



COLUMBIA UNIVERSITY DEPARTMENT OF PSYCHIATRY

Suicide Contagion Among Adolescents

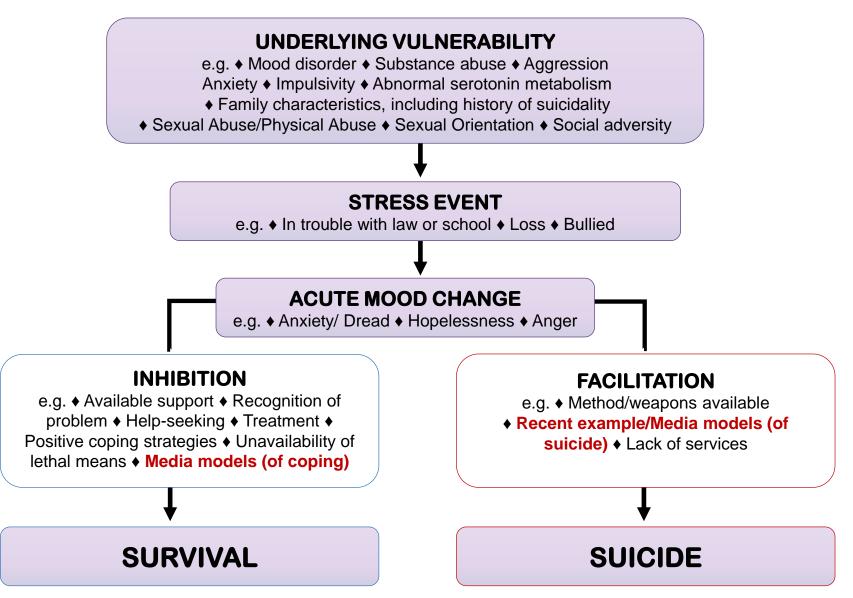
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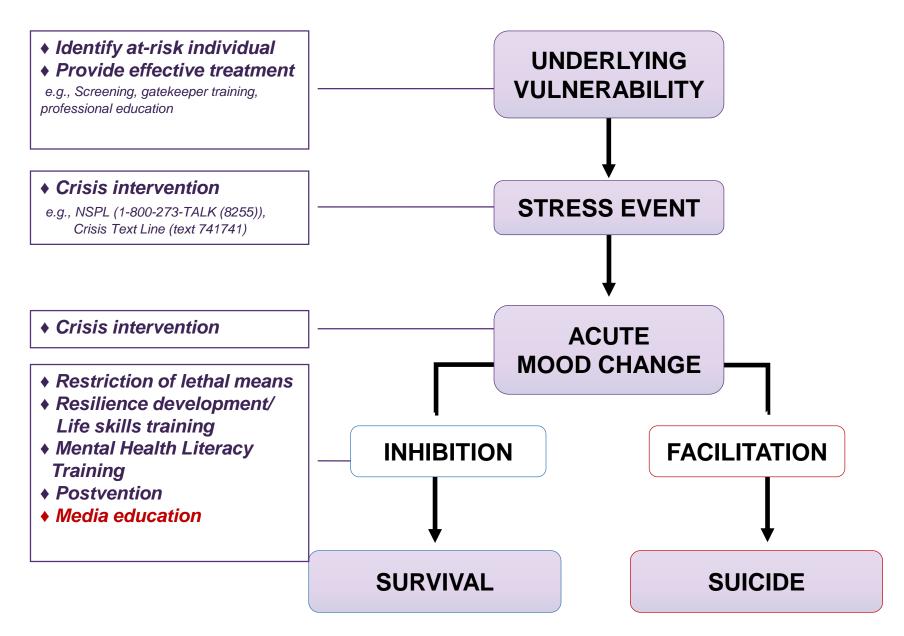
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2020 CO Safe Schools Summit Virtual Workshop Friday, October 23, 2020

SUICIDE DEATHS: CONTRIBUTING FACTORS



PREVENTION STRATEGIES



SUICIDE CONTAGION/MODELING Definition

Process by which knowledge (direct or indirect) of one suicide facilitates the occurrence of a subsequent suicide.

SUICIDE CONTAGION/MODELING Sources of Evidence

Impact of exposure to suicidal peers

Impact of Media

Suicide clusters

IMPACT OF EXPOSURE TO SUICIDAL PEER

Association between suicide attempts or deaths by suicide of a peer and personal suicidal behavior

The majority of the studies examining exposure to suicidal behavior of adolescent peers have found significant cross-sectional and longitudinal associations with adolescent suicide ideation and attempts.

