DBSA
Depression and Bipolar Support Alliance

Talking About Suicide

A Guide for Parents and Caregivers

When a child or teen is struggling with thoughts of suicide, it's normal for parents and caregivers to feel unsure or afraid of saying the wrong thing. This FAQ offers practical, compassionate guidance to help you talk with your child, recognize warning signs, reduce risk, and find support.

Starting the Conversation

Starting a conversation about suicide with your child can feel scary, but open, honest dialogue is one of the most powerful ways to offer support.

How do I talk to my child about suicide?

Parents and caregivers often fear that talking about suicide will "put the idea in their child's head." However, there is no evidence to support this fear (Dazzi et al., 2014). The best practice is to ask clearly and directly if your child is having thoughts of suicide. Putting words to these thoughts and emotions may even feel like a relief to your child (The Jed Foundation).

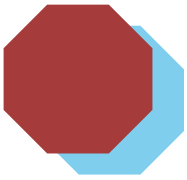
What if my child doesn't want to talk to me about their suicidal thoughts?

It is normal for children to be too anxious or embarrassed to disclose suicidal thoughts to their parents. Provide your child with a safe and confidential space to talk about these thoughts, such as a school social worker or therapist. Do not express anger or disappointment with your child for having thoughts of suicide (Child Mind Institute). This may make them less likely to open up to you in the future.

At what age do children start having thoughts of suicide?

While suicidal ideation typically manifests in adolescence, children as young as three may express thoughts of suicide. Don't assume that your child is too young to understand suicide. Young children with suicidal ideation have a better understanding of death than their peers (Hennefield et al., 2019). You might ask your child if they ever think about wanting to die, "going to sleep and never waking up," or "not being here anymore."

Recognizing the Signs



Recognizing warning signs early can help you take steps to keep your child safe. Not all signs are obvious—especially if they seem like a sudden improvement.

What are the warning signs that my child may be experiencing suicidal thoughts?

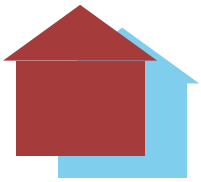
Warning signs include self-isolation, engaging in risky behaviors, expressing feeling like a burden, giving away possessions, and talking or posting on social media about dying or not needing to worry about them anymore. Be on the lookout for sudden changes in depression symptoms—what seems to be a welcome improvement may be a sign that your child has made the decision to attempt suicide (Nationwide Children's Hospital).

If my child self-harms, does that mean they're thinking about suicide?

Self-harm, also known as non-suicidal self-injury (NSSI), can be correlated with suicidal thoughts, but the presence of one does not necessarily indicate the presence of the other (Cornell Research Program on Self-Injury and Recovery). NSSI is typically used as a coping skill to alleviate emotional pain. Encourage your child to use other coping skills and remove access to lethal means, but do not shame or punish your child for self-harming.

After starting the conversation and recognizing the signs, the next step is to take action—create safety, know where to turn, and seek support.

Taking Action at Home



Creating a safer home environment is a key part of suicide prevention. Having a clear safety plan can reduce risk and help your child feel more supported.

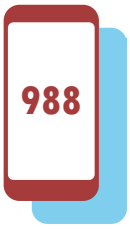
How do I remove access to lethal means in my home?

Firearms are the most lethal method of suicide (Shenassa et al., 2003). Make sure any firearms are securely locked away or removed from the home. Store firearms and ammunition in separate secure places as an extra precaution. Keep sharp objects (like kitchen knives and scissors), caustic cleaners (like Drano), and medications locked away and out of reach of your child, even over-the-counter medications like Tylenol. If your child takes a daily medication, provide a single dosage at a time to prevent overdose.

What is a safety plan?

A safety plan typically includes warning signs, coping skills, social supports (like family or friends), professional supports (like a therapist or 988), and removing access to lethal means (Child Mind Institute). Download the 988 safety plan: https://www.samhsa.gov/sites/default/files/988-safety-plan.pdf

Getting Help and Knowing What to Expect



In moments of crisis, it's important to know where to turn and how to support your child—whether they live with you or not.

What will happen if I call 988?

The 988 Suicide & Crisis Lifeline connects you with trained counselors who can assess suicide risk, listen with empathy, and help create a safety plan. Calls are routed based on area code and handled by a national network of crisis centers. Counselors can talk with concerned parents, caregivers, or friends, and—with your child's consent—can speak with them directly to offer support and guidance.

How can I support my adult child's safety if they don't live with me?

Balancing your adult child's independence with concern for their safety can be difficult. Stay available through phone or text, and keep a copy of their safety plan. During periods of high risk, make sure someone is with them—this could be a roommate, partner, or trusted friend. You can also connect them with a local mobile crisis team, which can send trained mental health professionals to their location.

Finding Support for Yourself

DBSA believes that peer support is a powerful wellness tool that can be beneficial to both those living with mood disorders and their loved ones. Join one of DBSA's three types of support groups for parents and caregivers of individuals living with mood disorders: Parents & Caregivers for ages 17 and under, ages 18+, and newly diagnosed children.

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Depression and Bipolar Support Alliance (DBSA) is the leading national organization focused on depression and bipolar disorder. We provide peer-led support, trusted resources, and wellness tools for individuals living with mood disorders—as well as for their family members, friends, parents, and caregivers.

Learn more about DBSA at **www.DBSAlliance.org**