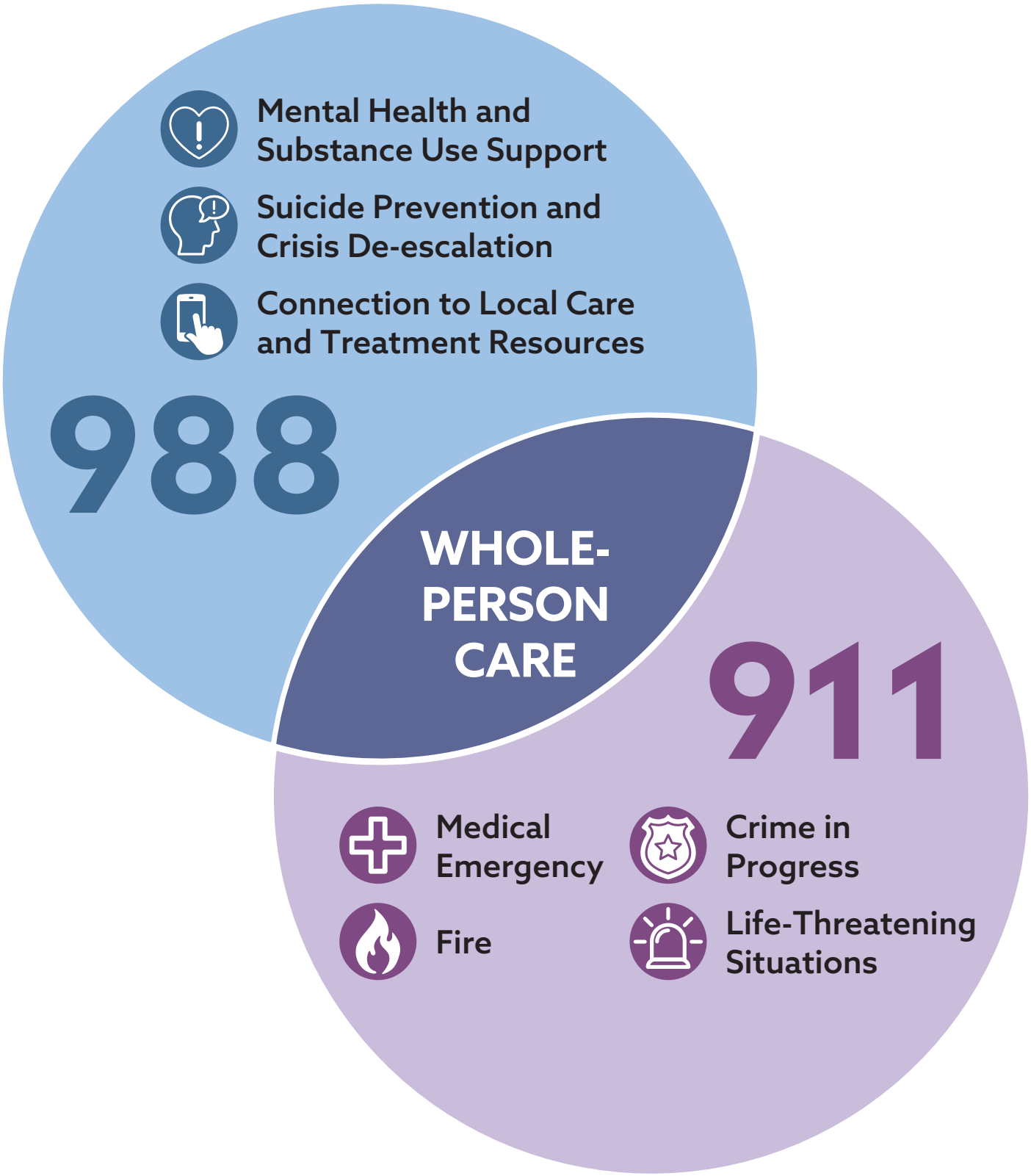
Kansas

ZERO Suicide

A Framework for Health and Behavioral Health Care Systems

CONNECTS

While both numbers connect individuals to help during a crisis, they serve different purposes.



