Parents - Talk Suicide Prevention With Your Kids

Statistics

- Suicide is the second leading cause of death after motor vehicle crashes for young Coloradans ages 10 to 24.
- The number of young people in Colorado who die from suicide is 1.7 times that of the number who die from homicide.
- Young males are particularly at risk. More than 80 percent of the suicide deaths of young people involve males. However, young females are also at risk more females ages 10 to 24 are hospitalized for a suicide attempt than for injuries resulting from a motor vehicle crash.

Depression is treatable and suicide is preventable

- Don't be afraid to talk to your children about suicide prevention, especially if your children appear to be depressed.
- Most suicides occur due to some form of mental condition, such as depression or a substance abuse disorder
- Talking to your son or daughter about suicide is difficult but not talking about it can be devastating. Get up the courage and do it, and get your child the help he or she needs.

When to talk to your kids

- Pay attention to your instincts.
- When things don't seem quite right with your child's behavior, say something. Tell them what you are noticing.
- Know the suicide warning signs. Although kids thinking about suicide are not likely to seek help, many show warning signs to their friends, classmates, parents or trusted school officials.

Suicide warning signs

- **Previous attempts**. If your son or daughter has attempted suicide in the past, there is a greater likelihood that he or she will try again. Be very observant of any friends who have tried suicide before.
- **Depression feelings of helplessness or hopelessness**. Strong thoughts of helplessness and hopelessness; behaviors or comments that indicate overwhelming feelings of sadness or pessimistic views of their future.
- "Masked" depression. Acts of aggression, gunplay and alcohol/substance abuse. While your daughter or son may not act "depressed," their behavior suggests that they are not concerned about their own safety.
- Final arrangements. Giving away prized possessions such as jewelry, clothing, journals or pictures.
- **Efforts to hurt oneself.** Self-injury behaviors including running into traffic, jumping from heights and scratching, cutting and marking the body.
- Inability to concentrate or think clearly. Such problems may be reflected in classroom behavior, homework habits, academic performance, household chores and even in conversation. If your son or daughter starts getting poor grades; acting up in class; forgetting or poorly performing chores around the house; or talking in a way that suggests they are having trouble concentrating, these might be signs of stress and risk for suicide.
- Changes in physical habits and appearance. Changes include inability to sleep or sleeping all the time; sudden weight gain or loss; or disinterest in appearance or hygiene

Suicide warning signs, cont.

- Sudden changes in personality, friends and behaviors. Withdrawing and avoiding friends and family; skipping school or classes; loss of involvement in activities that were once important.
- Death and suicidal themes. These might appear in classroom drawings; work samples; journals; or homework.
- **Plan/method/access**. An increased interest in guns and other weapons; increased access to guns or pills; and/or talking about or hinting at a suicide plan. The greater the planning, the greater the potential for suicide.
- Suicide notes. These are a very real sign of danger and should be taken seriously.
- Threats. Threats may be direct statements such as "I want to die" or "I am going to kill myself." Or, unfortunately, indirect comments such as "The world would be better without me" or "Nobody will miss me anyway" also may be strong indicators of suicidal feelings. A teenage son or daughter might give indirect clues through joking or through comments in school assignments, particularly creative writing or artwork. Younger children and those who may have some delays in their development may not be able to express their feelings in words, but may provide indirect clues in the form of acting-out, violent behavior, often with threatening or suicidal comments.

Situations that could increase thoughts of suicide

- Breaking up with a boyfriend or girlfriend; failing in school; problems with parents; or rejection by friends.
- After a disaster, such as a school shooting or terrorist attack in our country.
- A personal loss.
- Abuse or an earlier tragic or frightening event.
- Depression or other emotional problems.

How to ask your child if they are thinking of suicide

- Don't wait until you're not afraid to discuss suicide.
- Be direct so that you can get a direct answer.
- Tell your child what you're noticing, and make statements about their changed behavior, such as, "I noticed that you are spending more time in your room. Sometimes people who do that are having thoughts of suicide. Are you having thoughts of suicide?"
- Be ready to listen non-judgmentally. Listen to what led up to their feeling the way they are. Some kids may have some warning signs but may not be thinking about suicide. Even if your child says "no", you have given them the message that it's OK to talk about suicidal thoughts.
- Figure out what kind of help your child needs and get help.

