Talking With Students About Suicide

A Resource for School Staff

This resource provides guidance for school staff supporting planned conversations about suicide, whether as part of instruction or in small group programming. At times, students may initiate conversations about suicide independently in unplanned moments, and recommendations for these circumstances are also discussed near the end of this resource.

School staff can build student knowledge through everyday mental health promotion and literacy, as well as in response to related events or student inquiries. Talking about suicide safely and thoughtfully is one part of a broader approach to student mental health, life promotion and suicide prevention.

> **Individual or small group discussions provide the safest and most supportive format for discussing suicide**, and are strongly recommended over larger, assembly-style formats because they allow for effective monitoring and student support. When addressing the topic of suicide at a class-wide level, special attention needs to be given before, during and after these conversations.

Can talking about suicide put students at greater risk? School staff often worry that discussing suicide might increase the risk for suicidal behaviour, a concern that leads many caring adults to avoid the topic. However, there is no evidence that asking about or discussing suicide in a safe and thoughtful manner increases risk – in fact, talking about suicide can demonstrate care, reduce stigma, encourage help-seeking and open the door to support.

Essential elements of effective suicide prevention:

- Offer factual information.
- Dispel myths.
- Share warning signs.
- Encourage help-seeking.
- Describe supports.
- Inspire hope.

As always, it is important to know and follow your board's suicide prevention policies, procedures and/or guidelines. For more information and support, consult with your school administrator, a school mental health professional that supports your school or your board mental health leader.

BEFORE planned conversations about suicide

Consider and ensure your professional and personal readiness

- Consider your own mental health and how you will take care of your own well-being before, during and after discussions about suicide. Most people have been impacted by suicide in one way or another. Depending on your circumstances and experiences, discussing suicide can activate personal sensitivities. Taking time for your own wellness and reaching out for support if/when needed is a strength, both for you and for students. If you need assistance, there are many services and resources available (e.g., Employee and Family Assistance Program, 9-8-8 Suicide Crisis Helpline, family physician, spiritual/faith/cultural leader, Elder, etc.).
- Know the scope of your role related to suicide prevention. You do have an important role to play in creating caring and supportive environments, noticing concerns, listening without judgment and connecting students to support. You are not expected to assess suicide risk, provide counselling or manage student disclosures related to suicidal thoughts or behaviours alone. Your role is to follow your board's suicide prevention protocol to ensure student safety and connect students with appropriate support immediately (PPM 169).
- **Avoid personal self-disclosure to students regarding your own lived experiences relating to suicide (e.g., your own thoughts of suicide or experiences involving friends, family members or other students).** While staff may intend to reduce stigma or demonstrate empathy, personal disclosures may shift the focus away from students, blur professional boundaries and/or cause distress or confusion for students. A student-centered, supportive and professional approach helps keep discussions focused on student well-being, safety and help-seeking.
- Begin with your own mental health literacy:
  - mental health literacy courses
  - Cultural Humility Self-Reflection Tool for School Staff
  - Prepare; Prevent; Respond: Suicide Prevention/Life Promotion Quick Reference Guide for School Staff

Consult and collaborate with others

- **You're not in this work alone.** Planning and consultation can help ensure discussions about suicide prevention are safe, supportive and responsive to student needs. It may be helpful to check in with your school administrator and a school mental health professional, or your board mental health leader who can support you in doing this important work safely.
- When planning conversations at a class level, consider who you might alert that can provide support in case students become emotionally impacted and require support (e.g., school administrator, guidance educator, support staff, school mental health professional).
- If you are aware of a student for whom this topic could be particularly sensitive, you may connect with their parent(s)/caregiver(s), as appropriate, to discuss a strategy for maintaining their wellness.

Consider timing

> Stand-alone lessons on suicide in response to something in the media or a local death by suicide are not recommended. Be sure to position this topic within a wider mental health promotion and literacy context.

- **If your community has recently been impacted by a death by suicide or another tragic event, consult with your school administrator, your school's mental health professional, or your board mental health leader — there are additional considerations to planning for conversations about suicide as part of a comprehensive postvention approach.**
- The topic of suicide is directly addressed within several curriculum areas (e.g., Gr. 9-12 Healthy Active Living Education; Gr. 10 Canadian History) and can also come up in instruction related to mental health literacy more broadly (e.g., mental health literacy modules for grades 7, 8 and 10).
- While there is no mention of suicide in secondary English, French, Drama or Media Arts courses, in these subjects the topic may come up through plays, movies, literature, poetry and/or works of pop culture, or as a topic selected by students (e.g., independent book study, scene study, monologue, etc.). It is important to anticipate questions and potential areas of discussion that may arise in relation to this material, always being mindful to include messaging that focuses on hope, coping and help-seeking.
- Avoid planning classroom/group discussions about suicide on a Friday or at the end of the day, so that you can monitor students effectively.
- Ensure enough time is allocated as you consider whether this topic will be addressed in a single lesson/group session, across a series of conversations, etc.