Calling the appropriate number helps ensure emergencies receive immediate response from first responders, while mental health or emotional crises can be met with trained crisis support and resources. Understanding the difference can improve safety, reduce confusion during stressful situations, and connect people to the care they need.

Zero Suicide CONNECTS

Creating space to
Overcome stigma for those
Needing support and
Nurturing resources through
Empathy and
Compassionate communication to help identify
Treatment options while remembering
Self-care

The Kansas Department of Health and Environment received funding from the Substance Abuse Mental Health Services Administration (SAMHSA) to support the Implementation of Zero Suicide in Healthy Systems in Kansas beginning in 2020. To learn more about this initiative, visit Zero Suicide in Health Systems. While Zero Suicide presents an aspirational answer to a complex challenge through improving suicide care for those within health and behavioral health systems, individuals and communities can also have a role in suicide prevention to contribute to safer and more supportive communities.

The purpose of Zero Suicide CONNECTS is to provide a quick reference when supporting someone identified as being at risk of suicide through screening or self-disclosure. Resources in CONNECTS are intended for use in conjunction with gatekeeper training that equips staff to be effective listeners and caring supporters able to assist in accessing services. For connection to evidence-based trainings, please visit Zero Suicide in Health Systems.

Another resource for your consideration and sharing with someone at risk of suicide is developing kits with small, meaningful items to support their coping skills. To learn how to build a kit to support someone or purchase a kit, visit Wichita State University's Suspenders4Hope's Hope Kits at Mental Health Resources in Kansas and Find Your Anchor.

Zero Suicide CONNECTS does not diminish the importance of professional mental health support for someone at risk of suicide. It is intended to support you in helping others stay safe until they are able to engage in professional services. If imminent danger is presented to either you or the person you are assisting, call 911 immediately.

Please share your experiences, feedback and any issues with resources in Zero Suicide CONNECTS through this QR Code or at kdheks.co1.qualtrics.com/jfe/form/SV_9XN3knEONA8cES2.

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A Framework for Health and Behavioral Health Care Systems

Kansas Department of Health and Environment

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Red Flags and Calls for Help

Identifying early warning signs of suicide can save lives. This quick reference sheet outlines common emotional, behavioral and verbal indicators that someone may be in crisis. While no single sign guarantees risk, noticing patterns or sudden changes is a strong cue to engage, listen and take supportive action.

Behavorial and Nonverbal Signs

- Family/friend withdrawal.
- Loss of interest in activities/hobbies.
- Giving away personal items.
- Change/loss of appetite.
- Risky behaviors.
- Drug/alcohol misuse.
- Disturbed sleep.
- Loss of interest in appearance/hygiene.

Verbal Signs

- “All my problems will end soon.”
- “I can’t do anything right.”
- “I just can’t do this anymore.”
- “I am a failure.”
- “I’m a burden.”

Emotional Signs

- Sadness
- Anger
- Desperation
- Loneliness
- Guilt
- Worthlessness

If you notice these signs, take it seriously.

- Zero Suicide CONNECTS may assist your conversation.
- 988 is a 24/7 resource available for mental health support for you and the person.
- 911 is the best contact if there is an emergency.

Communicating With Compassion

When someone shows signs of emotional distress or suicidal ideation, the way you respond matters. This guide offers clear strategies to help you start the conversation, listen with empathy and reflect what the person is feeling, without judgment. Even a short conversation can make a life-saving difference.

Asking Directly:
You want to know the answer, so you know how to help.

- "Are you thinking about suicide?"
- "Are you thinking about killing yourself?"
- "This is important, and I want to help."

You don't have to be a therapist to save a life. Just showing up, listening and speaking with care can open the door to hope.

Practice Active Listening:
Listen to hear, not just to respond.

- Maintain open body language.
- Nod and show interest.
- Don't rush, give them time to speak.
- Be present with them.
- Be clear and calm.
- Let them know there is no judgement.

Reflect What You Hear:
Validate their feelings and avoid assumptions.

