

A guide for parents and caregivers.

KNOWING WHAT GOES ON IN YOUR TEEN'S LIFE IS GOOD.

Talking to them about it is even better.

/Introduction

Mental illness affects 1 in every 5 youth in Canada and, in more tragic instances, may lead to suicidal thoughts or behaviours.

The keys to taking care of your youth's mental health are to work towards building a close and genuinely supportive relationship and promoting mental wellness, and if problem(s) arise to get help early.

This guide was designed to help parents and caregivers forge and strengthen those connections and support their youth's mental health.

Let's open the door to a new conversation about youth mental health.











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INTRODUCTION



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The facts about youth mental illness



Living with a young person can be a stressful time for parents. Often they seem to change overnight from friendly and agreeable children to difficult strangers. In the adolescent years the brain is experiencing

a lot of changes, and your teen may be less able to manage emotions, make good judgments, and control impulses.

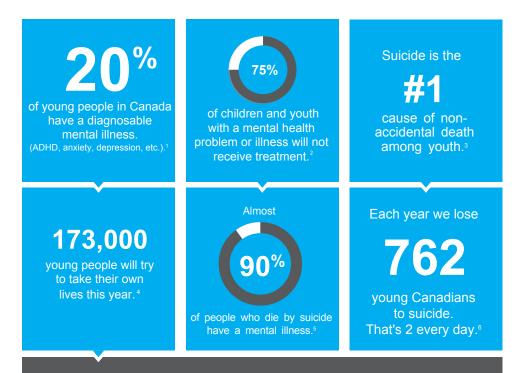
Most of the time, this is just a natural part of growing up.

Young people are simply searching for their own personal identity.

Sometimes, however, there are signs that can point to something more serious, such as ADHD, anxiety, or depression. Mental illness can prevent a young person from performing in school or from making friends, and in some instances may lead to thoughts of suicide.

The good news is that mental health problems and illnesses are treatable.

7 Numbers Every Canadian Should Know



3x as many youth (15-24 yrs) die by suicide than by all forms of cancer combined.⁷

Sources

- 1. Risk Analytica/Mental Health Commission of Canada 2011 Impact Study
- Waddell C, Offord DR, Shepherd CA, Hua JM, McEwan K. (2002). Child Psychiatric Epidemiology and Canadian Public Policy-Making: The State of the Science and the Art of the Possible. Can J Psychiatry, 47(9), 825-832
- 3. Navaneelan, T. Statistics Canada Catalogue no. 82-624-X. Suicide rates: An overview. July 2012
- TB Eaton DK, Kann L, Kinchen S, Shanklin S, Flint KH, Hawkins J, et al. Youth risk behaviour surveillance United States, 2011. Morbidity and Mortality Weekly Report CDC Surveillance Summary 2012;61(4). / Population age group 15-19, Statistics Canada, 2012
- 5. Arsenault-Lapierre G, Kim C, Turecki G. BMC Psychiatry 2004, 4:37 doi: 10.1186/1471-244X-4-37
- 6. Statistics Canada, 2009 (ages 10-29)
- 7. Statistics Canada data analysis (2003-2008)

5 RIGHT BY YOU: GUIDE FOR PARENTS AND CAREGIVERS

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/Early Prevention

While anyone can suffer from mental illness, young people are in many ways more vulnerable because they do not have the benefit of wisdom and life experience.



As a parent, one of the most important factors in promoting mental health and preventing mental illness is to establish an ongoing and genuinely

supportive relationship with your youth. You can influence this through the things you say and do and through the environment you create at home.

Sources:

www.jack.org/resources www.parentingstrategies.net www.headspace.org.au/friends-and-family www.suicideinfo.ca

Things you can do before there's a problem:





You should always strive for open and direct communications with your youth. However, you could also consider creating a set of signals (e.g. use of code words or a specific email or text message) that your youth can use to let you know that they have something important to discuss with you.

Talking with your youth

Talking with your youth can seem like a daunting task, but it doesn't have to be. The more you open up and treat them with respect, the more enriching and enlightening your relationship can be - no matter how serious the discussion.