ORs range from 2.8 - 11.0 (attempted suicide)

References							
Feigelman, W.; Gorman, B.S. Assessing the effects of peer suicide on youth suicide. Suicide Life Threat. Behav. 2008, 38, 181–194.	Insel, B.J.; Gould, M.S. Impact of modeling on adolescent suicidal behavior. Psychiatry. Clin. N. Am. 2008, 31, 293–316.	Randall, J.R.; Nickel, N.C.; Colman, I. Contagion from peer suicidal behaviour in a representative sample of					
Ho, T.; Leung, P.W.; Hung, S.; Lee, C.; Tang, C. The mental health of the peers of suicide completers and attempters. J. Child Psychol. Psychiatry 2000, 41, 301–309.	Swanson, S.A.; Colman, I. Association between exposure to suicide and suicidality outcomes in youth. CMAJ 2013, 185, 870–877.	American adolescents. J. Affect. Disord. 2015, 186, 219–225.					

IMPACT OF EXPOSURE TO SUICIDAL PEER

Longitudinal association between a peer's attempted or completed suicide and adolescent suicidal behavior

(Swanson and Colman, 2013)

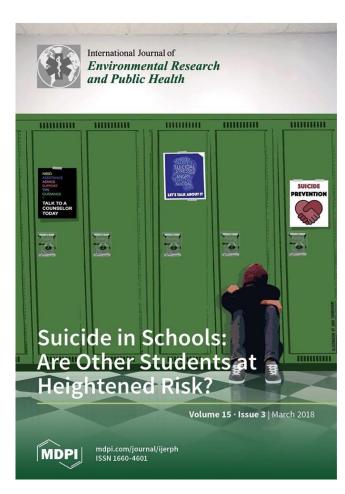
Exposure to a schoolmate's attempted or completed suicide predicted suicidal ideation and attempts among youth 2 years after exposure. (*This is a consistent finding across several longitudinal analyses of ADD Health data.*)

Closest friends of a suicide victim appeared not to be at heightened risk of suicidality compared with acquaintances. (This is not a consistent finding across studies.)

Students who had experienced stressful life events appeared more affected than those without such life events.

Effects of suicide exposure on suicidality outcomes were not modified by previous social support, depression, or anxiety, ideation or attempts.

ORs ranged from 2.72 – 3.07





Article

Exposure to Suicide in High Schools: Impact on Serious Suicidal Ideation/Behavior, Depression, Maladaptive Coping Strategies, and Attitudes toward Help-Seeking

MDPI

Madelyn S. Gould ^{1,*}, Alison M. Lake ², Marjorie Kleinman ², Hanga Galfalvy ³, Saba Chowdhury ² and Alison Madnick ²

BACKGROUND

Although postvention efforts tend to be schoolbased, little is known about the impact of a schoolmate's suicide on the school's student population overall.



International Journal of Environmental Research and Public Health

MDPI

Article

Exposure to Suicide in High Schools: Impact on Serious Suicidal Ideation/Behavior, Depression, Maladaptive Coping Strategies, and Attitudes toward Help-Seeking

Madelyn S. Gould $^{1,*},$ Alison M. Lake 2, Marjorie Kleinman 2, Hanga Galfalvy 3, Saba Chowdhury 2 and Alison Madnick 2

OBJECTIVE

Whether there is excess serious suicidal ideation/behavior and depression among students in a school where a schoolmate has died by suicide.

 Who is at highest risk? Does the degree of distress correspond to the level of friendship with the suicide victim? with concomitant undesirable life events?

DESIGN

- 12 schools in 2 counties in New York State
- At six schools a student had died by suicide within past six months ("exposed" schools)
- At six schools no student death occurred within that time ("non-exposed" schools)

RESULTS

- No excess morbidity (i.e., serious suicidal ideation/behavior and depression) was evident among the general student population after a death by suicide of a schoolmate.
- Students with more concomitant negative life events were at increased risk of serious suicidal ideation/behavior and depression.
- There was a significant relationship between friendship with the decedent and morbidity, in that students who were friends, but not close friends, of the decedents had the greatest odds of serious suicidal ideation/behavior.
- Overall, students in exposed schools had more adaptive attitudes toward help-seeking; but this was not true of the decedents' friends or students with concomitant negative life events.

