A Training Video For Adults Who Work With Native Youth

Suicide prevention remains challenging among youth, as many do not disclose suicidal ideation to others before attempting suicide. However, emerging research suggests that youth may disclose depression symptoms and suicidal ideation via social media, such as Facebook and Twitter. These public social media disclosures may provide new opportunities to identify youth at risk and connect them to appropriate resources and support.

Over the last year, We R Native and THRIVE staff at the Northwest Portland Area Indian Health Board and the Social Media and Adolescent Health Research Team (SMAHRT) at Seattle Children’s Hospital teamed up to design a video for adults who work with Native youth, to help them respond to concerning posts on social media.

What are “Concerning Posts”?
Concerning posts include those that express depression or intent to hurt one’s self or others, that have been posted on a social media site, such as Facebook, Instagram, Twitter, or Snapchat. Between 25% and 33% of young adults post references to depression symptoms on their Facebook profiles.

Our Goals for the Training
Our primary goal is to ensure that everyone is aware of and feels trained to respond to youth who view or post concerning messages on social media.

The video will prepare adults who work with Native youth to:
• Identify youth who witness concerning social media posts, letting them know that they need not respond alone.
• Assess those who see concerning posts, and address their concerns, frustration, or fatigue.
• Confidently implement the "Viewer Care Plan Handout", which will walk you through the steps for supporting youth who post and view concerning social media posts.

To access the training visit: www.HealthyNativeYouth.org
## TIPS FOR IDENTIFYING SUICIDALITY AND TALKING ABOUT IT

### What language should I use when talking about suicide?

The way we talk about suicide is important and has changed in recent years. From now on, please:

<table>
<thead>
<tr>
<th><strong>USE</strong></th>
<th><strong>AVOID</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Died of Suicide</td>
<td>Committed Suicide</td>
</tr>
<tr>
<td>Suicide Death</td>
<td>Successful Attempt</td>
</tr>
<tr>
<td>Suicide Attempt</td>
<td>Unsuccessful Attempt</td>
</tr>
<tr>
<td>Suicide</td>
<td>Completed Suicide</td>
</tr>
<tr>
<td>Describe the Behavior</td>
<td>Manipulative</td>
</tr>
<tr>
<td>Working with</td>
<td>Dealing with Suicidal Patients</td>
</tr>
</tbody>
</table>

### What posts should I worry about?

"FML (Fuck My Life). It’s too hard, I can’t take it anymore."

"Nobody would notice if I went missing."

"I’m done."

"I don’t want to do this anymore, there’s no point."

"F**K IT GOODBYE"

"I’m worthless...no one cares about me. Wish I wasn’t here."

"Sometimes you have to fly with the eagles"

Photos of alcohol bottles, pills, weapons, or self-harm.

Depressing or sad song quotes.

Gun, knife, pills, or noose emojis:ัง

No doubt, it can be difficult to interpret the meaning of some posts. Remind students that if anything makes them feel worried or uncomfortable, they should come to you for help. You will follow the steps in the "Viewer Care Plan Handout" to assess the situation and provide needed support.