Bree HEALTH

SUICIDE PREVENTION AWARENESS GUIDE

10 practical articles and tip sheets for recognizing distress, starting conversations, and strengthening connection.

HOW TO USE THIS GUIDE

Suicide can affect individuals, families, and communities across all backgrounds, yet stigma and misunderstanding can make it difficult for people to seek support when they need it most. By increasing awareness, recognizing the importance of connection, and approaching mental health with empathy, we can help create an environment where everyone feels supported, valued, and empowered to reach out for help.

At Bree Health, we are committed to creating a workplace where mental health is supported with compassion, understanding, and care. This guide was developed to support that commitment—specifically by deepening our collective awareness of suicide prevention, reducing stigma, and encouraging meaningful conversations around mental health and well-being.

Connection can be protective.
You do not have to be a clinician to notice, ask, listen,
and help someone reach support.

📘 What You'll Find Here

Share the full guide or use individual pages as monthly wellness resources, manager tools, caregiver handouts, or discussion starters.

The language is designed for a general workplace audience and includes resources relevant to youth, adults, men, women, and postpartum parents.

👉 Our Shared Responsibility

This guide invites all employees, regardless of background, to reflect, learn, and take part in shaping a more reflective community.

We hope it sparks awareness, empathy, and action.

If there is immediate concern: In the U.S., call or text 988 for the 988 Suicide & Crisis Lifeline. If someone is in immediate physical danger, contact emergency services.

UNDERSTANDING SUICIDE PREVENTION:
WARNING SIGNS AND RISK FACTORS

Suicide prevention begins with paying attention to changes, taking concerns seriously, and helping people connect with support. There is no single sign that can predict suicide, and people may show distress in different ways. A combination of warning signs, major stressors, and changes from someone's usual behavior deserves attention.

What to notice:

- Talking about wanting to die, feeling hopeless, trapped, or like a burden.
- Withdrawing from friends, family, school, work, or activities they usually value.
- Marked changes in mood, sleep, substance use, agitation, recklessness, or self-care.
- Giving away meaningful belongings, saying unexpected goodbyes, or putting affairs in order.
- Experiencing a major loss, relationship crisis, financial strain, bullying, trauma, serious illness, or another overwhelming change.

Keep in mind: Risk factors are not destiny. Supportive relationships, access to care, problem-solving skills, a sense of purpose, and feeling connected to family, friends, school, work, culture, or community can all be protective.

What to do:

If something feels different, check in. Name what you have noticed, ask how the person is doing, and listen. If you are worried about suicide, ask directly.

When concern is urgent, stay with the person when possible and help connect them with professional or crisis support.

HOW TO ASK:
TALKING TO SOMEONE YOU'RE WORRIED ABOUT

Starting a conversation about suicide can feel intimidating. You may worry about saying the wrong thing or making the situation worse. A calm, direct, caring conversation can create space for someone to share what they are carrying.

What to do:

- Start with what you have noticed: "You haven't seemed like yourself lately, and I wanted to check in."
- Ask an open question: "How are things really going?" Then allow silence instead of filling it immediately.
- If you are concerned about suicide, be direct: "Are you thinking about suicide?" Asking clearly does not create suicidal thoughts.
- Listen more than you speak. Reflect what you hear and avoid debating, lecturing, minimizing, or trying to solve everything at once.
- Move toward support: "I'm glad you told me. Let's figure out who we can contact together."

Keep in mind: Try to replace reassurance that closes the conversation, such as "Everything will be fine," with language that keeps connection open: "That sounds incredibly hard. I'm here with you."

If the person says they are thinking about suicide, take it seriously. Do not promise secrecy. Ask whether they are in immediate danger and help them connect with a mental health professional, trusted support person, or crisis service.

HELPING YOUTH THROUGH EMOTIONAL DISTRESS

Young people often communicate distress through behavior before they have the words to explain it. Changes in sleep, grades, friendships, irritability, appetite, attendance, risk-taking, or interest in favorite activities can signal that something needs attention.

What to do:

- Choose a low-pressure moment, such as a car ride, walk, or quiet time at home.
- Lead with observation rather than accusation: “I’ve noticed you’ve been spending more time alone. How have you been feeling?”
- Take their experience seriously, even when the problem seems temporary from an adult perspective.
- Ask directly about self-harm or suicide if you are concerned. Clear questions communicate that difficult topics are safe to discuss.
- Help identify more than one trusted adult the young person can contact, including school, family, health care, or community supports.