Position this topic within a wider mental health promotion and literacy context

- One of the most effective strategies for the prevention of suicide is mental health and wellness promotion. As a school staff member, you are already contributing to life promotion and suicide prevention as you:
  - Create welcoming, supportive and compassionate classrooms and schools.
  - Foster identity-affirming relationships with students.
  - Check in with students to see how they are doing.
  - Promote social-emotional skill development through explicit, identity-affirming instruction.
  - Notice when there are concerns or changes for a student.
- Actively promote student mental health literacy as part of daily learning (e.g., learning about wellness promotion, signs of mental health concerns, help-seeking and help-giving, available supports, stigma reduction).
  - Mentally Healthy Classroom Reflection Tool
  - Wayfinder — a K-12 sequenced guide to develop student mental health literacy

- Life Promotion Toolkit — activities designed by Indigenous youth to support a deeper sense of belonging, meaning, purpose and hope
- Everyday Wellness — everyday classroom practices organized by social-emotional skill category
- School Mental Health Promotion Calendar: your month-by-month resource guide
- Mental Health Literacy Modules for Grades 7 and 8, and Grade 10
- MH LIT: Student Mental Health in Action

Centre student needs and identities

> Recognize and respect the many cultural understandings of mental health, suicide, coping and help-seeking that students and families may bring to these conversations.

- **Think about every student** — Students bring a range of lived experiences, stressors, cultural understandings and mental health needs into these conversations. Approach discussions about suicide prevention with cultural humility and avoid assumptions about student experiences, identities, beliefs or support systems. Where appropriate, consider engaging with local cultural and faith leaders and community partners to help ensure approaches are culturally responsive and reflective of community strengths.
- While most students can manage emotions associated with this topic, some students may experience distress or require additional support during discussions related to suicide (e.g., have considered or attempted suicide in the past, have been bereaved by a suicide death, suicide attempt within the family, etc.).
- If there are students that will be part of this conversation who may be emotionally impacted, be sure to check in and plan together. Refer to Prepare students and provide advance notice below.
- When discussing the topic of suicide, use developmentally appropriate approaches and language (e.g., it can be helpful to provide concrete, descriptive language when discussing suicide and avoid terminology like 'passed away' or 'lost' etc., and language that implies judgement and contributes to stigma, like 'committed suicide' or 'successful suicide attempt.')

Be familiar with mental health supports and services to encourage help-seeking

- Know who in your school you should contact if you are concerned about a student's well-being or safety.
- Be familiar with mental health services and supports in your school, the board and the community, including the process of accessing services.
- Be aware of mental health helplines that can be offered, including those that are identity-specific and reflective of the community you serve. Always include at least one helpline that operates 24 hours a day, 7 days a week (e.g., Kids Help Phone: 1-800-668-6868 or text 686868).

Be prepared to respond if students become distressed and/or disclose thoughts about suicide

- **Be familiar with your board's suicide prevention protocol prior to any planned discussions with students.** If you need help locating your board's protocol, ask your school administrator.
- Know that you may become concerned about a student's well-being or safety during conversations, so be ready to listen and provide immediate support by following your board's suicide prevention protocol. **Do not address individual student concerns in front of the whole class/group.**
- Consider any plans you will put in place to ensure the safety and well-being of students who may become impacted during discussions.
- Refer to Prepare; Prevent; Respond: Suicide Prevention/Life Promotion Quick Reference Guide for School Staff for helpful prompts and key considerations when responding to a student experiencing thoughts of suicide.

Prepare students and provide advance notice

- In consultation with your school administrator and school mental health professional, consider how much advance notice would be supportive given your school context, centering student needs.
- Consider the benefits of co-creating agreements to foster supportive, mentally healthy spaces.
- Understand that students may bring a range of lived experiences, mental health needs and personal connections to the topic of suicide. It may be helpful to check in with individual students (and/or their parent/caregiver as appropriate) who may find this topic difficult, to understand what they need and would find supportive. Be sure to co-create a plan of support in the event they become emotionally impacted by the discussion.

