

HOLMDEL HIGH SCHOOL

"A COMMITMENT TO EXCELLENCE"

36 Crawfords Corner Road

Holmdel, NJ 07733

tel: 732-946-1832

fax: 732-946-0093



Kevin Bals
Asst. Principal
kbals@holmdelschools.org

William Loughran
Principal
wloughran@holmdelschools.org

Richard Katz
Asst. Principal
rkatz@holmdelschools.org

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Re: Suicide Prevention "Lifeline" – SAMHSA Newsletter

Attached is information from the Substance Abuse and Mental Health Services Administration (SAMHSA) regarding current national suicide statistics. SAMHSA offers access to suicide prevention information through its "Lifeline" website, which can be accessed at this address:

[http:// www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org)

Please take a few minutes to view this important information and website. Thank you.

Sincerely,

William Loughran
Principal

Did you know that:

- Suicide is the leading cause of death for youth ages 10-24?
- One in 11 high school students made a suicide attempt in the past 12 months?
 - 86% of school psychologists surveyed reported that they had counseled a student who had threatened or attempted suicide?
 - 62% of school psychologists surveyed reported that they have had a student make a nonfatal suicide attempt at school?

According to SAMHSA's National Survey on Drug Use and Health, in 2008, young adults age 18 to 25 were more likely than adults age 26 to 49 to have had serious thoughts of suicide (6.7 percent vs. 3.9 percent).

These statistics underscore why Prevention of Substance Abuse and Mental Illness—including suicide prevention—is the first of eight Strategic Initiatives that will guide SAMHSA's work through 2014 (see Suicide Prevention: Top Priority for SAMHSA and the Nation).

"Suicide is a preventable tragedy for college students, their families, and our communities," said SAMHSA Administrator Pamela S. Hyde, J.D., noting the importance of education about depression, substance abuse, and other suicide risk factors, as well as resources such as SAMHSA's National Suicide Prevention Lifeline. "By working on suicide prevention on campuses and elsewhere, we can save thousands of lives."

Suicide can be prevented through public awareness and education

Lifeline receives 2,200 calls per day.

According to the latest numbers from the National Survey on Drug Use and Health, an estimated 8.4 million adults have suicidal thoughts and 1.1 million attempt suicide every year. Although most of those individuals do not complete suicide, the latest data from the Centers for Disease Control and Prevention indicates that more than 36,000 people died by suicide in 2008.

SAMHSA's support for the Lifeline is a key part of the agency's strategic initiative to promote emotional health, as well as prevent and reduce mental illness, substance abuse, and related problems, such as suicide. Additional information about SAMHSA's National Suicide Prevention Lifeline, the Veterans Crisis Line, and Veterans Chat can be accessed at: <http://www.suicidepreventionlifeline.org>. More information about other SAMHSA suicide prevention programs can be obtained by visiting SAMHSA's Web site, <http://www.samhsa.gov>.

True friends tell.

**Sometimes preventing suicide
is just a matter of speaking up.**

*Screening for Mental Health,
Inc.*

Suicide Prevention: Top Priority for SAMHSA and the Nation

By Pamela S. Hyde, J.D.

Preventing suicide is everyone's business. As members of a family, a school, business, neighbors in a community, faith communities, friends, and the Government, we all need to work together to solve this problem. We simply can no longer allow those we live, work, and play with to believe that suicide is the only solution even in the worst of times.

Suicide prevention is a priority at SAMHSA and a priority for the Nation as this major public health threat weighs on families and communities in every state.

Because of the complexity of issues surrounding suicide and the sensitivity required in efforts to prevent these tragedies, SAMHSA has expanded and deepened its focus on suicide prevention. Suicide prevention is now prominently featured in several of SAMHSA's Strategic Initiatives. Those include Military Families, Trauma (especially childhood trauma) and Justice, and Prevention of Substance Abuse and Mental Illness.

On a national level, Government leadership supports the National Action Alliance for Suicide Prevention. To accelerate efforts to prevent suicide, HHS Secretary Kathleen Sebelius and Department of Defense Secretary Robert M. Gates launched the Action Alliance as a public/private partnership in the fall of 2010. The private sector co-chair is former U.S. Senator Gordon H. Smith, currently President and CEO of the National Association of Broadcasters in Washington, DC. Representing the public sector as a co-chair is Secretary of the Army John McHugh.

