

Youth and Tips for Parenting Talking Points

What are some simple steps to take if you are concerned about your teen's mental health?

Increasing Independence is a Normal "Psychological Milestone" For Teens

First, be aware that even though your teen may have a greater need for independence (a sign of their healthy development in the teen years), your love and support continue to be an essential part of their emotional foundation. Navigating that as a parent is hard, but here are some tips.

Self-care

Make sure you're taking steps to keep your own wellbeing strong. Teens (and all children) tend to be very sensitive with a radar for parental moods and non-verbal cues, and may react to parents' behavior and mental health. So keeping your mental health as solid as possible is an important step in optimizing your children's mental health.

How to have a "Real Conversation"

Engage them in a supportive conversation where you do most of the listening. If they're not ready to talk, invite it for later saying 'whenever you want to talk I'm here to listen and support you.' The likelihood is it will happen when you least expect it.

Guidance for Caring Conversations

When your teen starts to open up, be careful not to fall into the trap of jumping in with a solution or 'you should have...' – a challenge for us as parents. Show interest by following their cues and use phrases like 'when you say ____ what do you mean,' 'when that happens, how does it make you feel?' and 'tell me more about that.'

When to Ask About Suicidal Thoughts

If they seem overwhelmed, like they are losing hope, feeling trapped, or like a burden to others, then ask if it ever gets to the point of having thoughts of ending their life. It won't make them worse, but will feel like a relief. And it won't make anyone start thinking of suicide. Especially since you're essentially telling them that your love for them is unconditional and that nothing they are facing will change your love and support. (Say it to make sure they are getting that message!)

When to Seek Professional Help

Having your child see a mental health professional can be critically helpful even if they aren't clinically depressed, anxious or suicidal. So taking this step can be incredibly positive regardless of what level their distress is at, just to learn new coping strategies.

Educate Yourself About Mental Health and Suicide Prevention (afsp.org)

How can you tell the difference between your child behaving like a normal teenager – i.e. moody, etc. – and if there might actually be something wrong?

- When children hit puberty there are changes in their body and brain that can and do lead to behavioral changes. And there is a normal range which can look like some degree of moodiness, irritability, or pushing you away – all natural parts of adolescent development – but when it should be concerning is when any level of hopelessness, worthlessness, withdrawal from friends/activities, or suicidal thinking or behavior – these are not “normal” manifestations for teenage angst.
- Also– you know your child. You know their usual patterns, reactions to frustration and challenges- what their good days and bad days look like. Trust your instincts when their behavior goes beyond these usual range of behavior. If it's noticeable to you, it could be the tip of the iceberg with other changes going on in their health/mental health. It's worth engaging them in open conversation where you get to hear the fuller extent of what they are experiencing 1) so you can provide support, and 2) so you can get a better sense of how severe it is.
- If their sleep, energy, mood, appetite, motivation, substance use, frustration tolerance has changed and isn't bouncing back after a few days, have them see their pediatrician or a mental health professional. Remember depression can be diagnosed after two weeks of symptoms like that. And if low mood, inability to experience pleasure, or suicidal ideation are present, then it's even more likely to be a mental health condition that can be addressed.

Should parents be concerned about the trends in teen suicide?

- Yes, suicide is considered a major health problem in our nation, for many age and demographic groups, including for American youth. Parents can approach suicide risk and prevention in the same way they do other safety or health issues for their children. When it comes to any potential threat to our children's health or safety, parents have an extremely important role.
 - Parents can educate themselves, and learn what puts kids at greatest risk for suicide and what protects them the most strongly.
 - Parents can teach and model healthy habits for mental health just like we do for seatbelts, smoking, safe sex, and many other health issues. Taking care of your own mental health by practicing pro-mental health habits like regular exercise, good sleep, healthy boundaries, and managing stress, are important for your own health, but also send a powerful message to your kids about how to approach their mental health. Additionally engaging in therapy or other types of mental health treatment, and talking about it openly is another important way to model proactive practices.
 - Parents should definitely check in with their kids regularly, ideally beyond just the day to day tasks, homework, etc., and regularly invite deeper conversations.

- If they see you talking about your own challenges and how you approach them with creative problem solving and flexible thinking, they will get a strong sense that it's not the end of the world to make mistakes, to struggle, and that life is messy and challenging for everyone at times.
- If your child has depression, anxiety, suicidal thoughts, self-harm, or substance use, then do all of that plus definitely monitor them more closely and involve a professional, either at these key times, or for the long-haul for more chronic conditions.
 - Make sure to respond to them supportively during a mental health challenge like you would if it were a physical health problem. Check in and talk openly about how things are going.
 - If they are not 100% following a plan you've agreed on, or that they are working on in their therapy, be sure to balance your response and try not to overreact when they don't make the most mature decisions or follow the plan perfectly. Remember these are issues of health they may be facing for the first time, so they are still learning.
 - Remember the teens years are the period of brain development that isn't yet complete especially in the prefrontal cortex (the part of the brain that makes decisions and can plan longer term), so their decision-making capacity would normally be not at an adult level yet, even without the mental health problem they are dealing with.