Consider parent/caregiver engagement

- Consider how you will work with parents/caregivers to support their child as they engage in conversations about suicide (e.g., awareness of the discussion, timing, content, etc.), ensuring appropriate contact information is provided so parents/caregivers can ask questions, address concerns and/or share information about their child.
- Consider providing parents/caregivers with specific resources and information so they can support their child with the conversation at home: Suicide Prevention Guide for Parents and Caregivers (available in 18 languages, including American Sign Language and Langue des Signes Québécoise).
- Consult with your school administrator about how to navigate any potentially sensitive situations (e.g., if a parent/caregiver indicates they do not want their child to participate in discussions about suicide). Appreciate that there are some circumstances in which it is advisable for a student to avoid these discussions and to be supported in other ways at other times (e.g., recent experience involving suicide).

DURING planned conversations about suicide

Safe, supportive process and evidence-informed, identity-affirming messaging

To begin, consider co-created agreements with a focus on safety and support

- Encourage students to weigh in on what a supportive space means for them.
- Encourage use of respectful, non-judgmental language (e.g., 'died by' suicide instead of 'committed' suicide).
- Establish clear boundaries to support safety and minimize any sharing of information that could inadvertently cause harm/risk, including graphic details (e.g., methods and/or location of suicide death), personal disclosures and/or lived experiences.
- Review available supports that students can access during the school day should they become emotionally impacted by the discussion or require help with suicide concerns for themselves or a friend.
- Begin the discussion with a focus on specific well-being and coping strategies, encouraging students to draw on strategies that work for them as needed, knowing different strategies will work for different students.

Monitor students throughout discussions and activities and be prepared to respond if students become distressed and/or disclose thoughts about suicide, following your board's suicide prevention protocol.

Safer conversations about suicide: essential elements	
DO	**DON'T**
DO provide factual information about suicide.	DON'T use images or stories that glamourize suicide.
DO dispel myths.	DON'T emphasize celebrity deaths by suicide.
DO share warning signs.	DON'T show images of those who have died by suicide, including faces and/or details of means.
DO describe available identity-affirming supports and pathways and caution against non-credible sources of support (e.g., artificial intelligence, social media).	DON'T discuss methods of suicide or disclose your personal stories/experiences about suicide.
DO encourage students to seek help from trusted adults.	DON'T suggest simple explanations for suicidal thoughts or actions.
DO ensure students know where and how to access support at school, in the community and through 24/7 crisis supports.	DON'T make suicide the sole topic of a school assignment.

Safer conversations about suicide: essential elements	
DO	**DON'T**
DO amplify strengths, connectedness, coping and well-being.	DON'T use stigmatizing language (e.g., use 'died by suicide' not 'committed suicide' as the latter implies criminal intent).
DO inspire hope.	DON'T portray suicide as a way to solve problems or get revenge.

Provide factual information and dispel myths

Help to validate and enhance good information students have acquired and clarify any misconceptions or misinformation. Know and share the facts and take time to address and dispel myths and clarify terminology as needed. Highlight the links between suicide and social determinants of health. Say things like,

- "Suicide is complex and is not caused by a single event such as fighting with parents, a bad grade, bullying or the breakup of a relationship. It is usually linked to many factors, including mental illness."
- "It's important to know that there is help available for mental health concerns and that people can and do get better."
    - When using examples, keep the emphasis on hope, support and healing.
- "A person's identity is never a suicide risk factor. Higher rates of suicide among some groups reflect the impacts of racism, colonialism, discrimination, stigma, lack of identity affirmation, inequitable access to supports and other social determinants of health (Suicide Prevention and Life Promotion in Schools)."

> When sharing data about suicide, take care not to frame suicide as expected or inevitable for any group of people. Youth suicide is a complex issue that is connected to a wide range of influences beyond the individual, which are **compounded by social inequities, racial injustice and systemic oppression**.

Share warning signs, encourage help-seeking and describe available supports

Warning signs

There are usually warning signs when it comes to suicidal thoughts and actions. These are changes that school staff can watch for, but it is also important to share this information with students because they may be first to observe something in a peer experiencing suicidal thoughts and/or actions. A more fulsome list of changes that may be warning signs for suicide is available here (page 4). Be sure to discuss:

WARNING SIGNS
• withdrawing from friends, school or activities
• talking or writing about suicide or wanting to die