- "You feel like you just can't live with the pain."
- "It sounds like you've been feeling really overwhelmed lately."
- "I can hear how sad this has made you."
- "What I hear you saying is..." followed by their own words when possible, showing you truly hear them.

Safety Planning

A Safety Plan is a personalized document created with someone in suicidal crisis. It lists coping strategies, supportive contacts, and resources to use in times of risk. Plans should be regularly updated as needs change. The following example may help responders guide the process step by step while ensuring the person feels supported and safe.

Steps	Discussion Prompts	Examples
Identify the Warning Signs	"What signs tell you that a crisis may be starting? Are there certain thoughts, feelings, moods or situations?"	▪ Remembering trauma. ▪ Feeling depressed/hopeless. ▪ Going through a breakup. ▪ Irregular sleep. ▪ Isolation
Internal Coping Strategies	"What are some activities you can do by yourself to help soothe or distract you?"	▪ Walking ▪ Reading ▪ Listening to music. ▪ Hobbies
Social Contacts for Distraction	"Where can you go or who can you contact to feel connected or distracted?"	▪ People and places. ▪ Friends who talk about themselves. ▪ Library ▪ Coffee shop/store.
Family/Friend for Support in a Crisis	"Who can you call and ask for help when you're in a crisis?"	▪ Encourage 2-3 people in their personal lives to reach out to. ▪ People they trust and are able to assist them.
Professional Resources	"Let's make a list of professionals you can also reach out to when you are feeling this way."	▪ Print out of resources. ▪ 988 ▪ Local clinics. ▪ Emergency services.
Making the Environment Safer	"What can we do to make your space safer and more comfortable?"	▪ Not just lethal means removal. ▪ A comfortable space is important too! ▪ Have they eaten, drank water, slept.
Reflecting	"What is one thing that is most important to you and worth living for?"	▪ Saving physical and digital copies. ▪ "Even if you can't do everything, starting with one step can keep you safe for the moment."

Safety Planning

On the following page, we've included the **Stanley-Brown Safety Plan**.

STANLEY - BROWN SAFETY PLAN

STEP 1: WARNING SIGNS:

1. _____
2. _____
3. _____

STEP 2: INTERNAL COPING STRATEGIES – THINGS I CAN DO TO TAKE MY MIND OFF MY PROBLEMS WITHOUT CONTACTING ANOTHER PERSON:

1. _____
2. _____
3. _____

STEP 3: PEOPLE AND SOCIAL SETTINGS THAT PROVIDE DISTRACTION:

1. Name: _____ Contact: _____
2. Name: _____ Contact: _____
3. Place: _____ Address: _____
4. Place: _____ Address: _____

STEP 4: PEOPLE WHOM I CAN ASK FOR HELP DURING A CRISIS:

1. Name: _____ Contact: _____
2. Name: _____ Contact: _____
3. Name: _____ Contact: _____

STEP 5: PROFESSIONALS OR PROFESSIONAL SERVICES I CAN CONTACT DURING A CRISIS:

1. Professional/Services Name: _____ Phone: _____

   Emergency Contact: _____
2. Professional/Services Name: _____ Phone: _____

   Emergency Contact: _____
3. Emergency Department: _____

   Emergency Department Address: _____

   Emergency Department Phone: _____
4. Crisis Line Phone (e.g. 988): _____

STEP 6: MAKING THE ENVIRONMENT SAFER (PLAN FOR LETHAL MEANS SAFETY):

1. _____
2. _____

Stanley-Brown
Safety Planning Intervention

Listening for a Turning Point

When someone begins to shift away from suicidal thoughts, they may not ask directly for help. Here's how different turning points may sound and how you can supportively respond.

A turning point helps a compassionate conversation move toward safety. You are translating why they live into how they stay safe. Turning point signals may sound like:

- "My kids are the only reason I'm still here."
- "I don't want to die... I just want this pain to stop."
- "I almost didn't tell you this..."
- "I don't think I should be alone tonight."
- "I don't know what to do anymore."

Acknowledge the uncertainty/ambivalence: Most people are not 100% decided on dying, both the wish to die and the will to live can be present at the same time.