IMPACT OF MEDIA

Research finds a greater increase in suicide when

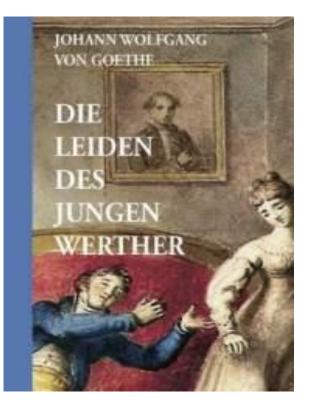
- Frequency of stories increases (dose-response effect)
- Higher proportion of the population is exposed
- Headlines are dramatic
- Prominence of story increases (e.g. front page)

The increase in subsequent suicides following media exposure has been termed "The Werther Effect"

References

Insel, B.J., & Gould, M.S. (2008). Impact of modeling on adolescent suicidal behavior. Psychiatric Clinics of North America, 31(2), 293-316; Pirkis J, Blood RW. (2001). Suicide and the media: Part I. Reportage in nonfictional media. Crisis, 22(4),146-54.

IMPACT OF MEDIA History: "The Werther Effect"



1774: *"The Sorrows of Jung Werther"* – JW Von Goethe

Following publication of the novel, imitative suicides among young men in Germany, Denmark and Italy. RESEARCH ARTICLE



Published: February 7, 2018

Increase in suicides the months after the _death of Robin Williams in the US

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Abstract

Investigating suicides following the death of Robin Williams, a beloved actor and comedian, on August 11th, 2014, we used time-series analysis to estimate the expected number of suicides during the months following Williams' death. Monthly suicide count data in the US (1999–2015) were from the Centers for Disease Control and Prevention Wide-ranging ONline Data for Epidemiologic Research (CDC WONDER). Expected suicides were calculated using a seasonal autoregressive integrated moving averages model to account for both the seasonal patterns and autoregression. Time-series models indicated that we would expect 16,849 suicides from August to December 2014; however, we observed 18,690 suicides in that period, suggesting an excess of 1,841 cases (9.85% increase). Although excess suicides were observed across gender and age groups, males and persons aged 30–44 had the greatest increase in excess suicide events. This study documents associations between Robin Williams' death and suicide deaths in the population thereafter.

Netflix Series 13 Reasons Why

Released March 31, 2017



CONCERNS

- Suicide is presented as a way to solve problems
- Glamorizes and romanticizes
 suicide
- Suicide by a very appealing character
- Not addressing mental illness or alternatives to suicide
- Presents help-seeking as a fruitless activity – failure of all
- Graphic depiction of suicide



RESEARCH LETTER JAMA Internal Medicine Published online July 31, 2017

Internet Searches for Suicide Following the Release of 13 Reasons Why

Ayers et al

Quasi-experimental design compared online suicide-related searches (using Google Trends) during periods after (March 31, 2017 – April 18, 2017) and before (January 15, 2017 – March 30, 2017) release of 13 Reasons Why

- All suicide queries were cumulatively 19% higher for the 19 days following the release, reflecting 900,000 to 1.5 million more searches than expected.
- Most rising searches focused on suicidal ideation, for example "how to commit suicide" (26%); "commit suicide" (18%);
- Searches for suicide hotlines were also elevated (12%) as were other public awareness searches eg., "suicide prevention" (23%)

13 Reasons Why raised awareness but at what cost?

JAMA Psychiatry 1 Original Investigation Association of Increased Youth Suicides in the United States With the Release of 13 Reasons Why May 29, 2019 Thomas Niederkrotenthaler, MD, PhD, MMSc; Steven Stack, PhD; Benedikt Till, DSc; Mark Sinyor, MSc, MD; Jane Pirkis, PhD; David Garcia, DSc; Ian R. H. Rockett, PhD, MPH; Ulrich S. Tran, DSc	 12.4% increase in suicide among boys 21.7% increase among girls No excess suicide mortality in age groups other than 10- to 19- year olds
Journal of the American Academy of CHILD & ADOLESCENT PSYCHIATRY	 Significant increase in suicide among 10-17 year olds No excess in other age groups No excess in control analyses of homicide deaths
JOURNAL OF ADOLESCENT HEALTH Www.jahonline.org Suicide Attempt Admissions From a Single Children's Hospital Before and After the Introduction of Netflix Series 13 Reasons Why Michael Townsend Cooper, Jr., M.D., M.S.*, David Bard, Ph.D., Rebecca Wallace, Ph.D., Stephen Gillaspy, Ph.D., and Stephanie Deleon, M.D.	 Suicide admissions for suicide attempts following March 2017 were higher than predicted

13 Reasons Why: Netflix removes suicide scene from season one

() 16 July 2019

F 😒 🈏 🗹 < Share



A controversial scene in Netflix drama 13 Reasons Why in which a teenage girl kills herself has been removed, two years after it first appeared.

