

TIGER TIMES

PLEASANT LEA MIDDLE SCHOOL

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RESOURCES

- **CommCare hotline** ☎
1-888-279-8188
- **ReDiscover** ☎
816-966-0900
- **Show Me Zero Youth Suicide: Suicide Prevention Program** ☎ **816-347-3052**
- **Suicide hotlines: 1-800-SUICIDE (784-2433) and 1-800-273-TALK (8255)**

COUNSELING CORNER

It's important to learn about the factors that can put a teen at risk for suicide. The more you know, the better you'll be prepared for understanding what can put your child at risk and how to help. If you are interested in more information regarding suicide and other issues, please take a look at the LSR-7 parenting tab: <http://www.lsr7.org/parents/parenting-information/>

As always, please give us a call in the counseling office at (816) 986-1178 if there is anything we can do to help support your child.

Resources for parents of children experiencing crisis

Included on the next several pages are resources for parents when students are experiencing crisis.

What to *DO* when faced with a child experiencing a crisis

- Always ensure your child's safety. When a child is expressing suicidal thoughts or behaviors, it is important to talk to them about it, directly. One way to do this is to ask whether your child is having suicidal thoughts or has a plan in mind: "Are you having thoughts about taking your life?" "Have you thought about how you would do that?" or "Have you made any plans or preparations?" If your child does have a plan, then does he or she have access to a method for completing/attempting this plan: "Do you have access to (means that were mentioned)?" It would also be important to find out if your child has a time or location when he or she plans to carry out the plan if they have it.
- If your child does have a plan, has access to the means, or just seems unsafe, do not leave them alone and seek immediate help.

Listen

- Acknowledge feelings and problems in their terminology. Try to avoid complicated language or indirect questions.
- Allow your child to express feelings--a parent/guardian may want to openly communicate giving the child permission to express his or her feelings.
- Try to avoid giving advice or opinions. Try to repeat back the feelings you hear your child expressing (“you sound frustrated” or “you feel hopeless”).
- Listen for warning signs such as hopelessness or a fixation with death.

Be direct

Talk openly about suicide. Do not be afraid to say the word suicide or ask directly if they are having thoughts of wanting to take their lives. Do not worry about planting the idea in your child’s head. Suicide is a crisis of non-communication and despair; by asking about it you allow for communication to occur and provide hope. Be direct with depressed and/or suicidal children, asking whether your child has been accessing internet sites, obtaining suicide information from such sites, and talking in suicide chat rooms.

- Remain calm.
- Be empathetic.
- Always take your child seriously.
- Know how to access the crisis resources available in your community.

Be honest

Offer hope, but do not offer condescending or unrealistic reassurance.

Know your limits

If you feel that you are in way over your head, or if you feel uncomfortable, minimize your level of involvement. Ask someone else who may be in a better position to help (crisis line worker). If you feel your child is in immediate danger, call 911 or escort them to the nearest emergency room.

Make sure that at each stage of the process the child knows what is going on

Remember a suicide crisis is a chaotic and confusing situation. By not providing and communicating structure in your response, you may unintentionally create more chaos and confusion, thereby increasing the likelihood that your child will refuse to cooperate.

Restrict access to lethal means that the child has available

An extremely effective way to prevent children from dying by suicide is to make sure there is no way your child has any way of getting a weapon.

What NOT to DO when faced with a child experiencing a crisis

- ***Don’t ever dare your child to attempt suicide.***
- ***Don’t debate about whether suicide is right or wrong.***
- ***Don’t promise secrecy or confidentiality.*** It may be advisable just to let your child know that you don’t want to see him or her die by suicide and that you just want to make sure that he or she gets the best help possible and that maybe you are not the best person to provide such care.
- ***Don’t panic.***
- ***Don’t rush or lose patience.*** Realize that you may need to spend some time with your child in order to ensure that he or she will remain safe. Try to have as much privacy as possible when talking.
- ***Don’t act shocked.*** If you do so, your child is likely to feel that the situation is so bad that no one can help. This will put distance between you and your child.
- ***Don’t be judgmental.*** Avoid offering opinions of right vs. wrong or ethical vs. unethical. The main aspect of communication is just to listen and show concern.
- ***Don’t preach to your child.*** Avoid discussing the value of life and how such a tragic act would affect his or her family and friends. These people may be contributing to your child’s suicidal crisis and he/she may wish to hurt these people through suicide.
- ***Never leave your child alone or send them away.*** This may just reinforce feelings of isolation and hopelessness
- ***Don’t worry about silence during discussion.*** Just let your child know that you are there and you are willing to listen.