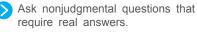
General Tips:

Notice the little conversation openers that are offered.

Make a habit of talking about whatever makes your youth happy or what interests them. You can also participate in activities that they enjoy doing – usually they will open up more during these times.



Ask about and acknowledge their feelings.





Listen (really listen) to their answers.

> Answer questions directly and honestly.

- Give your undivided attention. If the phone rings or an email or text comes through, don't answer it.
- > Don't jump in with solutions and advice. Young people will often test their parents, sharing just enough to get a reaction. Jumping in too early as "the authority" could make them reluctant to share more. Any pauses might result in them opening up more.

Don't judge or minimize a person's suffering by saying things like "Life isn't fair" or "It will pass."



If you don't get the response you want, step back and try another approach.

When things become more challenging:



Always acknowledge their position.



Try hard to avoid making them defensive.



Don't take it personally.

- When greeted with something hurtful contempt, sarcasm, or indifference try not to respond with anger.
- Reconnect with them and reiterate your love and empathy for them.



Keep the conversation safe for everyone.

Notice and highlight the positive things that they do - don't always focus on what they are doing wrong.



Remember that working through a conflict in a way that meets everyone's needs could bring you closer to them.

If they're not comfortable talking to you, encourage them to see your family doctor or call Kids Help Phone: 1-800-668-6868 so they can talk to a counsellor.



Sources:

www.ahaparenting.com/parenting-tools/communication/foolproof-strategies-talk www.ahaparenting.com/parenting-tools/communication/conversations-kids www.healthychildren.org/English/family-life/family-dynamics/communication-discipline/pages/Howto-Communicate-with-a-Teenager.aspx

Potential Roadblocks

Deeper conversations will allow you and your youth to get to know each other better and share thoughts and ideas.

Sometimes, however, youth are reluctant to talk to their own parents. Consider some things that your youth may be thinking before you determine your actions, behaviour, or responses:

I don't want to be judged or labelled.

Young people are labelled every day - judged by their backgrounds, what they drive, what they wear and what they look like. The last place they want more judgment is in their own home.



I don't want to fight again.

Even in the healthiest relationships, people who love each other will disagree. It's important to remember: When a discussion ends in screaming or physical force, you've already lost your authority. When you work through conflict with respect, hope, dignity, and affirmation, chances are they will respond.

My parents don't really listen.

Young people want to have a conversation, but it's frustrating when someone listens just long enough to jump in to try to fix it or to offer advice or a lecture. When you listen to the end, you are equipped to help your youth with the real problem. That is your moment to offer realistic guidance that will help them find their way.

My parents will freak out.

Your youth loves you and may not want to worry you. Always listen first and save your "freaking out" for a later, and more private, time.

Myths about youth suicide

Separating fact from fiction may help you better understand if your youth is at risk of suicide

Only "crazy" people Myth think about suicide.

Fact

Suicidal thoughts and behaviours occur in

people of all age groups and all walks of life, especially young people, whether or not they are facing mental illness. A person might have suicidal thoughts when they are in crisis and cannot see other alternatives.

Talking about suicide Myth may give them the idea.

Fact

While death is an uncomfortable subject for many people, it is

important to talk about it openly and honestly. You will not make your youth suicidal by talking about suicide. An open discussion about suicide shows that you care and want to help. It can be the first step to getting them the help they need.

MYTHS ABOUT YOUTH SUICIDE

Suicidal feelings are permanent. Once a person starts thinking about suicide, the thoughts never go away.

Fact

Myth

Suicidal thoughts and feelings are a temporary response to a situation that a person sees as unbearable. As their parent or caregiver, you, a counsellor, or another person will be able to help them see their

situation from other perspectives and learn to cope in different ways.





A suicidal youth only wants attention and doesn't mean it when mentioning suicide.



Fact Threatening suicidal behaviour is always cause for concern and requires professional follow-up. At the very least,

threatening suicidal behaviour is a sign that your youth needs to learn more effective coping skills.

