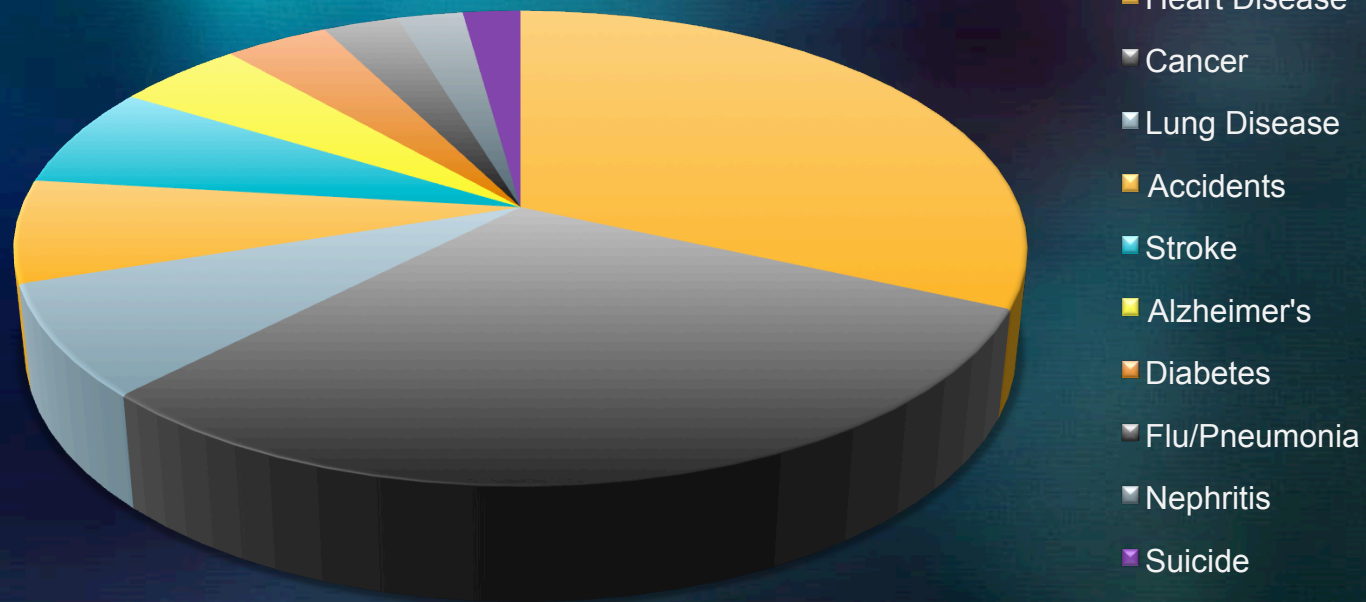
2014

2010 Top 10 Causes of Death

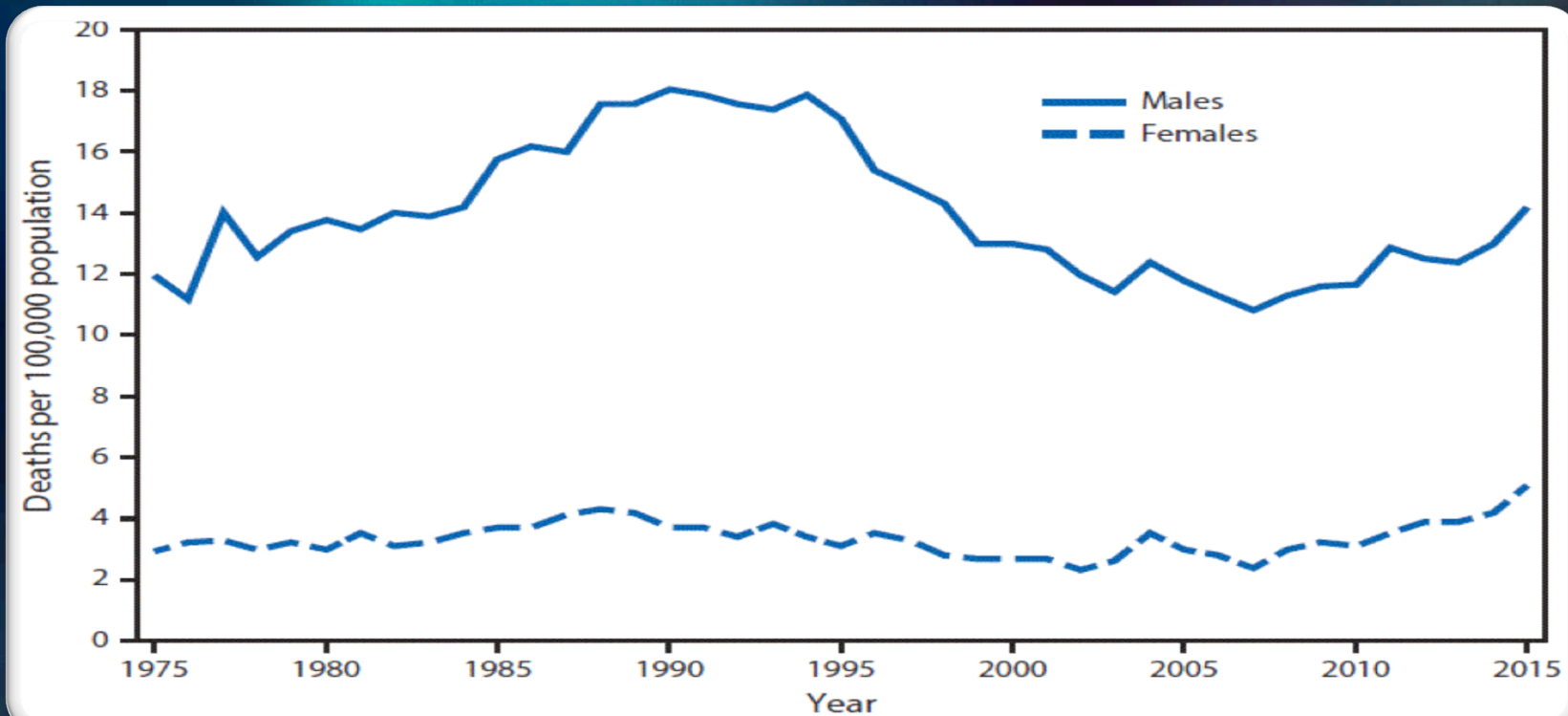


- Heart Disease
- Cancer
- Lung Disease
- Stroke
- Accidents
- Alzheimer's
- Diabetes
- Nephritis
- Flu/Pneumonia
- Suicide

2014 Top Ten Causes of Death



Teen Suicide Rate 1975-2015



Why talk about suicide??



Universal

Fear

Stigma

Griever's burden

Common grounds

What Happens Before?



A Look at the Red Flags

Red Flags

Grades

Attendance

Property

Behaviors

Hopelessness

Research

Social media





Alcohol/drugs

Sleep

Revenge seeking

Mood swings

Isolation/withdrawal

Marginal statements

Self-harming

Pediatric Suicide

Results of few studies

2850 children
ages 7-21

Method

50.2% Asphyxiation
36.5% Weapon/firearm
5.4% Overdose

Trigylidas TE, Reynolds EM, Teshome G, et al. Inj
Prev 2016;22: 268–273.

Pediatric Suicide



Psychosocial

- 27.9% School concerns
- 25.6% Discussion about suicide
- 21.7% History of child abuse
- 40.8% Behavioral issues at school
- 33.1% Truancy
- 28.3 Failures
- 18.0% Suspensions
- 15.6% Move to new school w/in year
- 4.9% Expulsions
- 560 left a note

Pediatric Suicide



Mental Health Issues

25.5% experienced some mental health issues

72.3% were receiving mental health services at the time of suicide

75.7% had previously received mental health services

60.8% had prescriptions for mental health medications

40.8% diagnosed with major depressive disorder

20.6% diagnosed with ADHD

16.3% diagnosed with Bipolar Mood Disorder

3.9% diagnosed with Schizophrenia

Pediatric Suicide



Substance Abuse Issues

23.8% experienced substance abuse issues

58.3% were using marijuana

