



Understanding Outpatient Treatment

You have taken your child to a mental health provider for a suicide risk assessment and they have determined that your child can remain in outpatient treatment. This provider may be able to offer treatment to your child or they may refer you to another provider or mental health agency.

Wherever you take your child for treatment, remember you are in the role as consumer of mental health services. Just as you would investigate any product or service you wanted to buy, don't be afraid to ask questions to make sure you'll be getting the services your child needs. While it may take some time to interview prospective clinicians, you want to be comfortable that whomever you choose to build a productive helping relationship with your child.

Consider asking the following questions:

- What is your experience in treating children who are at risk for suicide
- What is your treatment approach? Is it based on research?
- How long should we expect treatment to last
- Do you involve the family in the therapy? How?
- If you felt my child needed medication, on what would you base that observation?
- If my child needs an advocate for school accommodations, will you do that?
- Do you have a way to address privacy issues in your waiting room so my child will not unexpectedly interact with his peers?
- Do you use safety planning with your clients? If not, why not?

The last question about a safety plan refers to a plan of instructions that your child writes to help identify specific strategies for responding to suicidal thoughts or feelings. This is currently one of the most widely used tools for people of all ages who are struggling with suicide and has proven to be an effective component of any therapeutic plan.

There is one other thing about mental health treatment that is important to understand. It doesn't work overnight. As one parent explained to her suicidal son, "It isn't like a car wash. You don't go in one door and come out another, feeling better immediately. It takes time." Patience may seem impossible when you're concerned for your child's safety and many parents end treatment prematurely because they don't sense any changes.

It helps if you stay in communication with your child's clinician to get updates on even small accomplishments. Remember, these problems didn't start overnight and your child needs some time to get their life back in perspective.