MYTHS ABOUT YOUTH SUICIDE



Suicidal youth want to die.

Fact A suicidal youth is in pain and wants this pain to end but does not necessarily want to die. They just may not know how to make things better or have the energy to take the steps to get help.





Most deaths by suicide occur with **little or no warning.**

Fact A person can learn to see the warning signs. Youth who attempt suicide often have behaviours, personality characteristics, or circumstances in their lives that are associated with suicidal thinking or actions. The key is to notice these indicators and to respond to them as a call for help.



Warning Signs



It is all too easy to think of suicide as something that happens to other people's families. We want to believe that youth who experience suicidal

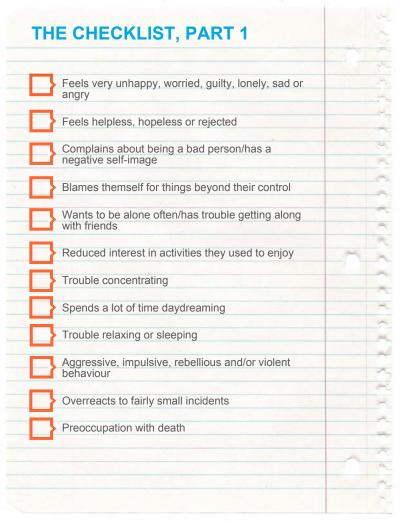
thoughts or behaviours come from dysfunctional families or that they have been exposed to violence, neglect, or abuse. While these factors may increase the risk of suicide, it's important to understand that suicidal behaviours cross all racial, economic, social, and ethnic lines. No one is immune.

When individuals are overwhelmed, whether by life stresses, mental health problems, or mental illness, suicidal behaviour may seem like a way of coping. People can have suicidal thoughts or feelings when they feel disconnected from other people, helpless to deal with issues, and/or hopeless about their situation ever improving.

COULD YOUR CHILD BE EXPERIENCING A MENTAL ILLNESS?

All young people are different; however, there are some warning signs you can look for. Use the checklist to help identify and record changes in how your youth is thinking, feeling, or acting.

However, keep in mind that just because you notice one or more of these changes, it does not necessarily mean that your youth has a mental illness. But you should consider approaching them and seeking a professional opinion and/or help.

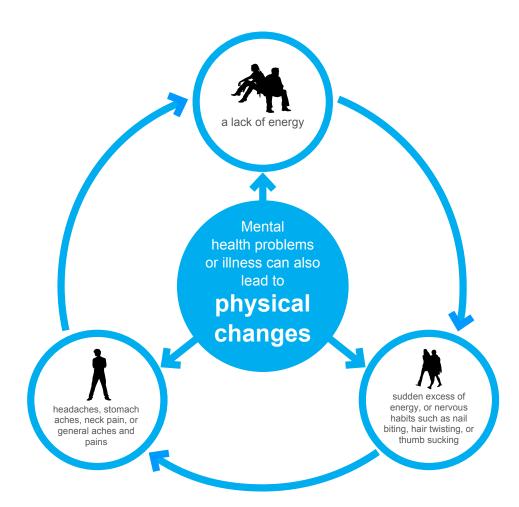


This checklist is not comprehensive – please visit www.suicideprevention.ca/ need-help/im-concerned-about-someone/

2	THE CHECKLIST, PART 2
	Changes in their school performance Changes in their sleeping or eating patterns
	Dramatic changes in mood, with reactions that often seem bigger than the situation calls for An increase in drug and/or alcohol use
*	Lack of self-care/neglect of self Reluctance to accept praise
	Direct expressions of hopelessness like "I don't want to live any more" or "people will be better off without me"
2323	Giving away prized possessions or making a will Reconnecting with old friends and extended family as if to say goodbye
~ ~ ~	Previous suicide attempts Suddenly becoming cheerful after a period of
	depression (may mean the youth has already made the decision to stop the pain through suicide)



TRUST YOUR INTUITION No one knows your child better than you In addition to the checklist, you should also take note of physical changes that might suggest an issue or problem.



