



Broadcast Transcript

Broadcast: Crisis Point: Youth Suicide— Addressing our Kids' Mental Well-Being – Part 2

Guest(s): Jennifer Cisney-Ellers

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Dr. James Dobson: Well, hello everyone. I'm James Dobson, and you're listening to Family Talk, a listener supported ministry. In fact, thank you so much for being part of that support for James Dobson Family Institute.

Roger Marsh: Well, welcome back to Family Talk. I'm Roger Marsh. Today on the broadcast, we are bringing you the second half of Dr. Tim Clinton's recent conversation with Jennifer Ellers, the topic, youth suicide and kids in crisis. Jennifer Ellers is a professional counselor, life coach, crisis response trainer, author and speaker. She serves as director of the grief, crisis and disaster network of the American Association of Christian Counselors. Jennifer is the co-author of the book, *The First 48 Hours: Spiritual Caregivers as First Responders*, and *Spiritual and Psychological First Aid*, both of which she wrote with her husband, Dr. Kevin Ellers.

Today, Dr. Tim Clinton and Jennifer Ellers will talk more about some of the unique pressures that youth in America face today. They'll also revisit some of the warning signs of mental and emotional distress in kids. And finally, they'll discuss some of the myths around suicide. Let's listen in now to Dr. Tim Clinton's conversation with Jennifer Ellers on today's edition of Family Talk.

Dr. Tim Clinton: Jennifer, when kids get into trouble, they begin to medicate. You know that when your life isn't the way it's supposed to be, you begin to reach for something else to calm or soothe the brokenness in your heart. I think a lot of kids get lost and they drift into that reach. Maybe it's alcohol. They start with parties. They just want to see what it's like. Next thing you know, they're drinking heavily and they're out of control. They start with substance abuse, or they're reaching and just smoking joint. They're just going to try something. Or the opioid crisis that we're seeing, and these kids getting caught up in heroin and everything else. Jennifer, it's unbelievable what's happening.

Jennifer Cisney-Ellers: It's a huge problem, Tim, and there are two reasons why I'm really concerned about drug and alcohol use and abuse among our youth. First of all, we know that they're not legal age. They're not supposed to be drinking. But are they? They are, so many, even in middle school and elementary school, there are percentages of young people that are drinking alcohol. Then in terms of drug use, that's something I have to stay on top of because every time I'm out doing

a class, there's a new drug issue. For a while, it was vaping. That was everywhere. And then we started seeing our kids being hospitalized, having serious health concerns. The opioid crisis, like you said, I'm hearing that the fentanyl use among our youth is just out of control, so there are so many dangers.

Dr. Tim Clinton: And kids who, by the way, let's just say this, they're not bad kids. Next thing you know, they're out there, they're going to try something because everybody's saying it's fun. Everybody's doing it. And you got some star quarterback who goes out and does something, next thing you know, he's dead.

Jennifer Cisney-Ellers: And the two bigger concerns, even like you said, it can be fatal to young people. We don't know how their bodies are going to react. But number two, we know that their brains aren't fully developed yet. And what we're learning from science is that addiction, just like any kind of learning, is so much higher for young people. If you start even smoking, drinking alcohol, using any kind of drugs when your brain is still developing, when you still have that neuroplasticity, the addiction locks in quicker and stronger. It can be so hard for a person to overcome an addiction that they started when they were a teenager, much more difficult than one that happens and forms as an adult.

The other thing is they already don't have good judgment, that impulse control. And what do these drugs and alcohol do? Further damages our impulse control and our judgment. And so these are really dangerous for our young people, and we see a high correlation between alcohol and drug use and suicidal behaviors.

Dr. Tim Clinton: So the picture looks like this. Something happens, I may be struggling with some issues. Maybe my personality and temperament push me in a direction. I get lost in the spin. I begin to reach for and find something to calm the insanity or the emptiness that I'm feeling, and I want to be loved. I want to be liked. I want to fit in. I want to get through this breakup. Then the reach becomes not only: Am I abusing it? I become maybe dependent on it, thinking it's the only thing that really brings me any joy or calms me down, and I become addicted to it. And nobody knows about it. It's just me and my buddies, my friends. And we're just trying to figure out how to do life. And Jennifer, we get lost.