Other Services

SAMHSA supports the National Suicide Prevention Lifeline and the Suicide Prevention Resource Center, and offers a wide variety of publications and videos for substance abuse service and treatment providers, mental health counselors, and others in the field.

The Lifeline is a free, 24-hour hotline available to anyone in suicidal crisis or emotional distress. Calls are routed to the crisis center closest to the caller. The phone number is 1-800-273-TALK (1-800-273-8255).

In partnership with the Department of Veterans Affairs (VA), for veterans, active military, and their families, the Lifeline offers a special confidential service. By pressing "1" at the prompt after dialing the Lifeline toll-free number, individuals are connected to trained counselors at the VA.

Research worldwide has repeatedly shown that the way media cover suicide has an impact. That is why SAMHSA is encouraging the next step to help save lives by supporting the release of the Recommendations for Reporting on Suicide (<http://store.samhsa.gov/product/Recommendations-for-Reporting-on-Suicide/SM11-4640>). This set of recommendations, created and reviewed by national experts from the mental health and public health fields, suicidologists and epidemiologists, and journalists and editors, will be the one-source document for all those working in the media industry to use as a guide on how to report on suicide.

On a personal level, by pledging to learn about the signs and symptoms of mental illnesses and substance abuse, the warning signs of suicide, and the way to get someone you care about the professional help they need, each of us can make a difference in people's emotional well-being and suicide prevention.

When it comes to suicide prevention—like so many other issues we work with in the behavioral health field—we need a national dialogue to effect change.

MEMORANDUM

DATE: January 1, 1999

TO: Any Suicidal Young Person

FROM: Tony Salvatore

RE: Being a Parent Left Behind

Just over two years ago, in 1996, my oldest son, Paul, completed suicide. I do some pages on suicide in his memory (see *The Suicide Paradigm*) that a few people visit.

I hear from kids, teens, and young adults who have been suicidal. They say that my stuff lets them see what may have happened had they completed suicide. They feel that maybe if others thinking about suicide could see what happens to those who love them they might reconsider.

I'm going to tell you what it is like to "be left behind." Maybe it will stop you from doing something stupid. Where I'm at right now comes down to three little words: Loss, Anger, and Pain -- lots of each. This the eternal triangle of paternal grief. I live right in the middle and can't move out. It's a lousy neighborhood.

Loss is what happens to someone when you die. Paul's death left me incomplete. It tore something out of me and I will never be the same again. Loss isn't passive or arithmetic -- subtract one son. It's active, it grows, it's a "black hole" that pulls everything in. I'm not whole and the hole won't close. All loss is shit, suicide loss is the worst shit. Losing a kid to suicide is off the shit scale.

My anger came on when the shock wore off -- when the attitude of the police, other official types, the medical examiner, etc., hit home. (Don't make your family have those people in their face.) I got madder as I realized that my son's death didn't have to be. After I learned that those who could have prevented it didn't care came rage. My anger has stopped growing but it hasn't gotten any less intense.

My anger is also self-directed. I feel very responsible. I'm not angry at Paul, but I'll never forgive myself for missing his suffering. I'll never forgive those whom he told of his pain and his plan and who did nothing and who made damn sure that I knew it. Want your "friends" telling your folks that "we knew he was gonna do it." Want your father to think about hurting them every day?

And then there's pain. Pain comes on when loss starts boring into your soul. It gets worse as the inescapable reality of what happened sinks in. Then it becomes chronic. It still hurts, but in a different way. There are times when it still gets very bad. It's always there. It's something that I live with. Something that I don't need.

Dealing with pain has nothing to do with being strong -- nothing about this has made me better or stronger. It's totally trashed me. My memories hurt, my thoughts about my son's suffering hurt, the futility of his death hurts, seeing what it has done to my family, places that I associate with him hurt, interests that we shared hurt, seeing things he liked hurts, enjoying anything hurts, watching other men with their sons hurts, any family event hurts, holidays hurt, the anniversary of his death hurts, looking at anything that belonged to him hurts, and hearing about somebody else's kid doing it hurts too, a lot.

Sure, you know about a "world of hurt." But the hurting just spreads out after suicide. I don't know how your folks will feel if they lose you, but I know for sure that it won't be good. You think nobody cares? Think that they won't give a damn? Listen: It's not what you think of them or what you think that they think of you that matters. *It's what they think of you.* You may not feel that they care, but you could be, and probably are, very, very wrong.

[I know that some of you may be in family situations where what I said really just doesn't apply. If so, I'm very sorry. You may read on if you like, but please read the very last paragraph. Thanks!]