Sources: www.caringforkids.cps.ca/handouts/mental_health www.suicideprevention.ca/need-help/im-concerned-about-someone/www.suicideinfo.ca

Dos and don'ts of talking about youth suicide



Talking to your youth about suicide can be difficult, but it can help them feel less alone and may make it easier for them to accept help.

If you have noticed a pattern of behaviour in your youth that is consistent with some of the warning signs, start gently. It is important not to be confrontational, as that could make them defensive. But it is also crucial to be direct, so make sure you are prepared.



If a young person in crisis asks you to guarantee confidentiality, avoid doing so, or be prepared to break their confidence. Though they may be hurt and angry initially, saving their life is more important.

DO

- Mention the changes you've noticed in their behaviour, such as "I've noticed you're spending a lot of time alone lately; is something troubling you?"
- Remind them you care. People who feel suicidal are often worried that they are a burden, so it's important to communicate to them that you love them and want to help them through this.
- Be direct. Ask if they are considering suicidal behaviour ("Are you thinking about hurting or killing yourself?"). If the answer is yes, find out if they have a plan ("How are you planning to do it?", "Were you planning a certain time to do it?"). Getting the answers to these questions can help you evaluate the mindset of your youth and get them the necessary help. The more detailed the plan, the higher the risk.

- Remain calm. Though you may be shocked and overwhelmed, keeping relaxed will ensure the most comfortable situation for them to reach out for help.
- Be prepared to ACT. If your youth opens up about suicidal behaviour, don't be afraid to get them the help they need immediately. Call 911 or visit the nearest hospital emergency room. Do not leave them alone and limit all access to firearms, medications, or other lethal methods for suicide.
- Communicate your love and support. Let your youth know that things can get better, and that you will support them in finding help and working toward a happier future - however long it takes.

DON'T

- Don't judge. Let them do the talking and try to avoid interrupting or expressing disappointment.
- > Don't try to fill all of the silences in the conversation; the pauses might result in your youth opening up more.
- Don't minimize their suffering by saying things like "Life isn't fair" or "It will pass."
- > Don't try to play the hero. You are not a trained counsellor and having the right support is important. You do not want to put yourself in a dangerous situation, nor do you want to aggravate the suicidal person. Additionally, you should never attempt to physically take away a weapon.



Sources: www.jack.org/resources www.jasonfoundation.com/prp/what-a-parent-can-do/dos-and-donts

/Finding help

If you or your youth is in need of help immediately – call 911 or visit your local emergency department now.

CRISIS SUPPORT

- Contact a crisis centre
- Contact Kids Help Phone (1-800-668-6868) or go online (www.kidshelpphone.ca)

OTHER IMMEDIATE SERVICES

- Call 211 in British Columbia, Alberta (Calgary, Edmonton), Ontario or Quebec
- Visit www.eMentalHealth.ca
- Contact your local health clinic or local hospital that provides mental health services
- Contact your local chapter of the Canadian Mental Health Association: www.cmha.ca
- Visit www.kidsmentalhealth.ca for a list of Children's Mental Health Centres in Ontario



Additional Resources

Your family doctor: A family doctor is often a good place to start. Yours can help you find professional help. With a little preparation, you can get the most out of your visit: www.mayoclinic.org/diseases-conditions/ mental-illness/basics/preparing-for-yourappointment/con-20033813.

A psychiatrist: A psychiatrist is a medical doctor specially trained in the diagnosis and treatment of mental illnesses – through medication or psychotherapy (sometimes called "talk therapy") or a combination of both. Your family doctor may give you a referral.

A psychologist: A psychologist has an advanced degree from a university but not a medical degree and will use counselling and other methods that do not involve the use of medications. Should you decide to seek help from a psychologist, you don't need a referral from your family doctor.

A registered social worker: A registered social worker has specialized post-secondary education and must participate in continued professional learning and skills development to fulfil the requirements of their professional provincial regulatory body. Social workers may provide counselling, psychotherapy, rehabilitative or assessment services, or provide referrals to the appropriate services. **Counsellor / psychotherapist:** Has an advanced degree or specialized postsecondary training in the skilled use of relationships to help effect positive change and to stabilize or enhance wellbeing. Counselling / psychotherapy addresses decision-making, coping with crisis, developing personal insights, working through inner conflict, or improving relationships. You do not need a referral to seek help from a counsellor / psychotherapist.

