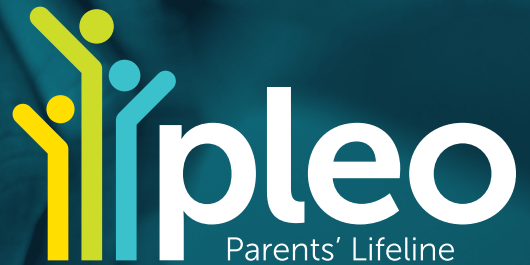


# Supporting Parents of Suicidal Youth: Crisis Action



The information offered here is the product of a parent-led project that brought together parents and youth with lived experience, clinicians, and experts in suicide prevention to offer tips for help and hope based on their front-line experience.

## PART A - What can help parents based on experience

**When parents educate themselves about recognizing the signs of mental illness in advance of a crisis, it empowers them to be more prepared for crisis.**

There are many courses, supports, and programs available such as NAMI, Mental Health First Aid, Safetalk, and PLEO, and it can also help to know about the Mental Health Act and Section 17 Apprehensions.

**Sometimes a child just needs someone they feel they can trust to tell them it's going to be OK.**

They can be scared out of their mind and not feel safe. They can feel panicked that they can't function anymore. Reassure your child that it will get better. Sometimes it's annoying to hear this but honestly your child will start to internalize it.

**Not every situation requires calling the police** or making a trip to hospital emergency. Having a plan in place together and in advance, or

explaining your actions or decisions about when you do or do not seek that extra help can aid in building trust with your child. It's helpful for them to know that they can come to you or count on you, without being concerned that you will not really hear them, or "over-react."

**When managing a crisis, it can be helpful to have a partner, close friend, or family member with you so you are not alone.**

It can help keep you calm and grounded, get a second opinion or have someone to reassure you and support your decisions. And of course, provide support for you so that you can then support your child.

**We've been there, we get it and  
we can help. Call PLEO now  
1.855.775.7005**

**Try to stay calm, focused and rational.** Deal with it as a medical emergency. You may surprise yourself with the clarity, fortitude, and energy you have in these difficult moments, as the adrenaline and your parenting instinct turn on. Remember it is your child in crisis, not you.

**As impossible as it might seem, try to accept the possibility that your child might die.** It's not about giving up, but about letting yourself face the fear, and then continue to do your best to help them survive. If your child does complete suicide, you will have done your best, and hopefully can remember that sometimes a good outcome is just not possible, and that you need not blame yourself.

**It's okay to recognize that the fear of your child dying is so overwhelming, and that parents need help too.** You don't need to do this alone. Seek support from friends or family, from peers and professionals.

**Trust your instincts** and knowledge of your child – you know when they're in distress, how to make sure they're safe and when to call for help in a way that doesn't increase the crisis. You are an expert on your child.

**Advocate for your child.** If the hospital wants to release your suicidal child tell them that you fear they might complete suicide if they are released. You can ask them to please put their decision in writing including an explanation of how they came to it. Show your child that you are on their side. If they need to stay home from school for a few days sometimes, let them (although not regularly, to avoid isolation). Advocate for them at school so they have the resources they need. Maybe let them take a lighter course load if that's needed as well.

**When you are unsure, call for help.** Crisis phone lines and mobile crisis teams can be very helpful, as can police if your child is very agitated, or if they have something they can harm themselves or someone else with. If you do call the police, be sure to mention your child's mental health challenges and what you need their help with – this can help to set the right tone when they arrive, and in some cases a specially trained officer will be part of your response team.

**Help comes in various forms**, and assistance from peers and other support services (like PLEO) to navigate all of your options and help think outside the box can be incredibly useful. None of us come into this kind of parenting prepared. It's a steep learning curve and you don't have to figure it out alone. You can put together all the pieces of the puzzle that will help the unique needs of your family, such as medication, support groups, psychoeducational training, etc.

**Normalizing** for your child that 1 in 5 people will suffer with their mental health or have suicidal thoughts at some point in their life can be helpful. This is not to dismiss or minimize their feelings, but to help them feel less scared, alone, or helpless.

**Problem solving is not always the right approach.** Sometimes what your child needs is not for you to try to "fix them" but rather to be present and with them in their pain. It is always a good place to start.