48.3% were using alcohol

13.3% were using prescription drugs

8.8% were using cocaine

6.2% were using methamphetamines

5.9% were using opiates

**A Teen in My
Life is suicidal.**

How Can I Help?

Stay calm

Normalize

Listen

Empathize

Assess for safety

Link to appropriate level of care

Discuss with parents/caretakers

A Child in our
community **died**
by **suicide.**

What now?



How Do We Explain Suicide to Youth?

- Prepare age appropriate conversation lengths
- Explain the importance of the topic
- Find out what they already know
- Be truthful, honest, clear, and complete
- Use concrete terms to describe death
- Age appropriate language and concepts



How Do We Explain Suicide to Youth?



- Answer to the best of your ability, but having to say “I don’t know” is okay
- If you’re uncomfortable, they will likely sense this. Try to reduce your own fears about having the conversation
- Resist the urge to shelter a child/teen from reality.
- Stick to the facts and keep in mind that children generally don’t feel as negatively about suicide as adults

How Do We Explain Suicide to Youth?

- Depending upon their age, children can be taught about mental health and suicide by saying something such as “he had an illness inside his brain and it made him so sad he didn’t want to live anymore.”
- Refrain from making it sound like the person was ‘bad.’ Instead focus on how inadequate coping skills lead to poor decision making.



- Utilize this time to tell youth that not everyone who feels sad/depressed ends their life. There is help available by letting an adult know how they’re feeling.

Getting Grief “Right”



What's normal and when is it a problem?