- **Don't under-react or minimize.** By under-reacting, you communicate that you don't really respect your child's feelings and don't believe that the child is serious. By doing this, you just reinforce your child's feeling that no one understands or cares. Assuming that someone is attention seeking is usually the reason behind under reacting. Even if your child is seeking attention, you should act. The benefits could certainly outweigh the costs.
- **If your child is threatening suicide and does have a weapon, never try to physically take the weapon.** This could endanger your life, the life of your child and the lives of other persons around you.

Doan, J., LeBlanc, A., Lazear, K.J., & Roggenbaum, S. (2012). *Youth suicide prevention school-based guide – Issue brief 6c: Intervention strategies: Responding to a student crisis*. Tampa, FL: University of South Florida, College of Behavioral and Community Sciences, Louis de la Parte Florida Mental Health Institute, Department of Child & Family Studies (FMHI Series Publication #218-6c-Rev 2012).

Risk Factors

Risk factors are characteristics that increase the possibility that an individual will attempt to end his or her life, although it is important to note that risk factors are not necessarily causes of self-injury or death. Risk factors can be thought of as indicators to a child's potential for self-harm, and much research has gone into identifying specific risk factors for youth. Research has shown that the following are risk factors for suicide attempts and death by suicide in adolescents:

- Previous suicide attempt
- Mood disorder (particularly depression) or psychopathology
- Substance abuse disorder
- Family history of suicidal behavior or mental illness
- Relationship, social, work or financial loss
- Access to lethal agents (such as firearms or medications)
- Contagion or exposure to individuals who have attempted or died by suicide with exposure through media, television and direct contact
- History of physical or sexual abuse
- Conduct disorder
- Juvenile delinquency
- Gay, lesbian or bisexual sexual orientation or identification as transgendered
- Stressful life events
- Chronic physical illness or pain
- Impulsive or aggressive tendencies
- Being homeless/runaway
- School problems

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Protective Factors

Protective factors are characteristics believed to reduce the likelihood that someone will harm or kill him/herself by counterbalancing risk factors, and vary according to age, gender, ethnicity and religion. Leading researchers in the field of youth suicide have noted that much research still needs to be conducted regarding specific protective factors for children and teens although the following have shown to be protective factors for preventing youth suicide:

- parental/family support and connectedness
- good social/coping skills
- religious/cultural beliefs
- good relationship with other school youth/best friends
- reduced access to means
- support from relevant adults/teachers/professionals
- help-seeking behavior/advice-seeking
- impulse control
- adaptive problem solving/conflict resolution abilities

- social integration/opportunities to participate
- positive sense of worth/confidence
- stable living environment
- access to and care for mental/physical/substance disorders
- responsibility for others/pets
- perceived connectedness to school
- involvement on sports teams.

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Recommendations for families

If you're concerned that a member of your household may be suicidal, there are steps you can take to help keep them safe.

1. **Call the National Suicide Prevention Lifeline: 1-800-273-TALK (1-800-273-8255)**
2. **Contact the crisis lines listed on the [district's website](http://www.lsr7.org/parents/parenting-information/warning-sides-of-suicide/)**
<http://www.lsr7.org/parents/parenting-information/warning-sides-of-suicide/>
3. **Reduce easy access to dangerous substance at home.**
This includes:
 - **Firearms:** Because firearms are the most lethal among suicide methods, it is particularly important that you remove them until things improve at home, or, second best lock them very securely.
 - **Medications:** Don't keep lethal doses at home. Your doctor, pharmacist or the poison control center (1-800-222-1222) may be able to help you determine safe quantities for the medicines you need to keep on hand. Be particularly aware of keeping prescription painkillers (such as oxycodone and methadone) under lock and key both because of their lethality and their potential for abuse.
 - **Alcohol:** Alcohol can both increase the chance that a person makes an unwise choice, such as attempting suicide, and increase the lethality of a drug overdose
4. **Consider altering other adults your child comes into regular contact with such as teachers, family members, coaches, etc.**
5. **Update the school nurse on any medication changes or additions.**
Children and teens are more likely to have side effects from medications than adults. Trouble with weight gain, blood sugar and cholesterol can start early. Some mental health medications have been shown to increase the risk of suicide. Notifying school personnel about new medications can help your child monitor side effects and safety. www.hsph.harvard.edu/means-matter/recommendations/families

Warning Signs

- Talking about wanting to die or to kill oneself
- Feelings of sadness, hopelessness, helplessness/being a burden to others
- Seeking access to lethal methods of self-harm
- Changes in appetite, weight, or sleep pattern
- Changes in mood, agitation, anxiousness or reckless behavior

Resources

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