Netflix said the decision had been made "on the advice of medical experts".



Converse effects exist also:

suicide following release of media guidelines or during newspaper strikes

suicide following articles on suicidal individuals who adopted positive coping strategies and refrained from suicidal behavior in adverse circumstances: "Papageno effect"

(Motto, 1970; Niederkrotenthaler et al., 2010)

"PAPAGENO EFFECT"

Content analysis of 497 suicide-related print media reports published in Austria between January 1 and June 30, 2005. Ecological study to identify associations between media item content and short-term changes in suicide rates.

In multivariate analysis, **repetitive reporting** associated with **increases** in suicide rates.

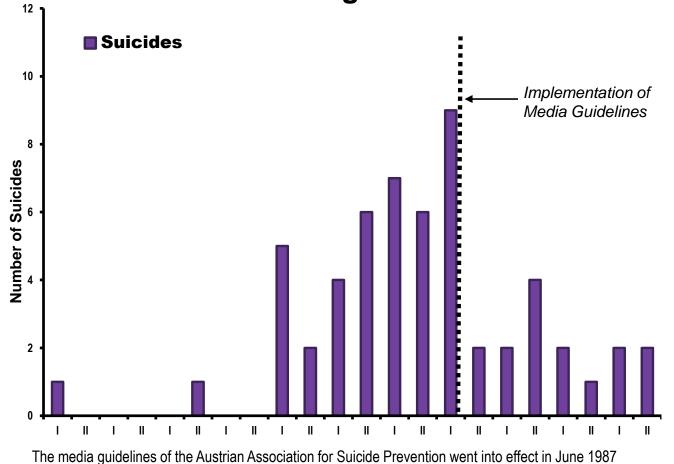
Media items describing suicidal individuals' **adoption of coping strategies** other than suicidal behavior were associated with a **decrease** in suicide rates.

Reference

Niederkrotenthaler et al., (2010) role of media reports in completed and prevented suicide: Werther v. Papageno effects. The British Journal of Psychiatry, 197: 234-243.

EVIDENCE OF MEDIA GUIDELINES' EFFECTIVENESS

SUICIDES IN THE VIENNA SUBWAY SYSTEM 1980 through 1990



MAGNITUDE OF THE EFFECT OF THE MEDIA

 12% increase in suicides following Marilyn Monroe's death

- More recently, 10% increase in suicides following Robin Williams' death
- Approximately 75% decrease in subway-suicides following implementation of media guidelines in Vienna

IMPACT OF MEDIA EXISTS... But it's not a monolithic effect!

Interactive factors exist

- Audience
- Stories
- Match ► Differential Identification

SIXTH IN STRING OF FATAL FALLS

Joanne Michelle Leavy, 23, is the latest New York University student to die in a fatal fall in less than a year. Here's a look at the rash of deaths:

In late June, a graduate student, whose name has not been released, died in a fall from a midtown building.

Diana Chien, 19, died when she threw herself off the 26th-story roof of her boyfriend's off-campus apartment building on March 6, after a quarrel.

Michelle Gluckman, 19, of Brooklyn plunged from six stories into the rear courtyard of a building near Washington Square Park on Oct. 18, 2003. Two students tried to stop Gluckman, a sophomore, but they could not pull her back inside the building.

Freshman Stephen Bohler, 18, leaped to his death from a 10th-floor balcony in the Elmer Bobst Library on Washington Square South on Oct. 10, 2003.

The death of the swim team

member from Dayton, Ohio, initially was believed to be a suicide. But the medical examiner ruled it an accident after an autopsy revealed hallucinogenic mushrooms and marijuana in Bohler's system.

Jeff Skolnik, 19, a student from Evanston, III., climbed over the same balcony and jumped to his death as other students watched in horror on Sept. 12, 2003.

Dave Goldiner

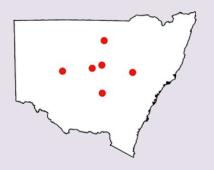
SUICIDE CLUSTER Definition

Excessive number of suicides occurring in close temporal and/or geographical proximity.