Grief Responses

Varied

Unique

Not time-limited

Sleep disturbances

Eating issues

Emotional

Survivor's guilt



Working Through Grief

5 Stages of Grieving

Denial

Anger

Bargaining

Depression

Acceptance

Tasks of Grieving

Acknowledging Reality of Death

Processing Emotions of Grief

Learning to Live Without Your
Loved One

Finding a Way to Remember and
Maintain Connection

Children Working Through Grief

Some Common Myths

- **A predictable, stage-like progression**
- **Just like an adult's grief**
- **Short in duration**
- **Shouldn't attend funerals**
- **Reminders of loved one who died only upsets them more**

Children Working Through Grief

Some Differences

- **More likely to forget their grief**
- **Stay present more often**
- **Less knowledge and understanding of death**
- **Dependent upon adults for information**
- **Moods are more changeable and easily misunderstood**
- **Greater need for family support system**
- **Information gaps lead to story-completion**
- **More matter-of-fact about death**

Research

Suggests...

- It is important to provide... children with comprehensible, age-appropriate info about death
- Likelihood of distortions and fantasies about the death are increased in children who have not been adequately informed
- There are benefits of open communication about feelings in families with parental loss



Research



- **Parents may struggle with the defenses children use to ward off intense emotions**
- **Excessive expression may be as distressing to children as overly constricted communication**
- **If they're old enough to ask, they're old enough to know.**
- **Open communication is the healthiest approach.**
- **Children still need routine**
- **Children learn how to grieve by watching their adults grieve**

Adults Working Through Grief

Normal Grief Responses

Sleep disturbances

Changes in eating habits or weight

Thoughts about wanting to 'go be with' their loved one

"Cognitive fog"-difficulty making decisions, struggle with memory or processing information

Potentially Problematic Grief Responses

Devising a plan to complete suicide

Eating/sleeping changes that do not subside within six months

Loss of meaning or purpose in life

Unable to practice good hygiene or self-care over an extended period of time



When It's Grief Following A Suicide

First, know these things about suicide...

- It is usually a long, debilitating breakdown of an individual's emotional health followed by an impulsive act.
- Often we must just leave a person's suicide at a question....EVEN if they left a note.
- The period of numbness lasts longer and there's an added burden of wondering why that lingers afterward.
- It is a complex phenomenon so it's best not to oversimplify its causes.
- Grieving a suicide death may frequently be different than your 'regular' death

How Does Grief After Suicide Differ?

Rejection

Blame

Fear

Hopelessness

Isolation

s

Confusion

Relief

Anger

n Shame

f

Guilt

How did I miss it?



Surviving Survivor's Guilt

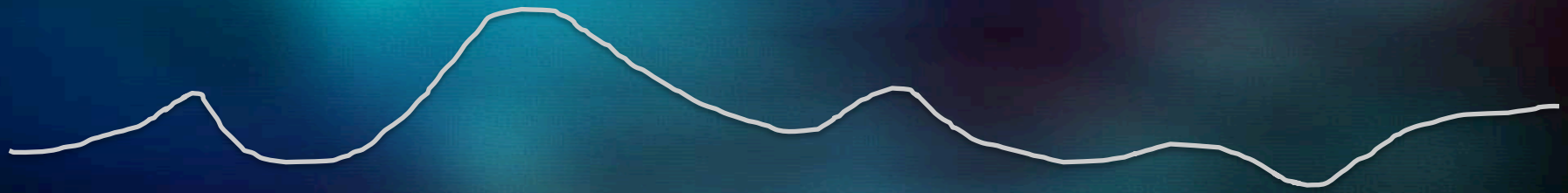
Keep these things in mind...

- **Understand that guilt doesn't exist without first there being a feeling of responsibility.**
- **Acknowledge the emotional and physical toll that grief takes on a person.**
- **Know that guilt is our way of controlling a situation that we cannot.**
- **Realize that you are more emotionally reactive right now. Over time, logic will replace/ reduce your feelings and you'll be able to realize their suicide was ultimately their decision.**

Keep these things
in mind...

- **Folks usually let their survivor's guilt run wild into believing a more positive, magical thing would have happened if they'd intervened.**
- **The only person who is responsible for suicide is the suicider.**
- **You only have part of the picture.**

Getting Through It Together



How to heal while you're healing

Getting Through it Together

- Keep the focus on unity and resist the urge to isolate/withdraw.
- Never blame/accuse another staff member, student, or coworker.
- Be there for one another. Lend a hand when you're strong, and speak up when you feel weak.
- Model positive coping strategies. The younger folk are watching.
- Avoid making unuseful statements to the grieving.



- Ask questions that dig beneath the surface. Avoid “how are you doing?”
- Practice good self-care.

Getting Through it Together

Self-Care for the Helping Professional

Cry when you feel the need to cry.

Ensure you're getting proper nutrition, exercise, and sleep.

Become aware of your personal signs of burnout and take some time off when you recognize them.

Manage your time responsibly.

Say "yes" to saying "no."

Increase your emotional intelligence.

Find a comfortable work/life balance.

If your grief/trauma experience begins to impact your mood, consult with a therapist.

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