

Youth suicide prevention during the COVID-19 pandemic

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Sixteen-year-old Spencer Smith took his own life in his bedroom after [an emotional spiral](#) his father says began when his football team could not play in the fall because of COVID.

His father documented the changes that progressed over the months from August to December, when Spencer was found dead in his room. He was an honor student, happy, the life of the party, outgoing and loving life.

However, when the much-anticipated football season was canceled, Spencer's downward spiral began. He struggled with online learning, missed the camaraderie of his team and his classmates. Slowly, not fully realizing the dark places Spencer had gone, it ended with his suicide.

Spencer's story is becoming all too common in these COVID days.

Being more vigilant than usual

Parents need to be more vigilant during these days and literally study their children.

The world of school-aged children is wrapped up in the whole experience of school. We often think of the grades and their learning, but we are seeing with renewed understanding how powerful the whole school experience is to help our children grow, connect and learn. When the known school experience stops or is reduced to a lone teacher on a screen, it often will affect the student negatively.

What do parents need to look for? Plummeting grades, lack of

concentration, increased distractibility, apathy, sadness and depression.

When our children seem less happy, less motivated, less engaged with the rest of the family, more isolated in their room, it is time to have a conversation about what is happening within the child.

Recognize most children are not experts at describing their feelings or moods. So, we patiently help them to share what is going on.

Similar to the Likert scale used in pain management, a simple chart can be made and hung on the refrigerator, a door or wall. It can ask a simple question: "Please show where you are on the scale: Very Sad—Sad—Not sad or happy—Happy." It can be filled in daily by everyone in the house as a check in.

If we are seeing our child become less happy, engaged or motivated, it may be time to visit the family doctor or pediatrician who has been the child's primary care provider. It would not be inappropriate to schedule a visit with a counselor who works with the age of children you have.

Talking about suicide

When children reach age 8 or above, it is wise to talk with them about suicide, especially if there has been a suicide at their school.

Talking about suicide does not give a child ideas. Rather, it helps provide information, build trust between the parent and child, and reassure the parent. Nothing is so troubling as when our kids go silent.

After you have a conversation with your child, process what your child said. Then, if action needs to be taken, decide if one of the above options is needed.

If your child has a phone, add the national suicide hotline to their

contacts—1-800-273-8255. It is a resource you've provided, along with your permission to use it. You might also say: "If you need to talk to someone about how you are feeling, call this number. After you do, I hope you will trust me enough to let me know you talked to someone and need more help."

Some of the ways children speak about suicide are with noncommittal phrases like: "I don't want to be here anymore," "I am tired of living like this," or "I just want to die."

Most experts who work with suicide prevention ask three key questions: "Have you thought about suicide?" "How often do you find yourself thinking of suicide?" "If you were going to kill yourself, do you have a plan?"

If a child answers "yes" to any of those questions—especially if the child says he or she is thinking more often about suicide—contacting a primary care provider or counselor is recommended.

Reducing your child's stress

Here are some positive steps that may help lessen the stress of these days.

A growing body of evidence suggests kids are less likely to get sick from COVID. A smaller group of buddies can be hosted at homes where good COVID practices are practiced.

Kids are helped by getting outside to ride bikes, exercise, walk or simply sit out in the sun when weather permits. Being outside in the sun helps us physically, emotionally and mentally.

Healthy families have a way of holding up each person in the family when spirits may be low or disappointments high. Families also can plan some special family activities, like a homemade pizza night, a game night, or

watching a special TV program the whole family enjoys.

Worshiping together—whether online or in person—can be powerful, reminding us all to anchor ourselves in the love and strength of God. A shared meal afterward can be used to process the worship and message, helping everyone find something meaningful from the experience.

It is also good to talk with other parents about how their kids are doing and things they have found to boost the spirits of their children.

We all are in this together. Almost no one will be left unaffected by these COVID days, which should encourage us to be more considerate, thoughtful and united.

Wash your hands, wear your double mask for others, mind the gap, get vaccinated when you can, and be kind.

For a post related to adults and families in general, [click here](#).

Michael Chancellor is a licensed professional counselor in Round Rock, Texas. The views expressed are those solely of the author.