TYPES OF SUICIDE CLUSTERS

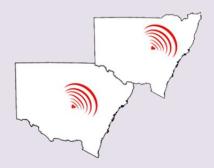
Point Cluster

A greater than expected number of suicides or selfharm episodes within a specific time period and in a specific location or settings. Mass Cluster (Temporal Cluster)



A greater than expected number of suicides or selfharm episodes within a specific time period, which are spread out geographically.

Echo Cluster



A cluster occurring in the same location as a previous cluster, but some time later.

Reference

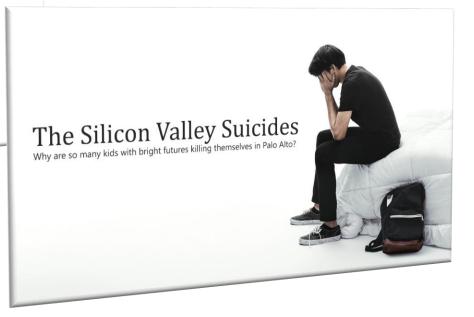
Hawton, Hill, Gould et al. www.thelancet.com/child-adolescent Published online October 9, 2019 https://doi.org/10.1016/S2352-4642(19)30335-9

There is no one type of "suicide cluster-prone" community. Clusters occur in communities with varying socioeconomic and ethnic profiles.

Canada First Nation community in crisis amid 'almost nightly' suicide attempts

Community of 2,000 has seen more than 100 attempts in seven months, says chief, as country's indigenous people continue to face higher levels of poverty.





Suicide clusters occur primarily among teenagers and young adults

Age (years)	N	Window = 7 Days Close-Close Pairs		•		Window = 14 Days Close-Close Pairs				Window = 30 Days Close-Close Pairs			
		Expected	Observed	O/E	Ρ	Expected	Observed	O/E	Р	Expected	Observed	O/E	P
15-19	12135	1339.2	1420	1.060	.011	2756.7	2842	1.031	.047	6000.7	6177	1.029	.009
20-24	25511	6335.5	6523	1.030	.008	13126.1	13481	1.027	.001	28642.6	29602	1.033	.000
25-29	23275	7126.1	7155	1.004	.365	14775.8	14888	1.008	.174	32247.7	32681	1.013	800.
30-34	19534	4805.0	4834	1.006	.338	9991.0	10035	1.004	.328	21794.4	21978	1.008	.106
35-44	29092	9707.5	9822	1.012	.119	20086.4	20271	1.009	.094	43780.9	44066	1.007	.067
45-54	26002	6976.1	7103	1.018	.060	14530.8	14629	1.007	.205	31622.9	31633	1.000	.478
55-64	25624	6399.6	6623	1.035	.002	13277.2	13401	1.009	.136	28928.5	29260	1.011	.024
65-74	19621	3334.8	3395	1.018	.139	6877.7	6976	1.014	.111	15002.1	15247	1.016	.020
75+	14718	2373.0	2367	0.997	.550	4876.8	4888	1.002	.435	10567.0	10554	.998	.551

The effect size was two to four times greater among the adolescents than in other age groups.

Discussion

Suicide clusters appear to occur primarily among teenagers and young adults, although clusters do occur occasionally at other ages. This is consistent with the findings of Phillips and Carstensen¹⁰: the impact of suicide stories on groups in prevention strategies will be necessary to reduce the suicide rate substantially.

ACKNOWLEDGMENTS

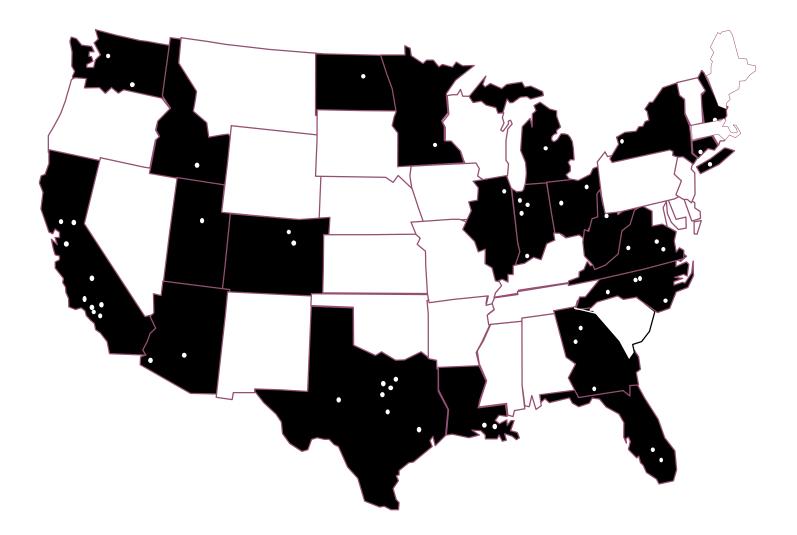
The work was supported by research contract 200-65-0834(P) from the Centers for Disease Control and a Faculty Scholars Award from the William T. Grant Foundation.