- "I can hear that you are feeling incredibly alone right now, and that suicide feels like a real option for you. I also know that you are curious to see how a change in your medications could help. I wonder what it would be like to start thinking about some ways to keep you safe so you can work with your provider to make those medication changes."

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4 steps to bridge to safety planning:

1) Acknowledge the turning point.

2) Reflect what matters.

- "It sounds like your kids/family/faith/work really matter to you."

3) Ask permission to shift (gently transition to safety planning).

- "Given how important those connections are, would it be okay if we talked about a plan to help keep you safe."

4) Bridge meaning to action (link what matters to safety steps).

- "Since staying connected to your kids matters so much, let's think about what helps you get through a hard night."

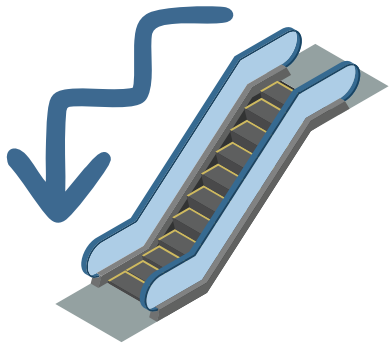
Altogether it might sound like:

- "I can hear that you are feeling really overwhelmed and isolated right now and there is a part of you that wants to give up. I also can see that your kids mean so much to you and you want the best for them (ambivalence, acknowledging the turning point and reflecting what matters). Given how much they mean to you, I'm wondering if we can work together on a plan, something you can turn to when things feel this heavy, to help you stay safe and connected to your kids (permission to shift and connecting meaning to action)."

What if... Crisis Response Prompts

Unpredictable or difficult conversations with someone in emotional crises may come with challenges. You can keep this sheet easily accessible for real-time reference needs.

What if...	Potential responses...	Things to consider...
They say they are suicidal, but don't want help.	"Thank you for sharing. I know you don't want help, but I want to ensure your safety." "You don't have to commit to anything long-term. Let's focus on staying safe today."	▪ Offer to sit and listen. ▪ Offer to call 988 with them. ▪ Immediate risk may need emergency services.
They say they are not suicidal, but something still feels "off."	"Thank you for letting me know, but I am here if anything changes. You are not alone." "I can't force you to talk, but I'd like to follow up with you later to see how you're feeling."	▪ Offer follow up, but setting a specific timeline. ▪ Document/flag behavior for future/frequent follow up. ▪ Encourage them to call 988 or other resources.
They say, "nothing can help me."	"It sounds like you are hurting. Let's take one step now and handle the rest later." "That's a really heavy feeling. Can we talk about what's making you feel this way?"	▪ Avoid "it'll get better" and validate the pain they may be feeling. ▪ Ask about previous activities that may have helped them. ▪ Try again with a safety plan/ connecting them to a crisis professional.
The person gets angry and refuses to talk.	"I can see this is overwhelming right now. I don't want to pressure you, but I am here to help." "We don't have to talk about everything today, but I'd like to make sure you're safe for now."	▪ Offer a break or calm space. ▪ Continue to monitor non-verbal cues. ▪ Give them printed resources/referrals. ▪ Immediate risk may need emergency intervention.



Staying Calm and De-Escalation

Your composure can make the difference between escalation and connection in a crisis situation. This guide offers dos and don'ts along with simple techniques to help you regulate yourself, communicate effectively and reduce tension. Staying calm protects the person in distress as well as your own personal well-being.

Keeping Your Cool

- Focusing on the person and not the outcome.
- Knowing you can ask for backup if it gets too overwhelming.
- Using scripts when needed.
- Regulating your breathing.
- Grounding yourself.
  - Planting your feet and keeping your hands together.

De-Escalation

Do:

- Stay calm.
- Speak slowly, confidently and calmly.
- Take breaks.
- Be aware of increased aggression.

Don't:

- Argue/challenge
- Threaten
- Rush
- Move/fidget

Caring for Yourself After Caring for Others

Supporting someone through suicidal crisis can be emotionally and physically draining. Recognizing your own needs and taking steps to recharge is important for you to continue providing safe and compassionate support.

