

The Holiday Season can be a trigger for a child who has suffered past traumas prior to adoption or current placement.

How to Assist Your Child in a Crisis

Introduction

Children and teens often struggle with difficult challenges growing up in the 21st century. Sometimes, these challenges appear too great, and a child or teen may struggle with wishes to hurt oneself or others. For children who had early loss and trauma, there is more likelihood of having periodic crises. When these occur, it is important that the child or teen's parents are able to assist the child to cope with the crisis. Here's how:

Crisis

In the Chinese language, crisis means opportunity. Although having a child in crisis, is stressful, it is important for the parent(s) to be as calm as possible in order to be able to attend to the child/teen's needs.

There are some behaviors that clearly indicate a crisis:

- q Thoughts of hurting self or others
- q A plan to hurt self or others
- q Attempt to hurt self or others
- q Hearing or seeing things that others do not hear or see
- q Believing someone is trying to hurt them when this is not *presently* occurring

What Can I Do?

If your child is attempting to hurt him/herself or someone else, a call to 911 is indicated. The police will ensure that the child is taken to the local emergency room to be screened for psychiatric hospitalization.

If your child is talking about hurting him/herself or others, and can safely be transported by you, he/she can be brought to your local emergency room for an assessment. If you are a current client of CFFC, feel free to contact the CFFC on-call clinician at for any verbal assistance, but a psychiatric assessment is essential at this juncture and a call to us can wait.

What Can I Expect at the Emergency Room?

While waiting with your child for an assessment, be prepared for a long wait. Initially it is important to tell the triage person why the child is there and what your concerns are.

When the hospital clinician interviews you and your child, please again state your concerns and any questions you may have. The most important point to remember is that your child must receive the services that are needed. This means that it is vital to decide in your conversation with the hospital clinician whether you believe your child is **safe** to return home. After all, if you agree to take your child directly home from the emergency room, you assume the responsibility for your child's safety.

The possible outcomes to a psychiatric emergency room visit are as follows:

- Your child is found to need a psychiatric hospitalization. If this occurs, it is the hospital's responsibility to keep your child in their hospital until a bed can be found. Finding a bed in a child/adolescent facility is sometimes very difficult. You may hear they have no facilities to house your child until a bed can be found. However, your advocacy in insisting that your child remain in their facility is important to maintain safety. Sometimes hospitals can admit a child awaiting hospitalization to their pediatric unit.
- Your child may be assessed to need an Acute Residential Treatment facility (ART). This means that the hospital clinician believes your child is not safe to return home, but does not meet criteria for hospital level care. Again, there may be a wait for an ART bed. The hospital may ask that you take your child home while waiting for a bed. If you do not feel comfortable with this plan and that your child will be safe, please tell the hospital. If you decide to take your child home while awaiting an ART placement, the hospital may have a crisis stabilization team that can go to your home to assist you there.
- If you and the emergency room clinician believe it is safe for your child to return home, it may be helpful to set up a plan to bring your child to the see or speak with the hospital clinician the next day to "check-in" as to how your child is doing. Some hospitals have Family Stabilization Teams that can be sent to your home to provide additional support. Contact the child's regular therapist and inform him/her and keep them involved as a team member in the care of the child.

Conclusion

Coping with a crisis concerning one's child is never easy.

It is important as a parent that you get the supports you need to aid your child through any crises that may occur. It is also vital to remember that the mental health system is fraught with difficulties such as insurance problems, bed availability, etc. As parent, you are the best advocate for your child. If you do not believe you and your child are getting the services needed, please speak up and ask for a supervisor or manager. You and your child deserve it!

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