REFERENCES

1. Gould MS, Davidson L: Suicide contagion among adolescents. In:

Reference

Gould MS, Wallenstein S, Kleinman MH, et al. Suicide clusters, an examination of age specific effects. Am J Public Health 1990;80(2):211-2.



1988-1996, 53 clusters

At a minimum, 5 youth suicide clusters occur each year in the U.S.

Approximately 5% of teen suicides occur in clusters

The media can play a role in triggering a cluster



Summary

Background Public health and clinical efforts to prevent suicide clusters are seriously hampered by the unanswered Lancet Psychiatry 2014 question of why such outbreaks occur. We aimed to establish whether an environmental factor-newspaper reports Published Online of suicide-has a role in the emergence of suicide clusters. May 2, 2014

http://dx.doi.org/10.1016/

Content analysis of suicide stories

To identify specific features in media suicide reports that may contribute to the initiation of teenage suicide clusters, we developed a content analytic strategy of qualitative characteristics abstracted from newspaper stories. 48 youth cluster communities (648 stories) compared to 95 non-cluster communities (1,081 stories).

1 number of stories about any suicidal individual

1 number of stories about the teen suicide in our study

Stories published after the index cluster suicides compared to those published after non-cluster suicides:

- 1 number of stories about any suicidal individual
- 1 number of stories about the teen suicide in our study
- ↑ front page story placement
- ↑ size of headlines
- ↑ headlines containing the word suicide
- headlines containing a description of the methods
- ↑ sensational headlines
- ↑ presence of pictures
- A detailed descriptions of the suicidal individual and act

SUICIDE CONTAGION

Hypothesized Mechanisms

- Social transmission
- Descriptive norms
- Social integration & regulation
- Social learning theory
- Approach/Avoidance conflict: restraint reduction
- "Social multiplier" that amplifies the effects of other suicidogenic factors
- Changes in social norms
- Assortative relating*

NEWS

Why livestreamed suicides are becoming a disturbing new norm

By Joshua Rhett Miller

January 31, 2017 | 3:10pm | Updated



NEW YORK POST

WAYS TO CONTAIN SUICIDE CONTAGION: Implications for Postvention





WHAT IS POSTVENTION?

• Intervention after suicide is called "postvention"

- Originated by Edwin Shneidman in 1968 at first conference of the American Association of Suicidology
- Postvention addresses the care of bereaved survivors and caregivers and aims to minimize contagion
- Acknowledges the importance of preventive and intervention efforts in the period "after"

SUICIDE POSTVENTION

Best practices in the community include:

• Enhancing community connectedness

- Promoting media and public relations best practices
- Initiating/promoting telephone and online crisis interventions and other technologies (e.g., Apps)
- Shaping community members' (including students') desire to "do something"

I. Enhancing community connectedness

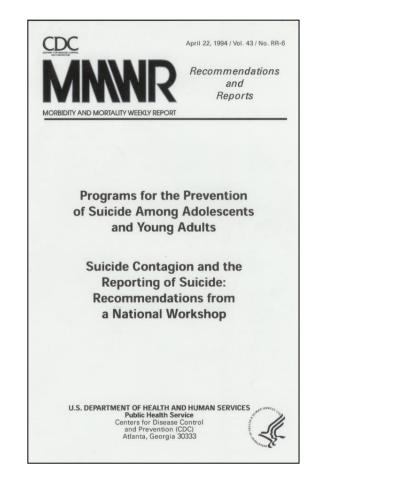
Develop infrastructure for community collaboration (i.e., create a coalition)

 Include local government agencies, schools, universities, law enforcement and fire and emergency medical services, mental health and public health agencies, businesses, workplaces, faith communities and religious institutions, funeral professionals, social media and online communities, loss and attempt survivors, researchers.