WARNING SIGNS (CONT'D)
• low moods, signs of depression (sadness, irritability, less enjoyment of previously enjoyed activities, difficulty sleeping or eating) • conveying they feel hopeless, overwhelmed, helpless, out of control or like a burden (e.g., "I don't matter," "Everyone would be better without me.") • violent, rebellious, reckless or thrill-seeking behaviour (e.g., problematic substance use) • sudden personality or mood shift (e.g., a person who experienced depression suddenly becomes calm, happy or outgoing) • giving away important belongings, saying goodbye or collecting/possessing items that could be used for suicide actions

Encourage help-seeking

When discussing suicide, remind students that help-seeking is a skill that improves with practice, and that support is available. Encourage students to think about their circle of support, including family members, caregivers, school staff, community members, Elders, faith leaders, cultural supports, coaches, mentors or other caring adults (e.g., My Circle of Support — Student Help-Seeking Resource). Emphasize the following with students:

ENCOURAGE HELP-SEEKING	
You're not alone—reach out.	Mental health concerns are common, and no problem is too small to share. You deserve support.
Ask for help in your own way.	Simple, honest phrases can start the conversation, whether it's about yourself or a friend (e.g., "I've been feeling _____ lately. Can I talk to you about it?", "Do you have time to meet with me? I'm worried about my friend and think I might need some help.")
Find the right support.	If one option doesn't feel right, keep trying until you find a good fit.
Act immediately if suicide is a concern.	Tell a trusted adult or contact a crisis service right away.
Support friends but involve adults when needed.	Listen and care, but don't keep serious concerns (especially about suicide) to yourself — make a connection to a trusted adult (see MH LIT: Student Mental Health in Action lesson "Help a Friend" for more detailed information). Suicide warning signs may sometimes be expressed through a friend's social media posts, including both direct statements and more subtle or indirect expressions of distress. Messages indicating suicide risk can appear in text, memes, images, song lyrics, artwork, jokes or vague statements that seem casual or humorous but convey themes of death, hopelessness or wanting to die.
Feeling better can take time.	It's a process — stick with it! Your wellness is worth it.

Describe available supports

Discuss the range of mental health supports and services available to students, both at school and in the community, providing specific services based on your school board and region:

DESCRIBE AVAILABLE SUPPORTS

- There are supports at school, like school principal/vice-principal, guidance educator, student success teacher, learning resource teacher, Elder, student support staff (e.g., child and youth counsellor, graduation coach for Black and Indigenous students, chaplaincy leader), school mental health professional (e.g., social worker, psychology staff), or mental health and addiction nurse.
- There are supports in the community, including local child and youth mental health services, 24/7 crisis services and distress centres and identity-affirming/identity-specific supports.
- Directing students towards evidence-informed, youth-friendly information online provides another way of enhancing mental health literacy and may build readiness for help-seeking (e.g., Student site — School Mental Health Ontario and Is It For Me? Tips for Evaluating Online Mental Health Information).

> **Helpline Hub** highlights a range of available helplines, tips for help-seeking, identity-specific supports and more.

Inspire hope: amplify strengths, connectedness, coping and well-being

It is essential to balance conversations about suicide with themes of mental health promotion and ways to maintain well-being.

INSPIRE HOPE

- Consider your own wellness and do your best to model healthy coping strategies for students.
- Encourage students to identify their strengths, abilities and people in their lives who provide support, affirmation and understanding.
- Ask students about their wellness and coping strategies and encourage them to use approaches that help them feel better and solve problems.
- Discuss activities that promote wellness:
  - Keep regular schedules and routines.
  - Nutrition.
  - Sleep.
  - Physical activity.
  - Build connection with yourself, your community and the land around you.
  - Cultural and spiritual practices.
  - Be gentle and kind to yourself.

INSPIRE HOPE (CONT'D)

- Keep the tone of the conversation positive, reinforcing the importance of coping skills and protective influences that can be relied on in times of crisis. Many students know and use effective stress management strategies and can learn about strategies from each other. Say things like:
  - "What are some ways young people can cope with stress?"
- Remind students that:
  - Thoughts of suicide are usually associated with problems that can be managed, solved or treated.
  - Most people who receive appropriate help with a mental health concern — like depression, anxiety or another emotional disorder — can recover and experience well-being.
  - It sometimes takes more than one try to find the right support, but asking for help is the first step towards healing.

AFTER planned conversations about suicide

In your follow-up, consider class/group and individual student needs.

- Is there additional information that you think students should have in this area?
- Were there questions that you need to find answers to, or comments that require further discussion as a class/group?
- Consider any students that may have lived experiences, stressors or mental health needs and might benefit from a check-in or follow-up support. Do you have concerns that might require follow-up with a parent/caregiver?
- Consider ways to continue integrating mental health promotion and literacy during class/group time.