Keep in mind: Avoid turning the conversation into an interrogation. Teens may need time before they are ready to talk. Let them know the door remains open and continue checking in.

Caregivers also need support. You do not have to manage a young person’s crisis alone. Seek professional guidance when distress is persistent, worsening, affecting daily life, or includes thoughts of self-harm or suicide.

TEEN MENTAL HEALTH:
WHEN IT'S MORE THAN A BAD DAY

Moodiness, conflict, and stress can be part of adolescence. The key question is often not whether a teen has difficult days, but whether changes are intense, persistent, escalating, or interfering with everyday life.

What to notice or do:

- Pay attention to duration. A difficult day is different from weeks of hopelessness, withdrawal, or loss of interest.
- Look at functioning. Notice changes in school attendance, concentration, sleep, eating, hygiene, relationships, or responsibilities.
- Notice sudden shifts. A dramatic improvement after a period of severe distress can also warrant a caring check-in.
- Take online experiences seriously. Cyberbullying, harassment, social exclusion, and exposure to harmful content can intensify distress.
- Treat statements about death, self-harm, being a burden, or having "no reason to be here" as signals to ask more questions.

Keep in mind: Adults do not need to decide whether a teen's feelings are "serious enough" before offering support. Curiosity and consistency matter: keep checking in, keep listening, and keep the pathway to help visible.

Reaching out can start with one sentence. Try, "I'm not doing well and I need someone to stay with me," or "I've been having thoughts that scare me." You deserve support before things reach a breaking point.

MEN AND MENTAL HEALTH:
BREAKING THE SILENCE

Some men have learned to cope with emotional pain by staying silent, pushing through, distracting themselves with work, or avoiding vulnerability. Distress may also show up as anger, irritability, risk-taking, increased substance use, isolation, or physical complaints rather than sadness.

What to notice or do:

- Check in beyond "How's it going?" Ask specific, grounded questions about sleep, stress, relationships, work, or how they have been coping.
- Normalize support without making it a lecture: "You don't have to handle all of this alone."
- Make space for practical and emotional concerns. Financial pressure, job changes, relationship loss, parenting stress, health concerns, and loneliness can overlap.
- If behavior has changed sharply or hopelessness is present, ask directly about suicide.
- Offer concrete next steps, such as sitting together while they call a counselor, contacting a trusted friend, or scheduling an appointment.

Keep in mind: Strength does not require silence. Speaking up early can protect relationships, health, work, and well-being. For friends and family, steady presence is often more useful than a perfect speech.

If someone brushes off your concern, you can still leave the door open: "You don't have to talk right now. I care about you, and I'm going to keep checking in."

WOMEN, MENTAL HEALTH, AND THE PRESSURE TO "HOLD IT ALL TOGETHER"

Many women carry overlapping responsibilities at work, at home, in caregiving, and in relationships. When the expectation is to keep functioning no matter what, serious distress can be hidden behind productivity, caretaking, or appearing "fine."

What to notice or do:

- Notice your own warning signs: persistent exhaustion, hopelessness, irritability, numbness, isolation, disrupted sleep, or feeling unable to keep up.
- Name the load. Writing down responsibilities can help reveal when expectations have become unsustainable.
- Ask for specific support. "Can you handle dinner tonight?" or "Can you sit with me while I make this appointment?" is easier to act on than "I need help."
- Protect connection. Regular contact with trusted people can reduce isolation, especially during periods of major change or loss.
- Seek professional support when distress persists, worsens, or includes thoughts of self-harm or suicide.

Keep in mind: You do not have to wait until you are unable to function before asking for help. Support can be preventive, not only a response to crisis.

If you are checking on someone else, avoid assuming that competence means they are coping well. A thoughtful "How are you doing underneath everything you're managing?" can invite a more honest answer.

POSTPARTUM MENTAL HEALTH:
RECOGNIZING WHEN A NEW PARENT NEEDS HELP

The postpartum period can bring major physical, emotional, hormonal, financial, and relationship changes. Sleep disruption and the demands of caring for a baby can intensify stress. While emotional ups and downs can occur after birth, persistent or severe symptoms deserve attention.

What to notice or do:

- Watch for ongoing sadness, severe anxiety, panic, hopelessness, intense guilt, agitation, or feeling disconnected from the baby or from yourself.
- Take statements such as "They would be better off without me," or thoughts of self-harm or suicide seriously.
- Notice whether fear, intrusive thoughts, or distress are making it difficult to sleep even when there is an opportunity, eat, function, or care for daily needs.
- Offer practical help alongside emotional support: meals, transportation, child care, appointment support, or simply staying nearby.
- Encourage contact with an OB-GYN, primary care clinician, mental health professional, or another trusted health care provider.

