How to Talk to Parents about a Child at Risk of Suicide

The facts and conversation between teachers and parents
Subject-Matter Experts

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Dave MacLeod, MSc RPsych, founding clinical psychologist with Western Psychology Services in Calgary, now the overseer of the WPS co-operative. Dave began work in suicide prevention in the late 1970s as a volunteer with the Distress Centre/Drug Centre and has, since then, worked in a variety of adolescent treatment centres around the world. Dave is a Consulting Trainer with the Centre for Suicide Prevention.

Secondary Research

Robert Olson, BA, MLIS, Librarian, Centre for Suicide Prevention, provided secondary research for this webinar.
Co-sponsoring Organizations

Injury Prevention Centre

A provincial organization committed to advancing the impact or prevention, emergency response, treatment and rehabilitation of injuries in Alberta. IPC is part of the School of Public Health, University of Alberta. For more information, visit us at:

http://injurypreventioncentre.ca/

Centre for Suicide Prevention

An education centre committed to reducing suicide through education: information services, workshops, presentations, and webinars. CSP is a branch of the Canadian Mental Health Association (CMHA). For more information, visit us at:

https://www.suicideinfo.ca/
It’s a conversation we have to have.

Taboo still influences our willingness to talk about suicide.
Fact #1

**Constantly shifting power imbalance**

**Proactive**
- use opportunities to stimulate discussion between youth and adults about suicide

**VS.**

**Reactive**
- care of the child is dependent on the conversation, legal, and moral obligation requires it
If we are thinking it, parents are already thinking it too

As a parent, it is hard to have your greatest fear confirmed

If parents are already thinking it, they are emotionally tired

Parents need an ally first, then support, and an expert last
Listen, empathize, and communicate respect
Ask questions and ask permission to take notes
Focus on the issues, observed (changes in) behaviour
Find a first step
As a parent, it’s hard not to be defensive

Avoid “I need to talk to you” or “We need to talk about something”

Focus needs to be on observed behaviours, shared concerns

Parents need to be honoured as the experts, our role is as the objective observer
People respond with their heart, not their head

Parents will most likely react emotionally, not logically

How does this reflect my ability as an effective parent - is it my fault?

Waiting to talk vs. listening
Fact #5

Parents and surrogate caregivers can respond differently.

Parents - child focused, influenced by personal experience and attitudes about suicide.

Surrogate Caregivers - information focused, influenced by external systems.

Parents can focus more solely on supporting child, surrogate caregivers have to focus on informing others as well.
References

• Canadian Centre on Substance Abuse (CCSA). (2007) Substance Abuse in Canada: Youth in Focus. Ottawa, ON: Canadian Centre on Substance Abuse.


Thank You

More questions?

Contact us at: csp@suicideinfo.ca