



Community Resources

Dial 911 in cases of emergency and imminent danger

Crisis Hotlines (suicide prevention)

- National Suicide Prevention Hotline..... 1(800) 273-8255
- 24/7 Suicide Crisis Hotline..... 1(877) 727-4747
- Teenline-Teens Helping Teens...(Hours 6:00pm-9:00pm)..... 1(800) 852-8336
- Teens Helping Teens **Text "TEEN"** to...(Hours 6:00pm-9:00pm) 839863
- Youth Crisis Line..... 1(800) 843-5200

24-Hour Free Assessment/Psychiatric Hold & Hospitalization

AGE 13 and older

Aurora Charter Oak Hospital
 1161 E. Covina Blvd, Covina 91724
 Hotline: (800)654-2673
 (626)966-1632

AGE 12 and under

BHC Alhambra
 4619 Rosemead Blvd, Rosemead 91770
 (626)286-1191

Family and Individual Counseling Services (non-crisis)

- Foothill Family Services- West Covina..... (626) 564-1613 Medi-Cal
- Pacific Clinics- Glendora..... (626) 335-5980 Medi-Cal
- APU Community Counseling Center- Azusa..... (626) 815-5421
- Foothill Counseling Center- Azusa..... (626) 969-7243
- New Hope Christian Counseling- Covina..... (626) 967-6421
- Christ Church of the Valley Counseling Center-San Dimas..... (909) 592-2282 Ext. 108
- Fuller Psychological and Family Services- Pasadena..... (626) 584-5555
- Bienvenidos Children's Center- West Covina..... (626) 543-1121 Medi-Cal
- The Family Center..... (626) 967-5103 Medi-Cal
- Care Solace.....caresolace.com/cvusdparents..... (888) 515-0595

Suicide Prevention Awareness for Parents/Caregivers

Suicide is a serious public health problem that takes an enormous toll on families, friends, classmates, co-workers and communities, as well as on our military personnel and veterans. Suicide prevention is the collective efforts of local community organizations, mental health practitioners and related professionals to reduce the incidence of suicide through education, awareness, and services.

SUICIDE IS PREVENTABLE.

Warning Signs

Warning signs are observable behaviors that may signal the presence of suicidal thinking. They might be considered “cries for help” or “invitations to intervene.” These warning signs signal the need to inquire directly about whether the individual has thoughts of suicide. If such thinking is acknowledged, then suicide interventions will be required.



- Feelings of sadness, hopelessness, helplessness
- Significant changes in behavior, appearance, thoughts, and/or feelings
- Social withdrawal and isolation
- Suicide threats (direct and indirect)
- Suicide notes and plans
- History of suicidal ideation/behavior
- Self-injurious behavior
- Preoccupation with death
- Making final arrangements (e.g., giving away prized possessions, posting plans on social media, sending text messages to friends)

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.

- Consider developing a safety plan at school and home, if needed.

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.

Understanding Suicide: Myths & Facts

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.

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.

Resources for Parents/Caregivers & Children/Adolescents

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

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