A psychiatric / mental health nurse:

Nurses who specialize in psychiatric and mental health care work in inpatient treatment centres, for crisis lines, and in the community. They may have a range of specialized education, from a certificate in psychiatric and mental health nursing, to an advanced university degree. Psychiatric / mental health nurses provide counselling, case management, crisis intervention, education, medication therapy, as well as biopsychosocial assessment and care planning.

A peer support / self-help group: For many people living with mental illness, self-help and peer support can be important elements of recovery because of the support they can offer through shared experiences.

Getting help for yourself



Knowing that your youth is having suicidal thoughts or engaging in suicidal behaviour can be incredibly difficult. You might feel judged or blamed for what your

youth is going through. Avoid the temptation to criticize or blame yourself. Focus your attention instead on getting your youth the help they need.

Support for yourself is also crucial during this time – create a network of people you can talk to about your feelings, such as friends, family members, a spiritual adviser, or anyone else who can listen and assist.



Learning more

Here are some useful resources, programs, and initiatives:

For Parents / Caregivers

Anxiety BC: www.anxietybc.com/parenting/parent-child

ASIST – for suicide prevention / intervention training: www.livingworks.net

Canadian Mental Health Association: www.cmha.ca/mental-health/mental-healthbrochures/www.cmha.ca/highschool/ parentsH.htm

Canadian Paediatric Society: www.caringforkids.cps.ca/handouts/ mental_health

Centre for Addiction and Mental Health (CAMH): www.camh.ca/en/hospital/ health_information/for_ parents/Pages/ default.aspx

Centre for Suicide Prevention: http://bit.ly/YARParents

Children's Mental Health Ontario: www.kidsmentalhealth.ca/parents/ introduction.php

eMentalHealth.ca: www.ementalhealth.ca Jack.org: www.jack.org/resources

Teen Mental Health: www.teenmentalhealth.org

Videos: www.sptsusa.org/not-my-kid www.suicidology.org/resourcesrecommended-videos





For Youth

Blue Wave Foundation www.bluewavebc.ca

Centre for Additional and Mental Health (CAMH) child & youth resources: www.camh.ca/en/hospital/health_information/ for_children_ youth/Pages/default.aspx

Children's Mental Health Ontario: www.kidsmentalhealth.ca/children_youth/ introduction.php

Early Psychosis Intervention www.earlypsychosis.ca

eMentalHealth.ca: www.ementalhealth.ca

Jack.org www.jack.org/resources

Kelty Mental Health Resource Centre: www.keltymentalhealth.ca/youth-and-youngadults

Kids Help Phone (kidshelpphone.ca): www.kidshelpphone.ca/teens

Mental Health Helpline: www.mentalhealthhelpline.ca mindcheck.ca: www.mindcheck.ca

mindyourmind: www.mindyourmind.ca

MyHealth Magazine: www.yoomagazine.net

Xperiment.ca: www.xperiment.ca

Your Life Counts: www.yourlifecounts.org

Your Life Your Voice: www.yourlifeyourvoice.org

Youth in BC: www.youthinbc.com

YouThrive.ca: www.youthrive.ca

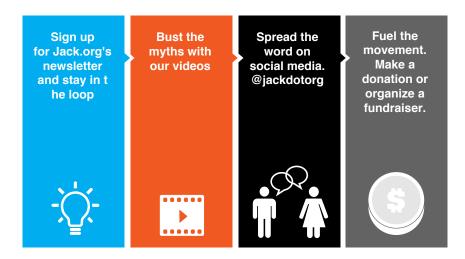
Youth Net: www.youthnet.on.ca

Youthspace.ca: www.youthspace.c



Help drive change through the Right By You campaign.

There are several ways you can take action to support teen mental health in Canada:



jack.org

Empowering and training young leaders to revolutionize mental health.





