



Larry has worked in mental health since 1990. He began work with Mental Health Resources in 1996 and became a partner in 2000 and was named President in 2007. In 2005, Larry formed Willowbrook, Inc. with two partners. Both organizations are contract providers for Tri-County Mental Health services for children and adults in Ray, Platte and Clay Counties in Missouri. Larry currently supervises 12 clinicians and see 10 individuals for counseling.

For questions and/or permission to reprint this article in whole, or in part, for any purpose other than personal use, contact inquiries@theBMSproject.org.

theBMSproject.org



TOPIC ARTICLE

“Suicide: What to watch for in teens and young adults”

By: Larry Lauvetz, M.A.

It is disturbing when a family member, friend, an athlete or an acquaintance appears to be considering self-harm. According to the CDC, suicide is the second leading cause of death for teens and young adults ages 10-34. In 2023, 22% of high school students reported having seriously considered suicide in the past year, with 10% attempting suicide.

For more complete statistics on suicide, go to the JED Foundation at jedfoundation.org. As far as understanding the situations most commonly associated with suicidal ideations (SI) and understanding the warning signs leading up to SI, here is some helpful information.

Isolation – One of the best indicators for SI is isolation. Most people exhibiting SI symptoms will isolate to some degree. For young people this can be a very challenging stage in their development. Allowing young people to spend time on their own can be challenging to parents as most parents would prefer that their youngster spend time around the family and discuss their daily activities. The same issues of isolation come into play with people of all ages that might be considering suicide. As a parent who has had three teenagers, I know that having quality family time is not always reality. The difficult thing for parents is to know where to draw the line between healthy time alone and excessive isolation. Having firm boundaries and clear expectations can relieve some of these frustrations and let your youngster know that there is going to be time given for privacy, but too much time is not okay. Too much isolation can also be unhealthy for an adult; and a possible sign of SI.

A rapid level of decrease in interest or motivation in the things they love to do – This is also a clear sign that something is wrong and having discussions about this is crucial. If you know someone who is very interested in a certain sport, video games, hanging out with friends, whatever it is and then slowly starts to become detached to those interests, it is a warning sign that something is amiss.

Poor sleep – Most teens and adults that are contemplating suicide have difficulty sleeping because they will ruminate about this at night. Poor sleep is one of the most correlated symptoms when it comes to SI.

Sports Injuries, especially concussions – Sports can be a healthy reprieve from the everyday stressors of life for many teens and adults. Becoming injured in the sport they love, and subsequently not being able to play, can be very difficult to handle. Concussions have also been shown to increase SI in teens and adults, especially multiple concussions, leading to prolonged headaches, depression, confusion, and isolation.

Statements like no one cares about me and then they stop – Statements like this can be common with children when they do not get what they want. Teenagers and adults may make these

statements as a cry for help too. A teenager or an adult who has made these statements in the past but now has ceased in making these statements, in absence of a change in their environment, can be a strong warning sign. Obviously if things in their life have changed for the better, these statements will also likely cease.

Having a safety plan and not engaging in it – In some instances, individuals will convey their feelings of hopelessness and this is the time to present a safety plan. A safety plan can be a verbal agreement, a signed document, or an app on their phone that they can turn to if needed. This safety plan typically includes coping strategies, reasons to live, contacts or supports and places or things that can aid in distraction. An individual that has a current safety plan but is not using it is another warning sign that a crisis may occur.

Any kind of self-destruction like cutting behaviors or an increase in risky behaviors – Some forms of self-mutilation, like cutting or burning, can be a sign that a person is at risk for more fatal actions. The infliction of pain onto oneself can also be seen as a coping strategy, although one would argue that it is not a recommended coping strategy long term. Self-destructive behaviors are a strong indication that a person is having suicidal ideations and should be taken very seriously.

Feel like a burden or being abandoned – Oftentimes, an individual will feel as though they may be the reason for a struggling marriage or they will internalize the absences of a parent or loved one. “If I had only been better then this would not have happened” or “I am just in the way and another mouth to feed” has been a theme in many dysfunctional family and personal situations. Informing an individual that they do matter and what their friends, parents or loved ones did is not their fault can be a difficult message to get conveyed.

Other indications that an individual may be suffering from an increase in depression or having suicidal thoughts are:

- In the case of a young person looking to see if any of their peers at school or teammates may have committed suicide.
- Any kind of writings about what it would be like to not be here
- Piling up medications
- Increasing drug use in an effort to not feel anything

Suggestions:

- Make sure that the person has a strong social support. This is not always an option sometimes individuals have a tendency to isolate and ostracize friends and family when they are depressed.
- In the case of young people, having strong parental and instructional advocates is important. This can include teacher, coaches, and administrators. It is important to talk to their social supports, teachers, and coaches to see if they are seeing any concerning behaviors.
- Don't be suffocating but be present and talk about suicide. Parents can make the situation worse by suffocating their child with attention and questions. There is a fine line between being present and smothering. Listening to your child is key to knowing where that line exists. Similar concerns exist when attempting to support an adult in crisis.
- Provide individuals in crisis protective factors, i.e., give them something to look forward to - not letting them isolate. Create different activities to do and healthy social settings so they can take their mind off things.
- Call the primary physician and set up an appointment to discuss your concerns.
- Call 988 to discuss the situation and get some helpful tips and information about local resources.
- Talk to your insurance about any and all counseling options.

Next Step Resources:

The BMS Project's Warning Signs and Crisis Intervention

<https://thebmsproject.org/crisis-intervention-overview/>

EMERGENCY

In a crisis call "911" immediately

● If considering self-harm, call "988"

The National Suicide Intervention Lifeline

SEXUAL MISCONDUCT

To speak to a counselor,

Call (800) 656-4673

RAINN

BULLYING/HAZING, VIOLENCE, ADDICTIONS & SUBSTANCE ABUSE

For helpful resources,

thebmsproject.org/Safety

CHILD ABUSE

To report suspected child abuse,

Call (800) 422-4453

Childhelp National Child Abuse Hotline

It is recommended that incident(s) of serious misconduct be reported to law enforcement.
Minors should report incidents of misconduct to their parent(s) or guardian(s).

The BMS Project, Inc. | dba theBMSproject.org | ©The BMS Holdings Group LLC 2024