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Erica Leibrandt, LCPC, Sound Mind Counseling:

SI is suicidal ideation, and that means suicidal thinking. And there's two different kinds of suicidal thinking. The first is passive and the second is active. There is a critical, critical difference between these two ideas. I'd say 99%, if not more, of human beings at some point in their lives have passive suicidal ideation. We imagine what it's like to not be alive. Not nearly so many of us have active suicidal ideation. And the difference is that in active suicidal thinking, we have a plan to die. It's specific. We think about it a lot and we sort of try on different modes of death. Would I do it with pills? Would I take a gun? And then you sort of settle on a thing and it becomes an obsession. That's active suicidal thinking. So they're very different states of mind and passive suicidal ideation, while it can lead to active, is not in itself absolutely worrisome.

I mean, it's not great, but generally people don't take their lives when they're in that state of mind. I can't think of a single example where they have. If passive medical intervention is not necessarily required, if active, it a hundred percent is. So how do we know the difference? That was your question. How do we know the difference between active and passive? And unfortunately, part of that answer is we don't always know. How can we lean towards knowing, looking for those other symptoms of depression is a great place to start. So going back to observing your child, are they sleeping more than they used to? Are they eating more or less than they used to? Are they more irritable than they used to be? Are they isolating themselves? Is there self harm? All of those things point to potentially active suicidal ideation.

For me as a mom who unfortunately I think as you know, lost her son to suicide, what I wish I had done and what I would do now differently with my own child is normalize this conversation of suicide. And I know that might be hard for some people to stomach, because some people have the idea that if we talk about suicide, it increases the chances of it happening. ***Studies show over and over again that is absolutely not the case. What does increase the chances of it happening is someone close to us taking their own lives, but not anybody talking about it.***

So I would say to my child, if I were worried about passive or active suicidal ideation,

"Hey, can I talk to you about something kind of uncomfortable for a couple minutes?"

Your kid probably won't say anything. That's fine.

Just say, ***"You know, no one really talks about suicide. And I just wonder how you feel about that. I remember being your age and having some suicidal thoughts, and I think that's pretty normal. What do you think about that?"***

See if you can get them talking. If you can't, that's okay. Just try to feel their energy when you bring it up, you get information from them, even if they're not opening their mouth. Just really pay attention. Try to keep it easy and light. Keep it short.

And if you have any sense that there is a real issue, just don't hesitate to intervene. You know, the worst thing that can happen is you take him to a therapist and it's not a good thing, and you try somebody else. At least you tried. That's my very best advice. There's no, unfortunately, hard and fast way to successfully deal with this. Stay alert, keep the door open, and don't hesitate to get treatment if you think in your best assessment that is what is required.