Jennifer Cisney-Ellers: Yeah.

Dr. Tim Clinton: As adults, we get lost.

Jennifer Cisney-Ellers: And tragically, sometimes that alcohol, that substance, can cause our young people to make fatal decisions, decisions that end their life.

Dr. Tim Clinton: Jennifer, it's crazy because they begin at that age to turn to their friends for help, to figure out life. And they're turning away from mom and dad. And mom and dad get frustrated because they're angry, and doors are being slammed and shut. And yelling is taking place, and then we withdraw and we don't talk, and

that only perpetuates it even more. That's the cycle that you begin to see in these families. And it could be good families. And everybody's frustrated. Everybody's screaming, but nobody can hear.

Jennifer Cisney-Ellers: It's a real problem. And Tim, what we're not doing also that we really need to be doing is helping kids understand how to soothe and comfort their own emotional pain without drugs and alcohol. I think one of the big challenges is that they also see how adults deal with disappointment and sadness, and if they don't have something really healthy modeled for them, they don't know how I deal with disappointment, sadness and loss.

Dr. Tim Clinton: Jennifer, we have talked a little bit about what some would call our risk factors. We mentioned bullying, depression and anxiety. By the way, anxiety is off the charts right now. Jennifer, you talked a little bit about sexual violence and sexuality.

Jennifer Cisney-Ellers: Yes.

Dr. Tim Clinton: It does play in here. Hormones have kicked in. Kids often make some bad decisions through those teen years with consequences and more. Talk to us about the significance of that playing into how they lose home and perspective.

Jennifer Cisney-Ellers: Well, Tim, the numbers are a bit staggering when we look at the number of people who experience childhood sexual abuse, and then sexual violence. And our young women especially, but it's happening to our young boys as well. But that age group, especially starting into the teen and young adult years, 18 to 24, are far more likely, four times more likely to have a rape, sexual assault, some form of sexual violence in that window of time. And that devastates someone's self-esteem, high rates of depression. A large percentage of people who've experienced either childhood sexual abuse or a rape, sexual assault, some form of sexual violence, are going to get depressed and suicidal.

Dr. Tim Clinton: Jennifer, they usually swallow that pain and keep it as a secret. They don't even talk to anybody about it.

Jennifer Cisney-Ellers: They don't talk about it. Tim, the shame is so heavy with that. And most young women blame themselves. It's my fault. They internalize, especially and the younger you are, we see childhood sexual abuse as being really rampant between ages seven and 13. And so what you're talking about, and my fear, and I don't know that this is the case, I'm also afraid that with young people isolated and locked up, if there is a perpetrator in the family or in the home, that abuse is going to increase. And so that may be happening as well. And so we're talking about the sense of shame and discouragement and the depression that comes with that. We see it as a huge risk factor for suicide as well.

Dr. Tim Clinton: And what they're being bombarded with online.

Jennifer Cisney-Ellers: Yes.

Dr. Tim Clinton: The sexual content, the pornography, everything's off the charts. It usually creates massive confusion with our kids. They're all over the map.

Jennifer Cisney-Ellers: It is one of the most confusing times to be trying to come into your adolescence with sexual development. It's so confusing right now. That's always a tumultuous time, like you said, with the hormones starting to flood in, and trying to figure out who I am.

Dr. Tim Clinton: And wanting to be loved, or maybe looking for the love of their father, in the arms of someone else, and willing to do whatever, whenever, just to feel valued.

Jennifer Cisney-Ellers: It's just such a difficult and confusing time. And a lot of that can lead to feelings of hopelessness and depression. And if there has been violence, or there's even confusion of any kind, it just fuels that already difficult time that our young people are in.