Keep in mind: Postpartum mental health concerns are treatable. Asking for help is an important health step, not a measure of someone's ability or love as a parent.

Urgent changes such as extreme confusion, severe agitation, hallucinations, delusions, or behavior that seems disconnected from reality require immediate medical attention. When safety is in question, do not leave the person alone while arranging urgent help.

PRACTICAL PLANNING:
CREATING A PERSONAL SAFETY AND SUPPORT PLAN

A safety and support plan is a simple, personalized list of actions and contacts to use when emotional distress rises. It is best created during a calmer moment, when it is easier to think through what helps.

What to notice or do:

- My warning signs:
  - What thoughts, feelings, situations, or behaviors tell me I am becoming overwhelmed?
- Things I can do on my own:
  - Which grounding, movement, breathing, music, routine, or distraction strategies have helped me get through difficult moments?
- People and places that help me feel connected:
  - Who can I call, text, visit, or sit near without needing to explain everything?
- Professional supports:
  - Which clinician, counselor, employee resource, school resource, or crisis service can I contact?
- Making the environment safer:
  - What potentially dangerous items or substances can be secured, removed, or placed in someone else's care during a crisis?

Keep in mind: Keep the plan somewhere easy to find, such as a phone note, wallet card, or shared document. Consider giving a copy to a trusted person who can help you use it when thinking becomes difficult.

A plan is not a substitute for care. If suicidal thoughts are becoming more intense, specific, or difficult to resist, reach out for immediate support rather than trying to manage the situation alone.

SUPPORTING SOMEONE AFTER A SUICIDE ATTEMPT OR MENTAL HEALTH CRISIS

Returning to everyday life after a suicide attempt or acute mental health crisis can feel uncertain for everyone involved. Recovery may include relief, fear, embarrassment, exhaustion, frustration, or many emotions at once. Consistent, nonjudgmental support can make the transition less isolating.

What to notice or do:

- Ask what support would be useful rather than assuming: “Would you like company, practical help, or some space with a check-in later?”
- Keep connection steady. A short text, meal, ride, walk, or scheduled call can be meaningful.
- Respect privacy. Let the person decide what they want others to know unless there is an immediate safety concern.
- Encourage follow-up care and help reduce practical barriers when you can, such as transportation, scheduling, or child care.
- Remember that recovery is rarely linear. A difficult day does not mean someone has failed or returned to the beginning.

Keep in mind: Avoid demanding explanations about why the crisis happened. The person may not have clear answers, and pressure can add shame. Focus on what helps them stay safe and supported now.

Supporters need care too. If you are a family member, friend, or coworker affected by someone’s crisis, consider talking with a counselor or trusted person so you are not carrying the experience alone.

HOPE AND CONNECTION:
EVERYDAY WAYS TO STRENGTHEN MENTAL WELL-BEING

Suicide prevention is not only about responding to emergencies. Everyday habits and relationships can strengthen the sense that we belong, have options, and can get through difficult periods. Protective factors look different for each person, but they can be intentionally supported.

What to notice or do:

- Strengthen one reliable connection. Regular contact often matters more than having a large social circle.
- Build small routines that support sleep, meals, movement, medication adherence when prescribed, and time outside or away from screens.
- Create moments of purpose. Caring for someone, learning, volunteering, faith or cultural practices, creative work, and meaningful goals can all support connection.
- Practice asking for help before a crisis. Make support part of ordinary life rather than a last resort.
- Check on others, especially after losses, major transitions, relationship changes, health challenges, or other stressful events.

Keep in mind: Hope does not always feel dramatic. Sometimes it is simply the next appointment, the next conversation, a person who knows the truth, or a plan for getting through tonight.

Make checking in a habit. "I was thinking about you" can be a small sentence with a large reach. When we notice, ask, listen, and connect people with support, we help create communities where fewer people have to struggle in silence.

BREE HEALTH SUPPORT RESOURCES

Find Support When You Need It: Scan to download the Bree Health Mobile App and explore tools and resources designed to support mental well-being, strengthen connection, and promote suicide prevention and awareness.

Get Support Now: Scan to Download the Bree Health Mobile App

Access support, tools, and resources —anytime, anywhere. Just scan the QR code to get started.

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