Risk Factors

While the path that leads to suicidal behavior is long and complex and there is no “profile” that predicts suicidal behavior with certainty, there are certain risk factors associated with increased suicide risk. In isolation, these factors are not signs of suicidal thinking. However, when present they signal the need to be vigilant for the warning signs of suicide.

• Access to means (e.g., firearms, knives, medication)
• Stressors (e.g., loss, peer relations, school, gender identity issues)
• History of depression, mental illness or substance/alcohol abuse
• History of suicide in the family or of a close friend
• History of mental illness in the family

Here’s What You Can Do:

LISTEN
• Assess for suicidal risk.
• Listen without judgement.
• Ask open-ended questions.

PROTECT
• Take action immediately.
• Supervise, do not leave your child alone.

CONNECT
• Communicate and collaborate with your child’s school administration, mental health personnel or counselor for support.
• Contact Department of Mental Health, law enforcement or protective services, as needed.
• Help your child identify adult they trust at home and at school.

MODEL
• Remain calm. Establish a safe environment to talk about suicide.
• Be aware of your thoughts, feelings, and reactions as you listen without judgement.

TEACH
• Learn the warning signs and risk factors and provide information and education about suicide and self-injury.
• Encourage help seeking behaviors and help your child identify adults they can trust at home and at school.
• Seek options for school and community resources including referrals to professional mental health services, as needed.
To understand why people die by suicide and why so many others attempt to take their own lives, it is important to know the facts. Read the facts about suicide below and share them with others.

**Understanding Suicide: Myths & Facts**

**Myth:** Suicide can’t be prevented. *If someone is set on taking their own life, there is nothing that can be done to stop them.*

**Fact:** Suicide is preventable. The vast majority of people contemplating suicide don’t really want to die. They are seeking an end to intense mental or physical pain. Most have a mental illness. Interventions can save lives.

**Myth:** Asking someone if they are thinking about suicide will put the idea in their head and cause them to act on it.

**Fact:** When you fear someone you know is in crisis or depressed, asking them if they are thinking about suicide can actually help. By giving a person an opportunity to open up and share their troubles you can help alleviate their pain and find solutions.

**Myth:** Someone making suicidal threats won’t really do it, they are just looking for attention.

**Fact:** Those who talk about suicide or express thoughts about wanting to die, are at risk for suicide and need your attention. Most people who die by suicide give some indication or warning. Take all threats of suicide seriously. Even if you think they are just “crying for help”—a cry for help, is a cry for help—so help.

**Myth:** It is easy for parents/caregivers to tell when their child is showing signs of suicidal behavior.

**Fact:** Unfortunately, research shows that this is not the case in a surprisingly large percentage of families. This illustrates the importance for parents/caregivers to be attentive to warning signs, risk factors, to ask direct questions, and be open to conversation.

**What Should I Do If I Am Worried About My Child?**

If you believe that your child is thinking about suicide, approach the situation by asking. Asking is the first step in saving a life and can let them know that you are here for them and will listen. Here are some examples of how you may ask: “Have you thought about suicide?” “Sometimes when people are sad as you are, they think about suicide. Have you ever thought about it?”

**EMERGENCY INFORMATION / After Hours Services**
If you need IMMEDIATE help, call 911.
For a psychiatric emergency, contact the Department of Mental Health 24-hour ACCESS Center at (800) 854-7771.

**Community Hotlines**
Didi Hirsch Suicide Prevention Hotline (877) 727-4747 (24 hours)
National Suicide Prevention Lifeline (800) 273-TALK (8255) (24 hours)
Trevor Lifeline (866) 488-7386 (24 hours)
Teen Line (800) 852-8336 (6pm-10pm daily)

**Text and Chat Resources**
Crisis Chat (11am-11pm, daily)
http://www.crisischat.org/chat
Teen Line - text “TEEN” to 839863

**Resources for Parents/Caregivers & Children/Adolescents**

**Online Resources**
http://www.didihirsch.org/
http://www.thetrevorproject.org/
http://teenline.org/
http://www.afsp.org/understanding-suicide

**Smartphone Apps**
MY3
Teen Line Youth Yellow Pages

**For clinic referrals visit:**
smh.lausd.net