**Ask your child what they think would be helpful for them right now** and if they want you to get them some help. If they say no, respect that, but remind them that when they are ready, you are there. Be ready to act on their requests. Know that your child might not even be in a state to hear you or process your suggestions and it might feel very narrow and dark. That's okay too. You can stay with them in this, and it will pass.

**Try to understand what is driving distress** (i.e. has your child recently started new medication that could be contributing to the increase in suicidality? Has your child not been sleeping well?) Realize that the degree, intensity and driving forces behind suicidal ideation can often be linked to a patient's stage of brain development, temperament, and ability to regulate their emotions. Let them know how and why suicidal ideation can arise as a consequence of their distress. Let them know they can trust you and you're completely invested in trying to help them out of their current predicament and into a safer, more secure situation. Help them understand any and all strengths that they have and how those can contribute to reducing their distress.

**Observe and take notes** of the behaviors and severity of each time they express suicidal thoughts. Have they attempted in the past? Do they act dangerous to themselves or others in the moment? Are they calm, agitated or secluded? Identifying these patterns will help you triage and make decisions about the appropriate response for the next time, such as if emergency services are required.

**Stop everything and make your child your primary focus as much as possible for the immediate period after the crisis is over.**

Take time off work if you're able, for both of you to recover. Employment Insurance may cover part of lost wages.

**Do what works for you and your child.** Some parents sleep outside their child's bedroom door or on their floor of their bedroom, to monitor safety. Distractions can help get through tough moments – a movie, evening stroll with someone, music, crafts, or tea for example. Their depression might make them want to stay sad and in pain, but every distraction may pull them a little further out of that dangerous state.

**Believe your child and have someone they respect stay near them until the crisis is over.**

You may not be that person, and that is ok.

**Help your child see alternatives.**

They may have ambivalence surrounding the decision to take their own life, and by recognizing this, and discussing it, the family may help them start to recognize alternative options and reasons to live.

**After crisis, set up an action plan**

in case there is a next time. Have a conversation with your child about what feeling suicidal means to them and what helped and what did not and why. Your child may not know what helped and that is okay. Include your child in setting up the action plan, before they're in crisis again. Include, for example, knowing when they would have a choice in things and when they would not. It can help them have a greater sense of control.

**Look after yourself.** Talk to someone you trust for your own wellbeing. That person needs to be a good listener and someone that you trust not to judge. Remember you have only one life to live. Even when it's awful try to find a little something good - the taste of tea or the feel of a comfortable shirt can help you get through the day. Self-care in the everyday can be small things that don't take up any time, but will make a big difference in your ability to cope and recharge.

**Not every crisis means there's going to be a death or suicide attempt.**

## PART B - What can give parents hope

**Learning from training specific to parents**, such as SafeTalk or Applied Suicide Intervention Skills Training (ASIST), so that you know what to do and say in crisis.

**Recognizing progress.** With more experience, episodes may diminish or may be less chaotic.

**Feeling supported by availability of services**, such as emergency departments and 24/7 crisis lines.

**Knowing that the option of the right medication** can support your child to build enough resilience to pursue other psychological support and healing.

**Knowing that trust** between parent and child provides an environment for a child to feel safe communicating and seeking help.

**Recognizing that the vast majority of children survive.** Suicide in children and youth is a serious issue, but not as frequent as the media portrays.

**Feeling supported** that children and others with opportunity to help (such as teachers, caregivers, service providers) are being educated to spot behaviours in others.

**Helping your child know that there are resources and options** (i.e. supports within the school or crisis lines) to help keep them safe and alive when they feel unwilling or unable to reach out to a parent.

**Understanding that suicidal ideation tends to be short lived in most cases.** Families need to find a way to weather the storm, provide validation and encouragement, and to help their child get to a more stable, safe place.

It's our hope that you find this information practical, helpful, and hopeful. The collective wisdom here is not a substitute for guidance or medical advice specific to your family's needs. It is a piece of the puzzle you are navigating, from those who have been there, and get it, and want you to know that you are not alone.

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 ● 613.321.3211 (Ottawa)  
 ● 1.855.775.7005 (toll free)

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