Facilitate the public's access to community officials, e.g., town hall meetings

Implement programs, such as Sources of Strength, designed to enhance connectedness in schools

II. Promoting media and public relations best practices: Adhering to media guidelines in the wake of a suicide





PREVENTING SUICIDE

A resource for filmmakers and others working on stage and screen

> World Health Organization

LOCATION

SAFE MESSAGING

Recommendations

Tip the balance of the media effect in favor of "Papageno effect" rather than "Werther effect."

Shape content:

- \downarrow front page story placement,
- \downarrow size of headlines,
- \downarrow headlines containing the word suicide....etc.

Include resources in any report, for example in the U.S. National Suicide Prevention Lifeline, Crisis Text Line





SF Magazine June 2015

No Longer Wanting to Die

By WILL LIPPINCOTT MAY 16, 2015 2:30 PM 9394 Comments



"...depression is treatable, and suicide is preventable. Don't lose hope. You're not alone. I, too, once firmly believed that I was broken beyond repair – but I was wrong."

II. Promoting media and public relations best practices: Working with the media – changing narratives

✓ Build long-term relationships with reporters, editorial boards

 Teachable moments – e.g., send out press releases on local prevention efforts

✓ Pitch story angles that change the focus/narrative

 Identify local experts who can provide information and who they can quote (and who can guide the narrative you want to achieve)

III. Initiating/promoting telephone and online crisis interventions, and other technologies (e.g., Apps)

 Promote crisis hotline numbers (e.g., in the U.S., 1-800-273 TALK- soon to be "988")

 Responsible postvention initiatives should utilize social networking sites to 1) distribute relevant information and resources, and 2) monitor comments from individuals connected to the bereaved.

Reference

III. Initiating/promoting telephone and online crisis interventions, and other technologies (e.g., Apps): Social Media Resources



Help Center Q Searc

Suicide Prevention

If you've encountered a direct threat of suicide on Facebook, please contact law enforcemer suicide hotline immediately.	nt or a
I'm having thoughts about suicide or self-injury.	~
I need to find a suicide helpline for myself or a friend.	\sim
What should I do if someone posts something about suicide or self-injury on Facebook?	\sim
How do I help a member of the US military community (example: active soldier, veteran or family member) who has posted suicidal content?	\sim
How do I help an LGBT person who has posted suicidal content on Facebook?	\sim
How do I help a law enforcement officer who has posted suicidal content?	\sim
Visit our Family Safety Center for more safety information, tools, and resources.	



HELP A FRIEND IN NEED

Facebook is proud to work with The Jed Foundation and The Clinton Foundation, non-profits that work to promote emotional wellbeing, to share potential warning signs that a friend might be in emotional distress and need your help.

POSSIBLE WARNING SIGNS OF EMOTIONAL DISTRESS

you see someone posting distressing messages or content on acebook or behaving dramatically differently than usual, it may ignal that this person needs help. If you have a gut feeling that omething is not right, you should act on it.

especially increase in substance

use or taking other risks

Be aware of statuses/posts, messages, photos or videos that include the following themes:



Adapted from Kerri Smith, SPRC

III. Initiating/promoting telephone and online crisis interventions, and other technologies (e.g., Apps): App Tools

Virtual Hope Box

by National Center for Telehealth & Technology (Apple App Store or Google Play)



III. Initiating/promoting telephone and online crisis interventions, and other technologies (e.g., Apps): App Tools

MY3 Suicide Prevention App

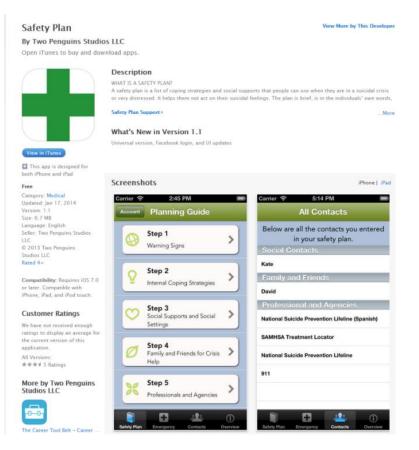
(download at <u>suicidepreventionlifeline.org</u> or Apple App Store or Google Play)