Consider your own well-being

- How are your own mental health and well-being following discussions about suicide? Do you need any additional support or debriefing time?
- What will you do to take care of your own well-being?

When students initiate conversations about suicide

Occasionally, individual students or small groups of students will approach school staff outside of class/group to discuss suicide. This may occur as a connection to learning about mental health, in reaction to something they have seen in the media or online, related to a concern they have for themselves or someone else, or in response to a death by suicide. In these situations, school staff can:

- **Listen closely and determine if students are concerned about themselves or someone else.** If a student discloses thoughts of suicide or discloses concerns about a peer who may be at risk of suicide, follow your board's suicide prevention protocol.

- **Facilitate thoughtful, supportive conversations.** Provide factual information, dispel myths, share warning signs, encourage help-seeking, describe supports and inspire hope — in a more contextualized manner.
- **Understand that you are not alone** in carrying information about a student who has indicated that they are experiencing suicidal thoughts or behaviours. It is important that you quickly engage with a mental health professional, as per your board protocol. **Never leave a student who has indicated suicidal intent alone.**

Sometimes individual students or small groups of students will raise this topic during class or group time. Unplanned class/group discussions about suicide are not recommended — they do not allow sufficient preparation, support planning or monitoring of student well-being. The topic of suicide is best handled with more thoughtful planning and preparation, as outlined above.

- First and foremost, if students raise this topic, try to determine if there is a concern about suicide that may need to be addressed, and follow your board's suicide prevention protocol.
- Validate students' interest in understanding suicide, while guiding the conversation to a later time when you can address the topic with more thoughtful preparation:
  - "I appreciate you asking about this; suicide is a complex topic and can take time to unpack and understand. I'll need to think about how we can address this safely as a class community. Please know that this is not about avoiding the topic or reinforcing stigma. It's because, as school staff, we know there are helpful and unhelpful ways to discuss suicide, and we want to ensure any conversation is approached thoughtfully and in a way that best supports all students."

Knowing students, reviewing the above guidelines, consulting with others (e.g. school administrator, school mental health professional) and using professional judgement will help determine the best way forward.

Thank you for taking the time to learn how to talk to students about suicide in thoughtful and supportive ways. We hope this resource has helped you see how you can help, just by being the compassionate and caring adult you are. If you have additional questions about suicide prevention and life promotion, speak to your administrator, a school mental health professional, or your board mental health leader.

Additional resources

For further guidance on planning mental health related activities more broadly, please consult:

- School Mental Health Decision Support Tool: Student Mental Health Awareness Initiatives — Version for School Administrators
- Decision Support Tool for Classroom Teachers — Checklist for Educators for the Planning of Student Mental Health-Related Activities
- School Mental Health Decision Support Tool: Peer Support Initiatives — Version for System and School Leaders

Glossary of key terms

GLOSSARY	
Life promotion	A concept from Indigenous culture that encourages hope, belonging, purpose and meaning through connection to self, the land and community. By relying on stories and wise practices we work to empower our communities (Thunderbird Partnership Foundation).
Suicide prevention	Activities/initiatives designed to reduce risk and increase factors that promote resilience.
Suicide intervention/ risk management	A direct effort to prevent a person from attempting to take their own life intentionally. This includes supporting students transitioning to and from mental health care.
Suicide postvention	Activities developed to facilitate individual and system recovery after suicide and to prevent adverse outcomes such as further suicides.
Non-suicidal self-injury	A deliberate attempt to cause injury to one's body without the conscious intent to die.
Suicidal ideation	Suicidal thoughts, including thoughts about how to kill oneself, ranging from a fleeting consideration to a detailed plan.
Suicide attempt/plan	• **Attempt:** Injuring oneself with the intent to end one's life but not dying as a result of one's actions. • **Plan:** Identifying the means to die by suicide, a timeline to complete the plan, and the intent to do it.
Death by suicide	Injuring oneself to the degree that it results in death.
Contagion	The process by which a death by suicide (or suicidal behaviour) increases the suicidal behaviour of others. Adolescents are the most susceptible age group for contagion.
Suicide cluster	When contagion occurs, schools, school boards and/or communities can experience multiple deaths in a relatively short period of time. Each death increases vulnerability and risk for further contagion.
Memorialization	Ways to commemorate a death, including death by suicide. This can include flags at half mast, tree planting, memorial displays, etc. Some memorial activities may cause harm by unintentionally glamorizing the death, leading to contagion.