Discussing Tough Topics at Home – *How to Have Hard Conversations with your Child using Compassionate and Authoritative Parenting*

1. It is okay to have difficult feelings yourself when you've just learned your child is struggling in some way. You may feel blindsided, scared, or even angry. The most important thing with these adult emotions is to validate them with another adult - perhaps your spouse, a friend, or even your child's therapist - and do **not prioritize your emotions with the child**.
2. It is important to discuss any matters related to safety with your child **directly**. Some parents fear upsetting their child further or are afraid of causing them undue harm. All the research we have supports that being *direct, but compassionate* with your child is the best way to ensure they're safe. If we don't talk to children directly, it can prevent them from getting the appropriate care they need.
3. If your child has engaged in any self-harming behaviors, **it is important to not punish them**. This is a response that children have to emotions or experiences that they are struggling to process. It is not an act of defiance. They need support from parents and caregivers more than ever, with a patient and *active* listening ear.
4. If your child has engaged in recent self-harming behaviors and they need medical attention or they cannot commit to safety, they need to be taken immediately to the emergency department. We recommend that you take them to the general emergency entrance at the University of Michigan. You let them know you were sent from your child's psychotherapist and you can provide them with contact information to contact the therapist to take the burden of communicating off of you.
5. If your child is safe, but they have evidence of self-harm or they have spoken directly about their urges or action regarding self-harm, **it is important to reinforce** that you are there for them *no matter what and want to know* what they're feeling.
6. Additionally, if the child engages in self-harm with any items they still have access to (e.g sharp objects, medication, etc.) **you ought to remove those items** from the home altogether or keep them hidden or out of sight from the child. This does not have to be done in secret. You may explain briefly that you're removing these items for their safety and not as a punishment.
7. Once you've communicated with your child, heard their feelings, validated their experience, removed any necessary items from their space, and checked in with their therapist ***you have done an amazing job at keeping them safe!***
8. Follow up recommendations include:
    a. Continue to coordinate care and learn more resources from your child's psychotherapist
    b. Keep risk items out of contact with your child until it is safe to bring them back out in the open
    c. Continue regular psychotherapy for your child so they can continue to build on their coping skills and discontinue self-harm behaviors as a means to cope
    d. If they seem off or unsafe, ask them directly "Are you feeling safe?" to keep communication open and let them know you care.