MY3 😑		CT	ADD CONTACT?	YOUR SAFETY PLAN	RESOURCES
	Find a Contact	٩		Fill out your safety plan and reterence it when you are feeling suicidal how to help others using this n page.	
	Anna Haro Daniel Higgins Jr.	+	John Appleseed	1. MY WARNING SIGNS EDIT 2. MY COPING STRATEGIES EDIT	Select 'Add Resources' to browse resources. You can save a resource by selecting 'Save' on the resource information page.
David John Taylor Accilented	David Taylor	+	NO YES	▼ 3. MY DISTRACTIONS EDIT	ADD RESOURCES
GET HELP NOW	Hank M. Zakroff	+		- 4. MY NETWORK	National Suicide Prevention
	John Appleseed	+		1. Anna Haro	Lifeline
CALL 911	Kate Bell	+		555-522-8243 2. David Taylor 555-510-6679 3. John Appleseed 888-555-5512	Suicide Prevention Resource Center (SPRC)

III. Initiating/promoting telephone and online crisis interventions, and other technologies (e.g., Apps): App Tools

The Safety Plan App

The Safety Plan app was developed with permission from Stanley & Brown (2012). Developers: Barbara Stanley, Gregory K. Brown, and Padraic Doyle. New York State Office of Mental Health.



IV. Shape community's and students' desire to "do something"

Need to balance needs of mourners, while minimizing likelihood of contagion:

- Encourage stories of resilience and help seeking for media outlets, including school papers
- Encourage volunteering at nearest crisis center (rather than starting a new crisis line)
- Encourage participating in suicide prevention activities (e.g., in U.S. - AFSP's "Out of Darkness" walks)

Conclusion

 Develop the postvention plan before a suicide occurs

No need to reinvent the wheel – resources exist

SUICIDE POSTVENTION Resources

9

Search

AFTER A SUICIDE RESOURCE DIRECTORY Coping with grief, trauma, and distress

Home

Home	"After a Suicida" is a portal linking people who are grigving after a death by guidide to an opling					
24/7 Peer Support	 "After a Suicide" is a portal linking people who are grieving after a death by suicide to an online directory of resources and information to help them cope with their loss. The directory also lists items for people who want to offer support and assistance to the suicide bereaved. The site's Bitlink* is bit.ly/afterasuicide. <i>This site is not for crisis outreach: For immediate assistance, call 1-800-273-TALK (8255)</i>. Grief in General Introductory material on bereavement Suicide Grief Primer An overview of grief after suicide 					
GRIEF IN GENERAL						
SUICIDE GRIEF PRIMER						
SUICIDE GRIEF WEBSITES						
SUICIDE GRIEF MATERIALS	Suicide Grief Printer An overview of grief area suicide CATEGORIES Suicide Grief Websites Comprehensive sites focused on suicide bereavement Suicide Grief Materials Booklets, handouts about grief after suicide Online Assistance Interactive help available online Support Groups Information about group support for people bereaved by suicide Special Populations For bereaved parents, people of color, peer helpers, clinicians Bereaved Children Items for suicide bereaved children, plus children's grief in general					
ONLINE ASSISTANCE						
SUPPORT GROUPS						
SPECIAL POPULATIONS						
BEREAVED CHILDREN						
MILITARY/VETS/FAMILIES	 Detected Children's Terrist for solidate betreaved children', plus children's given in general Military/Vets/Families Resources for bereaved military, veterans, and their families Schools/Workplaces Best practices for community, work, school responses to suicide Communities Postvention training and principles for communities Helping Others Postvention training and principles for communities Helping Others Guidance on helping children bereaved by suicide First Responders Guidance for law enforcement, LOSS Teams 					
SCHOOLS / WORKPLACES						
COMMUNITIES						
HELPING OTHERS						
CHILDREN'S CAREGIVERS						
FIRST RESPONDERS	"Bitlinks (bit.ly/sitename) are used the same way as a site's original Internet address.					
BOOKSTORE						
DETAILED LISTINGS	BLOG RECOMMENDED BOOKS ABOUT CONTACT					
National Guidelines: Responding After a Suicide	Suicide & Grief NATIONAL GUIDELINES: RESPONDING AFTER A SUICIDE					

www.personalgriefcoach.net

SUICIDE POSTVENTION Resources (cont'd)

General Resources

American Foundation for Suicide Prevention (AFSP):

https://www.afsp.org/coping-with-suicide-loss/resources.

Suicide Prevention Resource Center (SPRC):

http://www.sprc.org/programmatic-issues/prevention-strategies/postventionand-crisis-response

Action Alliance Postvention Toolkit:

http://actionallianceforsuicideprevention.org/sites/actionallianceforsuicideprevention.org/files/Managers-Guidebook-To-Suicide-Postvention-Web.pdf

SUICIDE POSTVENTION Resources (cont'd)

Youth, adolescents, and school-based postvention resources