Should you tell them? Yes, absolutely. It may be hard to do so, and your folks may not know how to react. Trust me, it is better to be told that your child is suicidal (or anything else!) than that your child has completed suicide. That is the single most horrible thing that anyone can ever hear. **Don't put it off -- ask for help.** Being suicidal means going down the tube. In a few hours, days, or weeks you may hurt so much and care so little about yourself that you can't do squat.

If you do it, all they'll ever do is ask "why?" and never, never, never get the answer. You take that with you even if you leave a note. And they'll play the "if only" game over and over and over again. It goes "what if we had done this" and "if only we'd done that" and "why didn't he do whatever." They'll come up with a million "could of's" and "should of's" but they'll always lose because they lost you.

Get some help N-O-W!!! That will drop your parents' odds of joining my sad company. Don't make them "suicide survivors." It freaking sucks! First, get help with being suicidal. Next, get help with what took you there. Then get help to keep you from ever going back. Do it!

Suicide is like that bunny on TV - "it goes on, and on, and on and just keeps going." Somebody said that those who complete suicide "leave their psychological skeletons in the survivors closets." One thing's for sure, suicide always leaves something messy, awful, hurtful, and unending behind. Suicide does nothing but screw things up for everybody forever.

All of this isn't about me. Its about you. It's to get you to look out for yourself. You don't have to die, but if you don't fight it you will crash. You don't decide to do it, you do it to end the pain. Suicide isn't a choice, but you can make choices before you lose the ability to do so. Choose to care about yourself right now. Don't do it. **Nothing or nobody's worth it. Screw 'em! Live!**

Tony
Springfield, PA

Postscript: What I wrote above reflects how I felt a few years after losing Paul. Many who read this for the first time may think that I still feel that way. I'm not "over it" or "past it" or "healed," but I am at a different place now. I have rebuilt my life around my loss. I haven't forgotten but I've channeled my energy into things that maybe help keep others from following my path or Paul's. Take care!

RESOURCES

Substance Abuse & Mental Health Services Administration (SAMHSA)

1-877-SAMHSA-7 <http://www.samhsa.gov/prevention/suicide.aspx>

1 Choke Cherry Road • Rockville, MD 20857

- **Mental Health Services Locator** - A facility locator that provides comprehensive information about mental health services and resources by State or U.S. Territory.
<http://store.samhsa.gov/mhlocator>
- **Studies and Statistics on Suicide** - A list of reports and statistics on suicide administered by SAMHSA's Office of Applied Studies (OAS).
<http://www.oas.samhsa.gov/violence.htm#Suicide>
- **National Strategy for Suicide Prevention: Compendium of Federal Activities**
A framework for preventing premature deaths due to suicide in the United States
http://www.samhsa.gov/mentalhealth/NSSPCompendium_v2_March09.pdf
- **Promoting Emotional Health and Preventing Suicide: A Toolkit for Senior Living Communities**
Equips senior living staff with resources to promote mental health and prevent suicide and encourage active participation among residents.
<http://store.samhsa.gov/product/SMA10-4515>

Suicide Prevention Resource Center

www.sprc.org

Provides prevention support, training, and resources to assist organizations and individuals to develop suicide prevention programs, interventions and policies. Also, provides SAMHSA suicide grant and grantee meeting information.

National Suicide Prevention Lifeline 1-800-273-TALK (8255) www.suicidepreventionlifeline.org

The National Suicide Prevention Lifeline is a free 24-hour hotline available to anyone in suicidal crisis or emotional distress.

National Action Alliance for Suicide Prevention <http://actionallianceforsuicideprevention.org/>

A public/private partnership that catalyzes planning, implementation, and accountability for updating and advancing the National Strategy for Suicide Prevention.

Society for the Prevention of Teen Suicide

www.sptusa.org

American Association of Suicidology

www.suicidology.org

Traumatic Loss Coalitions

www.umdj.edu

American Foundation for Suicide Prevention

www.afsp.org

National Institute of Mental Health

www.nimh.nih.gov

Teen Screen

www.teenscreen.org

Suicide Awareness Voices of Education (SAVE)

www.SAVE.org

Monmouth Traumatic Loss Coalition

George Scott, Coordinator (Curriculum and & other school-related matters)

Contact information: 609-915-0684

ngscott02@comcast.net

Manasquan Schools

Susan Tellone-McCoy

732-528-8823 x 1036

County Office of Mental Health

732-431-7200