Dr. Tim Clinton: There's no doubt in my mind, Jennifer. Many are listening right now. They've turned this up, and they're struggling in their own hearts because they see a behavior change. They've heard the conversations, "I think the world would be better off without me, I hate my life." They've heard their son or daughter say, "I want to kill myself," and we think it's tongue in cheek. But Jennifer, we talked about some of the signs and those indicators, those are real. And they're important to address. Some of the myths around suicide, Jennifer, you're an expert in this, help us as mom and dad with our families and the kids that we may have influence with.

Jennifer Cisney-Ellers: A lot of people think that young people will talk about it, they'll never really do it, that it's just a cry for help or a cry for attention. The truth is take every sign, risk factor, very seriously.

Dr. Tim Clinton: Number two killer among our kids right now, number two killer.

Jennifer Cisney-Ellers: It's the second leading cause of death among that age group. And even when you're talking about I think 13 year olds now, I just read that it may be the number one cause of death in 13 year olds. But we're talking about it's a very, very serious risk. It's a very serious risk to the life of your young person. And if you don't take that seriously, you'll be one of those parents that the most tragic situations, Tim, I ever walk into are the parents that will look at me and say, "I had no idea. I didn't see it coming," and it really blindsides them. That is the other thing that I want to mention. We've talked a lot about risk factors, and you do see these and more. But the scary thing is sometimes kids cover it. I have worked with families where they've said, "My daughter was popular, a cheerleader, straight As. I had no idea she was struggling."

The other thing I want to make clear to parents, it's one of the things that I think they're least aware of, is that they think the kid has to be struggling for weeks, months, maybe even years. I have seen multiple cases where a happy, well-adjusted teenager can have a crisis, and that same day or within 24 hours, attempt to take their own life because their frontal lobe doesn't give them the impulse control that we have.

Dr. Tim Clinton: That's sad. Isn't it?

Jennifer Cisney-Ellers: That part of their brain is not fully developed until between 24 and 26, so a teenager is going to go, "This happened. I'm ending it right now." We have I think it's in the 30% neighborhood of kids who attempted suicide had a crisis within the previous 24 hours, a crisis meaning a breakup, a crisis meaning a terrible bad grade, or a fight with somebody.

Dr. Tim Clinton: Didn't make a team, got kicked off a team, something.

Jennifer Cisney-Ellers: Exactly.

Dr. Tim Clinton: Get kicked off the cheerleading squad.

Jennifer Cisney-Ellers: Exactly.

Dr. Tim Clinton: Made fun of or, quote, "made a mistake" and somebody posted something on social media and it destroyed my reputation.

Jennifer Cisney-Ellers: Yes, exactly.

Dr. Tim Clinton: I hate myself.

Jennifer Cisney-Ellers: Those are the kind of things that parents would go, "Oh, come on. You're going to get over it. That's just a blip. Five years from now, you won't even remember this." But that's the way we're thinking like an adult. We're not thinking like a young person that says, "Now my life's not worth living."

Dr. Tim Clinton: And then all these signs, and these cries for help, Jennifer, they need to be heard.

Jennifer Cisney-Ellers: They do.

Dr. Tim Clinton: Jennifer, one of the biggest myths around suicide is this, that if you talk about suicide, someone you love will commit suicide.

Jennifer Cisney-Ellers: It is the biggest myth, Tim. We think we're going to put the idea in their mind, and that is simply not true. Research is very clear that what saves lives is talking about suicide. Talking about it is the thing that gives most people the opportunity to say, "I know you're hurting, and it's okay to talk to me about it."

We need to do more in terms of engaging in those conversations in our schools, in our churches, definitely in our families, because if you don't talk about it, then you never really know what's going on. Now some parents don't know how to open the dialogue, and there are some great tools.

Dr. Tim Clinton: Well, they're afraid too. They're scared.

Jennifer Cisney-Ellers: They're afraid.

Dr. Tim Clinton: Petrified.

Jennifer Cisney-Ellers: The number one reason why people of all ages don't ask the question, because in my trainings, I ask everybody I teach. You have to ask the question, "Are you thinking about suicide? Have you thought about hurting yourself or killing yourself?" People are afraid to ask the question because they're afraid the answer will be-

Dr. Tim Clinton: Yes.

