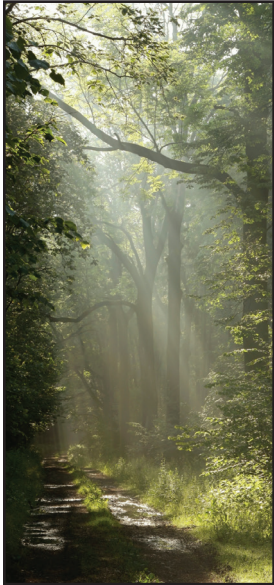


Holding On To Life toolkit





Do suicidal people want to die?

Suicidal people often believe that they have tried everything to stop the pain. However, the pain makes it difficult to think clearly, consider options, or remember reasons to stay alive.

Seeking professional help is a big step toward easing the emotional pain. **With help, your loved one can feel well again.**

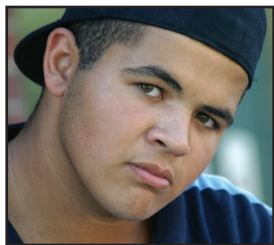
Most suicidal people do not want to die. They are experiencing severe emotional pain, and are desperate for the pain to go away.

Why are adolescents so moody?

Adolescent years are confusing for everyone. Their moodiness can be exhausting!

Adults often find it difficult to keep up with all the emotional and physical changes adolescents experience. They may look more like adults than kids, but don't think or act like adults. Young people are figuring out who they are in comparison to their parents, siblings, and other important people in their lives. In their transition from childhood to adulthood, they live constantly with conflicting feelings, and this is normal.

Ask directly about suicide. It will give them permission to talk about it with you.



It can be difficult to distinguish between normal adolescent moodiness and more serious emotional problems. This is why talking with them, and getting comfortable with the uncomfortable questions, is important. Take the time to listen, and remind them that overwhelming and confusing feelings are a normal part of being an adolescent. If these feelings become too much to cope with, it is best to get help.

What should I remove from my home right now?

It is important to make your home as safe as possible, especially if your loved one is experiencing severe stress, anxiety or depression.

Guns: Firearms should be removed from the home. Ask a relative, neighbor, or friend if they can hold them for you. If you are unable to find a safe place to store them, most police departments will hold your firearms for safekeeping. Call your local police department for more information.

The presence of a gun in the home of a young person doubles the chance that they will die from suicide. This is true even if the guns are locked up.

More than half of all suicide deaths are the result of a gunshot wound. If you are unable to remove the weapons from the home, make sure that they are locked up securely. Change the combination code; take gunlock keys and any ammunition out of the home. Typically, young people know where keys are hidden and what the pass codes or PIN numbers are. Many police departments have free gun locks that are given to anyone who asks for them.

Poisons and medications: Removing poisons, pills or any medications, including over-the-counter, everyday medications is important. You can call Poison Control at 1-800-222-1222 to find out a safe amount of medication to keep on hand.

Alcohol and drugs in the home increase the risk of suicide.

There are other ways people end their lives. Ask your loved one if there is something he or she has thought of using for suicide. If so, remove that as well.

How do I know if my loved one is suicidal?



Behaviors to watch for:

- **Talking or joking about suicide** (“I wish I were dead.” “I can’t take it any more.” “I’ll just kill myself.” “You’ll miss me when I am gone”)

Always take this seriously!

- **Withdrawing** from things that they love to do.
- **Giving away things** that are valuable to them.

- **Isolating themselves** from family or staying away from people they enjoy spending time with.
- **Drawing or writing about death.**
- **Looking for or talking about ways to die.**
- **Being forgetful;** not being able to concentrate; not doing as well at school or work.

It’s always best to be direct and ask if they are feeling suicidal.

Feelings or moods to watch for:

- **Drastic mood changes**, easily angered or upset.
- **Feeling as if they are a burden** or that people will be better off without them.
- **Worrying and stressing** over everything.
- **Feeling hopeless**, depressed, or sad for some time.
- **A sudden improvement in mood** for no apparent reason. Sometimes when a person makes a plan to die, they suddenly seem to feel better, perhaps because they see an end to their pain.

