Preventing Youth Suicide: Tips for Parents & Educators

September is National Suicide Prevention Month. Suicide is the second leading cause of death among school age youth. However, suicide is preventable. Youth who are contemplating suicide frequently give warning signs of their distress. Parents, teachers, and friends are in a key position to pick up on these signs and get help. Most important is to never take these warning signs lightly or promise to keep them secret. When all adults and students in the school community are committed to making suicide prevention a priority—and are empowered to take the correct actions—we can help youth before they engage in behavior with irreversible consequences.

Suicide Risk Factors

Although far from perfect predictors, certain characteristics are associated with increased odds of having suicidal thoughts. These include:

- Mental illness including depression, conduct disorders, and substance abuse.
- Family stress/dysfunction.
- Environmental risks, including presence of a firearm in the home.
- Situational crises (e.g., traumatic death of a loved one, physical or sexual abuse, family violence).

Suicide Warning Signs

Most suicidal youth demonstrate observable behaviors that signal their suicidal thinking. These include:

- Suicidal threats in the form of direct ("I am going to kill myself") and indirect ("I wish I could fall asleep and never wake up again") statements.
- Suicide notes and plans (including online postings).
- Prior suicidal behavior.
- Making final arrangements (e.g., making funeral arrangements, writing a will, giving away prized possessions).
- Preoccupation with death.
- Changes in behavior, appearance, thoughts and/or feelings.
What to Do

Youth who feel suicidal are not likely to seek help directly; however, parents, school personnel, and peers can recognize the warning signs and take immediate action to keep the youth safe. When a youth gives signs that they may be considering suicide, the following actions should be taken:

- Remain calm.
- Ask the youth directly if he or she is thinking about suicide (e.g., "Are you thinking of suicide?").
- Focus on your concern for their well-being and avoid being accusatory.
- Listen.
- Reassure them that there is help and they will not feel like this forever.
- Do not judge.
- Provide constant supervision. Do not leave the youth alone.
- Remove means for self-harm.
- **Get help:** No one should ever agree to keep a youth's suicidal thoughts a secret and instead should tell an appropriate caregiving adult, such as a parent, teacher, counselor, or school psychologist. Parents should seek help from school or community mental health resources as soon as possible. School staff should take the student to a school-employed mental health professional or administrator.

The Role of the School in Suicide Prevention

Children and adolescents spend a substantial part of their day in school under the supervision of school personnel. Therefore, it is crucial for all school staff members to be familiar with, and watchful for, risk factors and warning signs of suicidal behavior. The entire school staff should work to create an environment where students feel safe sharing such information. School psychologists, school counselors and school administrators are trained to intervene when a student is identified at risk for suicide. These individuals conduct suicide risk assessment, warn/inform parents, provide recommendations and referrals to community services, and often provide follow up counseling and support at school.

Parental Notification and Participation

Parents are crucial members of a suicide risk assessment as they often have information critical to making an appropriate assessment of risk, including mental health history, family dynamics, recent traumatic events, and previous suicidal behaviors. After a school notifies a parent of their child's risk for suicide and provides referral information, the responsibility falls upon the parent to seek mental health assistance for their child. Parents must:

- Continue to take threats seriously: Follow through is important even after the child calms down or informs the parent "they didn't mean it." Avoid assuming behavior is simply attention seeking (but at the same time avoid reinforcing suicide threats; e.g., by allowing the student who has threatened suicide to drive because they were denied access to the car).
• Access school supports: If parents are uncomfortable with following through on referrals, they can give the school psychologist permission to contact the referral agency, provide referral information, and follow up on the visit.
• Maintain communication with the school: After such an intervention, the school will also provide follow-up supports. Your communication will be crucial to ensuring that the school is the safest, most comfortable place for your child.

Resiliency Factors

The presence of resiliency factors can lessen the potential of risk factors to lead to suicidal ideation and behaviors. Once a child or adolescent is considered at risk, schools, families, and friends should work to build these factors in and around the youth. These include:

• Family support and cohesion, including good communication.
• Peer support and close social networks.
• School and community connectedness.
• Cultural or religious beliefs that discourage suicide and promote healthy living.
• Adaptive coping and problem-solving skills, including conflict-resolution.
• General life satisfaction, good self-esteem, sense of purpose.
• Easy access to effective medical and mental health resources.

Maricopa County Resources:

• Teen Lifeline.org 602-248-8336 (TEEN) 3-9pm Peer Counseling Suicide Hotline
• EMPACT Suicide Prevention Center Crisis Hotline 480-784-1500
• Hopeline.com 800-442-4673 (HOPE) Volunteer-staffed online crisis intervention

YOUR SCHOOL Resources:

• YOUR NAME, School Psychologist YOUR PHONE NUMBER
• SCHOOL COUNSELOR(S) or SOCIAL WORKER(S) INFORMATION

Adapted from National Association of School Psychologists, 4340 East West Highway, Suite 402, Bethesda, MD 20814; (301) 657-0270, Fax (301) 657-0275; www.nasponline.org

Click HERE for a link to the original handout and other related resources