Jennifer Cisney-Ellers: Yes, or maybe, or sometimes. But it's better that you ask. And then there are resources because once you've engaged that person, then they want to talk about it. If somebody says yes, or maybe, or sometimes, or I'm hurting, you just allowed them to open their heart to you, and that's the first step in healing.

Dr. Tim Clinton: Jennifer, you have been engaged with a training program to help people recognize the signs and respond to suicidal situations.

Jennifer Cisney-Ellers: Yes.

Dr. Tim Clinton: You call it the three "R" approach.

Jennifer Cisney-Ellers: Right.

Dr. Tim Clinton: And it's all based on hope. Can you teach us real quick? Because everybody listening is saying, "Hey, listen, I need to hear this."

Jennifer Cisney-Ellers: Yes.

Dr. Tim Clinton: Because the next time I see a situation, or I come across it, or I'm worried about it, I want to know what to say when I don't know what to say, and I want to know what to do when I don't know what to do. Teach us.

Jennifer Cisney-Ellers: The first "R," Tim, is recognize. In addition to the things that you and I have been talking about, recognize those warning signs, recognize the risk factors, we go much more in depth. Let's talk about all the risk factors. What are the dangers? And how do I recognize those signs? Then we talk about responding when somebody does throw out, "I just don't want to be alive anymore."

Dr. Tim Clinton: Having the conversation.

Jennifer Cisney-Ellers: Having the conversation. How do you respond to them?

Dr. Tim Clinton: Nice.

Jennifer Cisney-Ellers: How do you ask that question? Then what do you say back, and what not to say? Because what I've found is a lot of parents instinctually say the wrong thing. They say, "Don't be silly. You won't commit suicide. You won't do it. You don't throw your life away over that boy or that girl."

Dr. Tim Clinton: What do you have to be depressed about?

Jennifer Cisney-Ellers: Exactly. We diminish their pain. And those remarks, rather than saying, "Tell me about it. I want to know about your pain," say, "You don't have a right to your pain." And we're shutting them down. But I understand that parents instinct is to say those remarks that sound dismissive, but what your child hears is, "I don't care about your hurt. I don't care about your pain."

Dr. Tim Clinton: They're stuck in this tape that's playing in their mind, Jennifer, it's negativity, they're lost in it. One of the big words is rumination. They can't turn it off, and they need someone to help them.

Jennifer Cisney-Ellers: Absolutely. So what we do teach you to do is respond well, respond with a, "Tell me more about that. That sounds really hard."

Dr. Tim Clinton: And you don't have to be perfect.

Jennifer Cisney-Ellers: No. You don't have to be perfect. Hey, I'm not perfect and I've trained for years to do this. Sometimes I say the wrong thing. But I know how to engage with people to say, "Tell me more because I really want to know what's causing you to hurt like this. And I want to help." And we say things like, "I'm going to help you. We'll do this together. And I'm going to make sure that I am there for you in whatever way I can be." So we want to engage with them and give them the kind of support, now that may mean they need counseling. You may need to go beyond what you can do in that relationship.

Dr. Tim Clinton: Which is your third "R."

Jennifer Cisney-Ellers: Yeah.

Dr. Tim Clinton: Referral.

Jennifer Cisney-Ellers: And that's referral.

Dr. Tim Clinton: Get them.

Jennifer Cisney-Ellers: That's the third "R," and that is you need resources for our young people. I mentioned an epidemic of untreated anxiety and depression. There are wonderful counselors out there ready to help young people with depression, anxiety, PTSD, to heal from sexual abuse or sexual violence, to help with their struggles, with relationships, but you have to get them there. They don't know how to do that by themselves. You can give them incredible resources and connect them with people who can help them. But they need your help to do that. They need adults who can come alongside them, validate their pain, and they say, "Let's get some help so you don't have to feel this way long-term."

