

Parent Handout

When Your Child Expresses Suicidal Thoughts or Behaviors

This paper is designed to support you with the information you need as you and your child work together toward wellness.

You are not alone. It is not uncommon for adolescents to consider suicide as a possible solution to their difficulties. The reasons for this are many and varied. What is most important, for you and your child, is knowing there is help available. With support, recovery is possible.

If you think that your child may be contemplating suicide, you can best help him/her by paying attention, listening, and acknowledging what they are saying or doing. Remain calm and get them to the help they need. It is not uncommon for someone in their emotional state to resist seeking help. There can be many reasons for this: stigmatization, fear of being restrained or locked up, etc. They may plead that you do nothing. They are in crisis and may be incapable of making a rational decision. They may say they are fine and they did not mean what they said or did. Or they may be feeling their situation is hopeless and nothing can help. Whatever may be occurring for them, they will look to you for support. Assure them that help is available.

This is a life and death situation. Accepting any reason for not getting help is too dangerous. Though you and/or your child may fear what will result from acknowledging these suicidal thoughts or actions, the risk of not seeking help is too great.

Attached are Warning Signs and Risk Factors that a suicidal person may be experiencing. This is included to help you identify specific behaviors you may have been noticing. Though someone has expressed suicidal ideation, no one person will show all these behaviors. They may not show any of the specific behaviors listed; even so, it is important for them to seek help.

Seeking Assistance:

There are differing situations where your child's distress may become apparent. Your child may reveal their suicidal thoughts to you, a friend, or a trusted adult. Whoever becomes aware of your child's distress must immediately seek assistance. In seeking assistance, your child's safety is the first consideration. The child should **never** be left alone during this crisis. If your child has a physician or therapist, call to alert them of the situation. The Santa Clara County Suicide and Crisis county is routing all emergency calls through **988**. All non-emergency calls will be accessed through the mental health and substance use services call center hotline, 1-855-278-4204. Please see [Mental Health Resources](#) for additional hotline information.

The following two pages are designed to be a tri-fold handout for parents which contains in very brief form information about risk factors and warning signs to help a parent recognize a crisis, what to do in a crisis, what to expect will happen when treatment is sought, and how to care for yourself during the crisis.

What to do in a crisis

- Remain calm
 - Pay attention
 - Listen
 - Acknowledge what they are saying
 - Ask if they are thinking of killing themselves
 - Get your child to help
- Resisting help is common. Assure them there is hope. Support is available. The risk of not seeking help is too great.

Seeking assistance

Never leave a child in crisis alone.

- In immediate danger of self-harm call **988**

Ask for a CIT officer

- Call Santa Clara County Suicide and Crisis Hotline **988** (Emergency calls) or **1-855-278-4204**
- Call Pacific Clinics:

1-408-379-9085, serving ages 5-21

1-877-41-CRISIS (4127474), 24 hour child and adolescent mobile crisis program for assessment and transport

Do not transport your child to the ER. Seek professional support.

Self Care

So you can better care for your child

- Reach out to supportive family and friends
- Plan for and allow yourself to rest
- Acknowledge that you will not function as well as you usually do
- Accept help
- Exercise and eat healthy meals
- Participate in stress relievers such as mindfulness meditation, support groups, or NAMI Santa Clara County supports
- Keep a journal. Write in it when/if you cannot sleep

When Your Child Expresses Suicidal Thoughts

A Parent Guide to Prevention and Intervention

HEARD Alliance

www.heardalliance.org

Note: Contact agency numbers are for the SF BAY AREA

Suicide Risk Factors

Dramatic changes from their usual self such as:

Feelings

- Sadness
- Hopelessness
- Moodiness
- Angry outbursts (aggressive/violent)
- Loss of interest in family, friends and activities

Thoughts

- Trouble concentrating
- Difficulty making decisions
- Trouble remembering
- Thoughts of harming oneself

- Delusions and/or hallucinations Behaviors
- Withdrawing from people
- Substance abuse
- Risky behaviors
- Missing school, work or other commitments

- Attempts to harm oneself (e.g., cutting)

Physical Problems

- Sleeping too much or too little
- Eating too much or too little
- Unexplained aches and pains

What to Expect

Emergency Room

- Possible 72 hour hold initiated
- No medication given so as not to mask symptoms
- Guard maybe present for their safety
- Ask questions
- Use notebook to record information, instructions and observations
- Released if in no immediate danger; follow up immediately with child's doctor or therapist

Hospitalization

- Transferred to a psychiatric care facility after medically stable (no adolescent beds in Santa Clara County)
- Unit locked and possessions restricted for your child's safety
- Provide items of comfort for your child
- Various therapies; some include family
- Work with care team
- Limited visiting hours with phone and e-mail contact
- Your child is safe and your non-invasive support helps as they work to get well

Transition Out of Hospital

- Discharge plan created
- Recommend best setting for recovery
- Increased risk of suicide; use lethal means safety
- Follow up with therapist immediately
- Fill out Health Plan form before return to school

- Make a "School Re-Entry Plan" with school counselor
- Create a "Safety Plan" with school counselor and child

Suicide Warning Signs

Threatening to kill self

Looking for ways to kill self

Talking or writing about death, dying or suicide

Expressing no reason for living or no sense of purpose in life

Rage, seeking revenge

Recklessness or risky behavior, seemingly without thinking

Expressions of feeling trapped like there is no way out

Increased drug or alcohol use

Withdrawal from friends, family and society

Anxiety, agitation, inability to sleep or increased sleep

Dramatic mood changes