

ASK. Talking about suicide does not make a person 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.

TAKE SIGNS SERIOUSLY. Most 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. You can also access emergency services at your nearest hospital. Suicidal children need to be evaluated by an expert in assessing risk and developing treatment plans. Parents may 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.

SECURE WEAPONS, PRESCRIPTIONS DRUGS, MEDICATIONS AND OTHER MEANS OF HARM.

DO NOT LEAVE YOUR CHILD ALONE. Surround yourself 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 and support.

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.”

WARNING SIGNS	RISK FACTORS
<ul style="list-style-type: none"> • Talking about suicide, death, or preoccupation with dying. • Significant changes in behavior and/or personality; change in school performance, appearance • Anxious/agitated/aggressive behavior • Expressed feelings of hopelessness or worthlessness • Previous suicide attempts • Trouble eating or sleeping (sleeping all the time, unable to sleep at all, not able to eat or overeating) • Increased use of drugs or alcohol • Self-Injury • Giving Away Prized Possessions • Talking about being a burden to others • Withdrawing or isolating from family and friends 	<ul style="list-style-type: none"> • Personal or family history of mental illness or previous suicide attempts. • Alcohol/substance use disorders • Impulsive and/or aggressive tendencies • History of trauma and/or abuse • Major physical illnesses • Someone they know died by suicide • Significant loss (divorce, death, break-ups, etc.) • Access to lethal means (firearms, excess medications, etc.) • Lack of social support

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

RESOURCES

<p><u>EMERGENCY SERVICES</u> Any local Hospital Emergency Room (Wake Med, Rex, Duke Raleigh, UNC)</p>	<p><u>Alliance Health Referrals</u> 1-800-510-9132</p>
<p><u>Behavioral Health Urgent Care</u> Monarch Walk-In Clinic 319 Chapanoke Rd, Suite 120 Raleigh, NC 27603 (919) 703-2845 Hope Center (Kids Peace) Walk-In Clinic 400 W. Ransom Street Fuquay-Varina, NC 27526 (877) 888-7849 Carolina Outreach Walk-In Clinic 2670 Durham-Chapel Hill Blvd. Durham, NC 27707 (919) 251-9009</p>	<p><u>CRISIS HOTLINES</u> NC Hopeline 24 Hour Crisis Line: 919-231-4525 hopeline-nc.org 988 Suicide & Crisis Hot line: Call/Text 988 Direct Line for Alliance Crisis Response 1-877-223-4617 Trevor Project for LGBTQ+ Youth 24/7 Lifeline 1-866-488-7386 Say Something-ARS: 1-844-572-9669</p>
<p><u>Mobile Crisis Services</u> Kids Peace, Mobile Outreach Response Engagement & Stabilization (MORES) (484) 215-6756 Mobile Crisis Unit: Therapeutic Alternatives 1-877-626-1772</p>	<p><u>HELPFUL WEBSITES</u> 988 Suicide & Crisis Hotline www.988lifeline.org American Association of Suicidology www.suicidology.org American Foundation for Suicide Prevention www.afsp.org Suicide Awareness Voices of Educaiton www.save.org</p>