For help

- Call 1-800-273-TALK, a suicide prevention hotline. If immediate action is needed, call 911 or visit your local hospital's emergency room.
- If the need isn't immediate, talk to your primary care doctor or pediatrician; a school counselor/psychologist/social worker; or a community mental health professional in your county.

TIPS FOR KEEPING YOUR CHILD SAFE

WHAT DO I NEED TO KNOW ABOUT YOUTH SUICIDE?

Risk factors for exhibiting suicide behavior:

- * Loss of a significant other
- * Previous suicide of a peer or family member
- * Family and personal stress
- * Substance abuse

- * Depression and other mental health issues
- * Problems at school
- * Access to weapons or other means of harming self
- * Questions regarding sexual orientation

Students who are having suicidal thoughts may exhibit a variety of symptoms including, but not limited to:

- * Significant changes in behavior such as a change In appearance, changes in grades, withdrawing From friends, changes in sleeping/eating habits.
- * Making suicidal threats- either direct, "I want to die" or indirect, "Things would be better if I wasn't here."
- * Appears sad or hopeless
- * Reckless behavior
- * Self-inflicted injuries
- * Giving away prized possessions
- * Saying good bye to friends and family
- * Making out a will

It is important to remember the signs and risk factors listed are generalities. Not all students who contemplate or die by suicide will exhibit these kinds of symptoms AND not all students who exhibit these behaviors are suicidal.

WHAT CAN I DO TO KEEP MY CHILD SAFE?

- ASK. Talking about suicide does not make a student suicidal. Asking if someone is having suicidal thoughts gives him/her permission to talk about it. Asking sends the message that you are concerned and want to help.
- o **TAKE SIGNS SERIOUSLY.** Studies have found that more than 75% of people who die by suicide showed some of the warning signs in the weeks or months prior to their death.
- GET HELP. If you have concerns that your child is suicidal, seek immediate help from a mental health practitioner. Suicidal students need to be evaluated by an expert in assessing risk and developing treatment plans. Parents can contact school psychologists, social workers, or counselors for a listing of resources. Parents may also want to consult with their insurance company to obtain a list of mental health providers covered by their policy. When you call to make an appointment, tell the person on the phone that your child is suicidal and needs to be seen as soon as possible. You can also access emergency services at your nearest hospital.
- LIMIT ACCESS TO WEAPONS, PRESCRIPTIONS DRUGS, MEDICATIONS AND OTHER MEANS.
- o **DO NOT LEAVE YOUR CHILD ALONE.** It is important that parents surround themselves with a team of supportive friends or family members who can step in and help as needed.
- REASSURE YOUR CHILD THAT LIFE CAN GET BETTER. Many suicidal people have lost all hope that life
 can improve. They may have difficulty problem solving even simple issues. Remind your child that no matter how bad
 things are, the problem can be worked out. Offer your help.
- LISTEN. Avoid making statements such as "I know what it's like" or "I understand." Instead, make statements such
 as "Help me understand what life is like for you right now."

K	NON	AND	BE REA	DY TO	USE EME	RGENCY	RESOURCES:
---	-----	-----	--------	-------	---------	--------	-------------------

Suicide Prevention Lifeline 1-800-273-TALK (1-800-273-8255) Yellow Ribbon Hopeline Network 1-800-SUICIDE (1-800-784-2433)

Local Police 911

For more information about depression and suicide:

American Foundation of Suicide Prevention

America Association of Suicidelogy

National Mental Health Association

www.nmha.org

www.nmha.org

...or by contacting your school's
school psychologist, social worker or
counselor!

(adapted from Adams 12 Five Star Schools)

Teen Suicide Prevention

Published on Jun 5, 2013 by the Mayo Clinic

In this video created by Mayo Clinic, teens describe common signs that a teen is considering suicide and provide encouragement for communicating directly and immediately for support and safety. It also Includes suggestions for what to say to a teen who may be at risk for suicide and ways to keep them safe. Things can get better.

http://www.youtube.com/watch?v=3BByqa7bhto&safe=active