



## ENGAGING THE PARENT

### SUPPORTING DOCUMENT TO IDAHO GUIDELINES FOR SCHOOL-BASED SUICIDE INTERVENTION

From [Preventing Suicide: A Toolkit for High Schools](#), page 72 with additions from ILP.

The following steps can help support and engage parents. Ask someone to sit with the youth while you get the parent on board and then invite the youth back in to discuss the steps the parent will be taking:

1. Invite the parents' perspective. State what you (or others) have noticed in their child's behavior (rather than only the results of the screening) and ask how that fits with what they have observed.
2. Advise parents to remove lethal means from the home while the child is possibly suicidal, just as you would advise taking car keys from a youth who had been drinking. Provide them a handout on safe storage of lethal means.
3. Comment on how scary this behavior is and how the behavior complicates the life of everyone who cares about this young person. Normalize that this is the same as any other health issue; that there is treatment; and that their child and they will get through this. Also, emphasize how brave their child is to ask for help and that getting help for suicidal behavior is like getting help for any physical issue.
4. Acknowledge the parents' emotional state, including anger, if present. Let parents know that they are not to blame; that suicidal thinking is a mental health issue, often the result of an imbalance in brain chemistry, which can be treated. Remind them that *any* family can have a suicidal youth.
5. Acknowledge that no one can do this alone – express appreciation that they came in and assure them that you know they care about their child. Remind them that you are here to support them and their child, but they are the most valuable resource in their child's life and recovery.
6. Listen for myths of suicide that may be blocking the parent from acting.
7. Explore reluctance to accept a mental health referral, address those issues, explain what to expect. Be sure that the suicidal youth knows what to expect, also, and that you will be here at school for them and aid in the transition back to school, if needed.

8. Align yourself with the parent where you can, if possible, such as, share *briefly* any of your family or your own struggle with mental health, or the number of youths you see who have ideation. Remind parents that ideation (thinking about suicide) is not uncommon in youth. Share the idea of youth's underdeveloped frontal lobe and impulsivity... without in any way minimizing the behavior.
9. Let parents know about confidentiality and that the school will do what it can to honor their privacy, while doing what is in the best interest of their child.
10. If parents remain reluctant and the student needs to be seen by a mental health clinician in a timely manner, let them know what the school's next steps must be.
11. Note: If a student is suicidal and has had a recent triggering event, the student should be seen the same day by a mental health professional, if possible, taken to the emergency department, or closely watched if mental health help is not available.

The Idaho Lives Project is a partnership between the Idaho State Department of Education and the Idaho Department of Health and Welfare. The Project is funded by the Idaho Department of Health and Welfare's Suicide Prevention Program and the Garrett Lee Smith State/Tribal Youth Suicide Prevention and Early Intervention Grant from the Substance Abuse and Mental Health Services Administration.

This publication was supported by the Grant Number 2 801 OT 009017, funded by the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention or the Department of Health and Human Services.