Painful life events that can increase the risk of suicide:

- **Being bullied:** at school, by text, phone, or social media (Facebook or Twitter).
- **Suffering a trauma** (injury or medical problem, sexual abuse/assault, victim of violence, legal problems).
- **Questioning sexual orientation** or being labeled gay, lesbian, bi-sexual or transgendered.
- **A recent loss** (moving, changing schools, parents’ divorce, relationship breakup, death of someone they love – even a celebrity).

Sometimes it’s just one sign, but most often it’s a combination of signs.

Do I really need to watch for suicide?



Suicide is the second leading cause of death for adolescents. Understanding why can help you take care of your loved one.

A suicidal person is a person in pain, who wants to make the pain go away. Emotional or mental pain makes it difficult to think clearly.

Recent research shows that the part of the brain that limits risky behaviors isn’t fully developed until age 25. This means that adolescents are more likely to take sudden action – including suicide – without considering the consequences.

It is always better to be safe than sorry when it comes to suicide.

The desire for pain to go away, combined with risky behaviors, increases the risk for suicide.

Ask your young person about suicide, and take all suicidal thoughts, threats, and behaviors seriously.

How do we handle the return to school?



Going back to school (or another regularly attended community group) can feel awkward and uncomfortable after a mental health crisis. If a school counselor or group leader knows about the situation, your loved one may receive some extra care and consideration outside of the home, which can make it easier to return to their normal life.

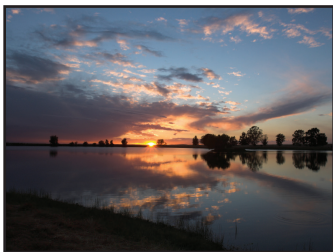
Think of it in these terms: If this were a physical problem that required medical treatment, necessary accommodations would be made. For example, a broken ankle might require surgery, then a cast or crutches, and follow-up appointments. Emotional and mental health also require care and treatment for some time after the crisis has passed.

Information to give a school counselor or community group leader:

- Your loved one has had a mental health crisis.
- Emotional stress may be affecting his or her grades and causing unusual behaviors (anger outbursts, skipping class).
- He or she is receiving treatment, and improvements may take time. Absences may be necessary to attend follow up counseling appointments.
- Ask if the school or group can make any accommodations.

Telling friends: Assure your loved one that there is nothing to be ashamed of. If they are wondering who to tell or what to say, encourage them to talk with people they believe will be supportive and respectful. Remind them that sharing personal information through texting or social media is never private.

What should I say to my loved one?



Here are a few ideas of what to say. You know your loved one best, so use what makes sense for you.

“I love you and want to make sure you stay safe.” In order to do that, we need to agree on a couple of things. I’m going to be asking you if you’re okay, so let’s decide how often I’m going to ask. You also need to agree to be honest when you answer the question.” This agreement to communicate is an important first step.

“Let’s talk when we’re calmer.” Arguments between you and your loved one can easily occur at this point. Strong words can result in more pain for both of you. Try to avoid a confrontation when emotions are running high.

“I love you...I’m proud of you...you are so important to me...we’re going to get through this together.” Sometimes a person who is feeling depressed or anxious or desperate becomes convinced that other people would be better off without him or her. Keep the encouragement coming so your loved one hears how important he or she is to you and to other people.

“You seem so sad (or withdrawn or angry or worried or...). What’s going on?” Identify a feeling and give your loved one a chance to talk about it. Their feelings won’t always make sense to you. Sometimes the things we feel aren’t logical. So don’t lecture. Just listen. It does help to get their feelings out.

“Are you thinking about killing yourself?...How would you do it?” These are such difficult questions. Ask them anyway. The answers tell you what you need to know to keep your loved one safer. Is there something in your house your young person is tempted to use to hurt or kill himself? Remove it. Can your young person agree on a way to stay safe? If not, it may be time to go to the hospital.

