

*The following are organizations or resources in the community that are available to help your child and your family.*

**Twin Cities Metro Area Children’s Crisis Response Services**

Metro Children’s Response Services provides immediate help for youth experiencing a mental health crisis. Examples of mental health crises could be:

- You are a young person feeling sad, angry, overwhelmed or alone.
- Your child or family member is struggling with depression, is out of control or is at risk of hurting themselves or others.
- You work with children in a school, community or health care center and are looking for ways to calm and support youth in crisis.

Crisis outreach by licensed mental health professionals is available 24 hours a day, 7 days a week. They can talk to you by phone and/or meet you in-person at your home, school, workplace or community to assess and stabilize the immediate crisis.

Services:

- Crisis intervention, triage and counseling by phone or in-person.
- De-escalation of the situation and assessment of risk of harm to self or others.
- Development of a plan for managing the current crisis and reducing future crises.
- Short term care to help with transition to ongoing treatment.
- Consultations on children’s mental health crises to hospitals, community providers and law enforcement.

*Mental health crisis response is provided regardless of ability to pay; however it is covered by most health insurance plans.*

Call the Crisis Response provider in your community:

Anoka County 763-755-3801	Carver County 952-442-7601
Dakota County 952-891-7171	Hennepin County 612-348-2233
Ramsey County 651-266-7878	Scott County 952-442-7601
Washington County 651-777-5222	<b>In a life-threatening emergency, call 911.</b>

**Hospitals**

Regions – 651-254-3456	HCMC – 612-873-3000
Prairie Care Woodbury 651-259-9700      Edina – 952-230-9100 Chaska – 952-903-1350      Maple Grove – 763-383-5800	Fairview Riverside – 612-273-6402
University of MN Fairview – 612-273-3000	Children’s St. Paul – 651-220-6000
United – 651-241-8000	St. John’s – Maplewood – 651-232-7000
Unity – 763-236-5000	Abbott Northwestern – 612-863-4000

## Online Resources:

National Suicide Hotlines <http://suicidehotlines.com/>

National Suicide Preventions <http://www.sprc.org/>

Yellow Ribbon <http://www.yellowribbon.org/>

Department of Health & Human Services National Strategy for Suicide Prevention  
<http://mentalhealth.samhsa.gov/suicidepreventions/>

Department of Health & Human Services Center for Disease Control & Prevention  
<http://www.cdc.gov/ncipc/dvp/Suicide/>

US Department of Health & Human Services <http://family.samhsa.gov/get/suicidewarn.aspx>

## Hotline Numbers:

National Suicide Prevention: 1-800-273-TALK Available 24 hours/7 days per week

Lifeline: (1-800-273-8255) ([www.suicidepreventionslifeline.org](http://www.suicidepreventionslifeline.org))

National Hopeline Network: 1-800-SUICIDE (1-800-784-2433) Available 24 hours/7 days

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**You can always call 911 to ask for help. Tell the operator you or your child are in suicidal danger.**

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## Tips for Keeping your Child Safe

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### What do I need to know about youth suicide?

Risk factors for exhibiting suicidal behavior:

- Loss of significant other
- Social or academic problems at school
- Family or personal stress
- Substance abuse
- Depression and other mental health issues
- Previous suicide of peer or family member
- Access to weapons/means of harming self
- Questions regarding sexual orientation

Students who are having suicidal thoughts may exhibit a variety of symptom including, but not limited to:

- Significant changes in behavior, appearance, grades, eating or sleeping habits, or withdrawing from friends
- Making suicidal threats – either direct “I want to die” or indirect “Things would be better if I weren’t here”
- Appears sad or hopeless
- Reckless behavior
- Self-inflicted injuries
- Giving away prized possessions
- Saying goodbye to friends and family
- Making out a will

It is important to remember the signs and risk factors listed are generalities. Not all students who contemplate suicide will exhibit these kinds of symptoms and not all students who exhibit these behaviors are suicidal.

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### **What can I do to keep my child safe?**

- **ASK.** Talking about suicide does not make a student suicidal. Asking if someone is having suicidal thoughts gives him/her permission to talk about it. Asking sends the message that you are concerned and want to help.
- **TAKE SIGNS SERIOUSLY.** Studies have found that more than 75% of people who die by suicide showed some of the warning signs in the weeks or months prior to their death.
- **GET HELP.** If you have concerns that your child is suicidal, seek immediate help from a mental health practitioner. Suicidal students need to be evaluated by an expert in assessing risk and developing treatment plans. Parents can contact school psychologists, social workers, or counselors for a listing of resources. Parents may also want to consult with their insurance company to obtain a list of mental health providers covered by their policy. When you call to make an appointment, stat that your child is suicidal and needs to be seen as soon as possible.
- **LIMIT ACCESS TO WEAPONS, PRESCRIPTION DRUGS, MEDICATIONS AND OTHER MEANS.**
- **DO NOT LEAVE HIM OR HER ALONE.** It is important that parents surround themselves with a team of supportive friends or family members who can stop in and help as needed.
- **REASSURE YOUR CHILD THAT LIFE CAN GET BETTER.** Many suicidal people have lost all hope that life can improve. They may have difficulty problem solving even simple issues. Remind your child that no matter how bad things are, the problem can be worked out. Offer your help.
- **LISTEN WITHOUT JUDGEMENT.** Avoid making statements such as “I know what it’s like” or “I understand.” Instead make statements such as “Help me understand what life is like for you right now.”