Knowing When to Refuel

- After taking care of a mental health crisis situation.
- Whenever you feel your 'glass is empty'
  - It's important to take care of yourself in order to support others.

Acknowledge Your Feelings

Suppressing feelings of sadness, worry, or frustration can build stress over time.

Make Time for "You"

Balance your emotions by doing activities you enjoy, like:

- Hobbies/Crafts
- Time with friends
- Time outside

Relax and Ground

- Deep breathing
- Take a walk
- Stretch
- Reset that nervous system!

Maintain Boundaries

Remind yourself that you cannot control other's choices, but you can offer support.

Debrief

- Share your experience with someone you trust.
- Anonymity is key!
  - Leave out any information that could identify the individuals you support.

Seek Professional Help

- This is a reminder that it is okay to not be okay, even as a responder.
- Inquire whether your employer offers an Employee Assistance Plan (EAP).

You cannot fill someone else's cup if yours is empty.

Resources

Please personalize this list of resources with contacts for your local community.

Resource	Local	National/State Level	Explanation
Crisis/Suicide Prevention		988 Suicide and Crisis Lifeline Call or Text: 988	Immediate, life-saving support with trained counselors. Connects people to trained mental health crisis teams. Vital in managing active suicidal ideation.
LGBTQ+ Crisis and Support		The Trevor Project Call: 1-866-488-7386 Text START to 678-678	LGBTQ+ individuals are at higher risk for suicidal thoughts due to stigma, isolation and lack of affirming care. Access to dedicated support can be lifesaving.
Domestic Violence Hotline		Domestic Violence Hotline Call: 1-800-799-SAFE Text START to 88788	Domestic abuse survivors may face compounded trauma, hopelessness and suicide risk.
Sexual Abuse Hotline		RAINN Call: 800-656-4673 Chat: Online Hotline	Offers confidential help to people coping with past or present abuse, a major suicide risk factor.
Rape/Sexual Assault Center		RAINN Call: 800-656-4673 Chat: Online Hotline Kansas Coalition Against Sexual and Domestic Violence (KCSDV) Call SafeLine Kansas: 24/7 at 1-888-363-2287 or Text SAFE to 847411	Sexual violence survivors have an increased suicide risk, and these centers offer trauma informed support.
Police Paramedics EMS		Call: 911	Often the only emergency responders in rural areas. Lifesaving in acute crisis situations.
Hospital Emergency Services		Call: 911	May serve as both physical and mental health crisis points, especially in areas without psych units.

Resource	Local	National/State Level	Explanation
Substance Abuse Counseling		SAMHSA 988Lifeline Call or Text: 988	Professional help in recovery reduces impulsivity and depression, critical suicide risk factors.
Self Help Groups (AA, NA, etc.)			Addiction and suicide are deeply linked. Peer-led support groups offer hope and accountability.
Medical Clinic/ General Practitioner			Many people disclose suicidal thoughts during physical health visits. Providers should know how to respond.
Religious/Spiritual Groups			Trusted community relationships can offer belonging, purpose and early recognition of distress.
STD Information/ Testing Sites		CDC Get Tested	Sexual health issues can contribute to depression, stigma or fear. Clinics may also screen for mental health.
Student Services			School counselors and social workers are key for youth support and early intervention.
Children Services		Kansas Department for Children and Families	Family trauma and child welfare involvement are linked to suicide risk. A good resource to contact if warning signs are identified.
Child Care Referrals/Parent Training		Kansas Department for Children and Families	Reducing parental stress and burnout can help prevent crises in caregivers and children. Resources are available for guidance.
Mental Health Services/Outreach Clinics		NAMI-National Alliance on Mental Illness	Core to long-term suicide prevention for diagnosis, counseling, medication and support.
Veteran Services		Vets4Warriors Call: 1-855-838-8255	The nation's leading 24/7 military peer support program staffed by veterans. It provides immediate, confidential support to members of the military community to help address challenges before they become crises.