“Remember that time you felt so bad? You got through it and you can get through this.” It helps to be reminded that intense feelings pass, just like storm clouds. There is hope!

Why Am I Feeling This Way?

When a loved one is in crisis, the family may experience intense feelings and need extra care and attention. This includes you.



Alone: It's easy to think that you are the only one with this problem, especially because so many people avoid talking about mental health issues. You are not alone. **Reach out for help from family, friends, professionals, or a family support group.**

Guilt/Blame: There is rarely just one reason for your loved one's distress. Blaming yourself or others is not useful. **Focus instead on looking for ways to help.**

Confused: You may wonder how you didn't see this problem coming, but it's easy to confuse warning signs with typical adolescent behaviors. **Educate yourself on suicide prevention and mental health. The more you know, the more you can help.**

Angry: Feeling powerless about your loved one's crisis might make you feel angry with them or with the world in general. **A healthy way to communicate these strong feelings is to make it clear that you won't just stand by and do nothing while he or she struggles.** Let your loved one know you will do everything you can to keep them healthy and safe.

Scared: You may wonder if your sense of alarm or panic will ever go away. You may wonder if your loved one will be safe, or if you'll ever feel safe again. You may fear that your family won't be the same again. These are all normal fears. **It will help to talk to someone.**

Going through this experience together may help you come out on the other side of this crisis a stronger family than you were before.



What should I do to help my loved one?



Do ask your loved one if he or she is okay. Agree on how many times each day you will ask.

Do agree on a way to communicate. Talking, writing, texting - even drawing - are ways your loved one may communicate feelings and ask for help.

Do listen to your loved one.

Don't argue about how your loved one is feeling, even if it is uncomfortable to hear.

Do ask about suicide. Use words like "suicide" or "kill yourself."

Don't ask if they are thinking of doing something "crazy" or "stupid" or "drastic." Say "suicide" when you mean "suicide."

Don't leave your loved one alone if he or she cannot agree on a way to remain safe.

Do assure them that the intensity of their feelings will pass.

Don't judge their feelings or lecture about how you think your loved one should feel. Remember that thoughts of suicide are a result of not being able to think clearly through their pain.

Do fill out My Safety Plan and remind him or her to follow the steps.

Do remove guns, poisons and alcohol from the home.

Do make sure your loved one takes medication as prescribed.

Do make sure your loved one keeps counseling appointments.

Do call or go to the hospital if things get worse.

What is Safety Planning?



Safety Planning is a process of taking the time to write down signals that your loved one is headed for emotional or mental distress, and the steps to take to stay healthy and safe.

Distress can lead to many unhealthy behaviors (arguments, violence, problems at school or work, self-injury, substance abuse, stealing, suicide). Having a plan to avoid those behaviors, and being prepared during stressful times can help you feel more confident and hopeful.

We have included a My Safety Plan card in this packet, and we encourage you to fill it out with your loved one. When one or both of you recognize the first signals of distress, put My Safety Plan steps into action.

The more thought put into the plan, the better it will work. Update it when you discover new signals, new coping skills, and new sources of support.

If you or other members of your family would like a My Safety Plan card of your own, please call 248-872-7772 to request extra copies.



My Safety Plan Worksheet

Self-awareness: Everybody has feelings, behaviors or thoughts that signal that a suicidal (or other) crisis is coming. Think about what yours are, and write them down.

Action: When you start to notice the presence of these feelings, behaviors, or thoughts, what are some things you can do to take care of yourself? Some examples are:

- hobbies / exercise / go outside
- journal / meditation / prayer
- read / TV / music
- eat / bathe / shower / self-care
- draw / create / dance / sing
- what has helped in the past

Friendly People/Places:

- If you are not able to help yourself feel better with the strategies above, who can help you to stay connected, or distract you from the crisis?
- It helps to recognize that some people who are not able to be emotionally supportive in a crisis (including children) may still be great distractions.
- If not a specific person, perhaps there is a place (store, coffee shop, church, gym, etc.) where you can be around people.