What are actions can decrease risk of suicide? What does the research say about these “protective factors”?

- Research shows that protective factors can be enhanced to decrease risk of suicide. Protective factors can be strengthened by building connections and support in the home, at school, workplaces, and into culture at large.
- Protective factors that have been shown to decrease risk include:
 - Sense of support and interpersonal connectedness
 - Accessing mental health treatment when needed, for depression, anxiety, trauma
 - Healthy family environment
 - Supportive peers and school environment
 - Parental involvement, supervision, and messages of support, unconditional love
 - Other caring adult involvement, mentorship
 - Decreased stigma related to mental health and help seeking
 - Learning and practicing strategies that enhance coping skills
 - Addressing addictive behaviors, alcohol or other substance abuse
 - Keeping all lethal means such as firearms, toxic substances, and medications out of the home or stored securely, particularly during periods of risk

What are the options for treatment for mental health? How do I get started finding it?

- It's important to start with a thorough evaluation ideally by a mental health professional. If you don't have access to mental health professionals or it's urgent, you can start with your child's pediatrician and make sure they have all the information you're concerned about.
- A thorough evaluation should include a detailed history from your child, parents, possibly teachers (e.g., for ADHD and other learning or behavioral concerns), and possibly a medical evaluation to make sure the symptoms are not stemming from a thyroid, metabolic, inflammatory, autoimmune or other medical condition.
- Once a thorough evaluation is completed, the health professional will either have a diagnosis in mind or have a short list of most likely causes/ contributors. This should be communicated to you and your child, with age of child in mind. If your child is younger than 10-14, then age appropriate language should be used to help the child understand the process and rationale of treatment, and a full discussion with parent(s) should occur. If the child is over 13-14, then the health provider should use judgment about how much information to communicate with parents, with the goal of establishing trust in the treatment relationship with the child, and providing parents with important information to use.
- Treatment can include various forms of talk therapy and can also include medications.
 - Some forms of therapy have been shown to more directly reduce suicide risk, as well as helping with overall stress and other mood/anxiety symptoms. These treatments include Cognitive Behavioral Therapy, Dialectical Behavior Therapy (which usually entails 1:1, as well as group and family sessions), some forms of Family Therapy like Attachment Based Family Therapy, and Collaborative Assessment and Management of Suicidality (CAMS).
 - You can investigate the specific approach and skillset of mental health professionals by looking at their website if they have one, or asking them if they are familiar with these types of therapy.
 - Medications can also be used effectively for young people with depression, anxiety, ADHD, Bipolar Disorder, and eating disorders. The most important thing is to have open dialog with the treating physician/nurse practitioner/physician assistant, about what to expect and how to reach them if concerns arise. The first several weeks after starting a medication or changing dose are the key times to be the most vigilant about side effects. If side effects like agitation, insomnia, increased anxiety or suicidal thoughts occur, it's imperative to communicate with the treatment provider immediately.

What should people know to better understand recent reports about teen suicide?

- You may have heard the CDC reports related to increases in the rate of teen suicide. Any loss of life, especially of a young person is tragic and one is too many.

- Boys take their lives at 2-3x the rate of girls. Teen boys' rate saw a rise peaking in the late '80s/early '90s, coming down in the later '90s/early 2000's perhaps as pediatricians took on the role of treating depression, but then the rate has unfortunately been rising again since 2006.
- Teen girls' rate of suicide had a similar but less dramatic pattern of rise and fall, and the most concerning time frame are the last 10-15 years with girls' rate increasing the most over the last 10-12 years, narrowing the gender gap to a nearly 2:1 ratio in recent years.
- Youth rates remain significantly lower compared to every older age group. <https://afsp.org/about-suicide/suicide-statistics/>
- Mental health problems are quite common in youth, and can be addressed with support, treatment and individualized Safety Planning which includes being aware of their own unique triggers and warning signs, and practicing their most effective coping strategies.
 - Among college students, according to the 2018 NCHA college survey, 30% of college students were diagnosed with a mental health condition like depression or anxiety over the prior year.
- It's important to know that many factors impact teens' (and any population's) suicide risk:
 - The presence of a mental health condition like depression, bipolar disorder, PTSD, addiction or eating disorder, especially if left unaddressed
 - Stigma about mental health, unwillingness to open up or get help
 - Other cultural and family factors related to sense of support and feeling connected (being or feeling rejected by family members can add to suicide risk)
 - Problems with social connection or bullying, the role of social media can be considered
 - Fear or distrust of mental health providers or treatment
 - Problems with availability and accessibility of treatment
 - Availability of lethal means especially at home

You can familiarize yourself with how to have a conversation about mental health at afsp.org/MentalHealth or at afsp.org/realconvo.

**For information about Bullying and Suicide or information about Social Media and Suicide, see talking points on ChapterLand on those topics.