Emotional Support:

- If the crisis is still not relieved, with whom can you share these troubling feelings, and ask for emotional support?
- A crisis center may be a support (800-273-8255).
- Include people who can help you stay safe.

Turn to Professionals: If you have tried all of the steps above and continue to feel suicidal, which professionals will you turn to? (therapist, doctor, hospital)

Yes! I can get through this!: Write down the things that inspire you to stay safe and alive.

Self-awareness:

These thoughts / feelings / behaviors tell me I'm in a bad place emotionally, or becoming dangerous to myself:

Action:

When I notice this happening, I will take care of myself by doing these things:

Friendly people and places:

I will go to these people or places to stay connected, or to distract myself (include contact info):

Emotional support

I will share my feelings with these friends or relatives, and I will ask them for help (include contact info):

Turn to professionals:

When nothing else seems to be helping, I will call on these professionals (include contact info):

Yes! I can get through this:

If I find myself unable or unwilling to follow these steps, I will remind myself:

Resources

American Foundation for Suicide Prevention
afsp.org

American Indian Health & Family Services
aihfs.org | 313-846-6030

CARE of SE Michigan
(Substance Abuse Services & Parenting Groups, Macomb Co.)
careofsem.com | 586-541-2273

Catholic Charities of Southeast Michigan
ccsem.org | 855-882-2736

Chelsea Behavioral Health (Outpatient Services)
stjoeschelsea.org/behavioralhealthservices
734-593-5251

Common Ground (Oakland County Suicide Prevention Services)
Available 24/7
commongroundhelps.org | 800-231-1127

Dawn Farms - Spera Center (Substance Abuse Treatment)
dawnfarm.org | 734-669-8265

Detroit Wayne Mental Health Authority
dwmha.com | 800-241-4949

Family Youth Interventions (Macomb County)
familyyouth.com | 586-465-1212

HAVEN
(Sexual Assault / Domestic Violence - Oakland County)
haven-oakland.org | 248-334-1274

Information and Referrals
211

Institute for Hope and Human Flourishing
(Outpatient Mental Health and Suicide Prevention Services)
iforhope.com | 248-872-7772

Kevin's Song (Suicide Prevention Education)
kevinssong.org

KnowResolve (Youth Suicide Prevention Programs)
knowresolve.org

Macomb County Crisis Center (Suicide Prevention Services)
mccmh.net | 586-307-9100

National Suicide Prevention Lifeline
Available 24/7
suicidepreventionlifeline.org | 800-273-TALK (8255)

Ozone House (Washtenaw County Youth Interventions)
Available 24/7
ozonehouse.org | 734-662-2222

Psychiatric Emergency Services,
University of Michigan Health System
Available 24/7
734-936-5900 or 734-996-4747

SafeHouse Center (Domestic Violence)
Available 24/7
safehousecenter.org | 734-995-5444

Sanctuary (Youth Interventions Oakland County)
commongroundhelps.org | 248-547-2260

St. Joseph Mercy Ann Arbor (Mental Health)
Available 24/7
734-712-2762

Suicide Prevention Resource Center
sprc.org

The Trevor Project (LGBTQ Youth Interventions)
thetrevorproject.org | 866-488-7386

Turning Point
(Sexual Assault / Domestic Violence - Macomb County)
Available 24/7
turningpointmacomb.org | 586-463-6990

University of Michigan Center for the Child and Family
734-764-9466

University of Michigan Counseling
and Psychological Services for Students
Available 24/7
caps.umich.edu | 734-764-8312

University of Michigan Department of Psychiatry
(Outpatient Services)
734-764-0231

University of Michigan Psychological Clinic
psychclinic.org | 734-764-3471

Washtenaw Community Mental Health
Available 24/7
734-544-3050

The Women's Center
womenscentersemi.org | 734-973-6779