Dr. Tim Clinton: Jennifer, this is a difficult subject. Again, I think there are many listening, they're worried. And some would think, "Boy, if my kid's struggling, it must mean I'm a bad parent."

Jennifer Cisney-Ellers: Not at all.

Dr. Tim Clinton: And Jennifer, close us out with a word to mom or dad right now, coach, teacher, youth pastor. I'm just thinking someone who is speaking to the life of a teen. And Jennifer, speak to him or her.

Jennifer Cisney-Ellers: You know what, I have heard so many young people say, after they've gotten help down the road, "Gosh, my parents were the best parents and I took them for granted. They loved me, but I didn't open up. I didn't tell them." And so know that the best parents in the world may still have young people who are struggling because they live in a fallen world.

Dr. Tim Clinton: There's so many reasons that could contribute to it. It may have nothing to do with you as mom or dad.

Jennifer Cisney-Ellers: May have nothing to do.

Dr. Tim Clinton: Their world's just blown up around them and they don't know how to manage that chaos, the insanity, and the flood of emotion and probably a lot of stuff going on physically and everything, all at one time.

Jennifer Cisney-Ellers: We're all living in a very difficult world, and our young people aren't as equipped to handle that, and so they do need our help. But also, parents don't have a textbook for the times we're going through either. Tim, you and I grew up in a very different world. And so, I know with our girls, I have three step-daughters, it really was challenging for me to know the world they lived in. And so I have had to work to enter their world. So trying to be a good parent today is hard, let me just validate that for you. It is challenging. It is scary.

Dr. Tim Clinton: Dr. Dobson has always said, "Parenting isn't for cowards." You know that?

Jennifer Cisney-Ellers: It isn't.

Dr. Tim Clinton: It's just a rough journey.

Jennifer Cisney-Ellers: It is the toughest job.

Dr. Tim Clinton: But it's beautiful because when you're there and you get to speak into the life of your son or daughter, it's a moment.

Jennifer Cisney-Ellers: And the reward is getting them through this time. You will. You may feel like you never will, but you will. And you'll see them come out on the other side as this incredible human being. But you know what, we struggle. And our Heavenly Father knows that all of us have had our moments of wrestling and struggling and difficulty. But it's those very struggles that cultivate and build character. So just remember that the struggles will be redeemed because they give us a richer, more powerful experience spiritually. That's how we grow in our faith. That's how we connect and have real relationships with our kids, through the struggles that we share with them and that they share with us, and the times we walk through together.

Dr. Tim Clinton: Before we close this program, I wanted to remind you, our listeners, our Family Talk family, that suicide is preventable. Suicidal thoughts can affect anyone, male, female, regardless of age or background. We know that. If you or someone you know is in a crisis right now, experiencing difficult or suicidal thoughts, hear me on this. Have them or please call the National Suicide Lifeline at 1-800-273-8255. That number again, 1-800-273-8255. You can also text for help at 741-741. Or you can go online, suicidepreventionlifeline.org, suicidepreventionlifeline.org. The National Suicide Prevention Lifeline is a national network of crisis centers that provide free and confidential emotional support to people in suicidal crisis or emotional distress, 24 hours a day, seven days a week. There is help. There is hope. And finally, to find a Christian counselor. You can go online to www.connect.aacc.net. www.connect.aacc.net.

Jennifer Cisney-Ellers: Tim, it's critical that people get help in the midst of a suicide crisis, and that's why these lifelines are here. We also understand that young people don't pick up the phone and call. They may chat or they may text, and so that's why those resources are developed. But whatever you do, reach out, get help. Don't do this alone.

Dr. Tim Clinton: Sometimes it's the first step of admitting you or someone in your family needs help, and reaching out is the hardest part, but it's the most important thing you can do. And there is someone who will listen to you. And remember this, no matter what, God loves you. He cares for you more than you know, and he has a plan for you. Sometimes your mess can become your message.

Jennifer Cisney-Ellers: Remember, talking to someone on the suicide hotline is confidential. They're not going to judge. They're there to listen and support.

Dr. Tim Clinton: Jennifer, we sure are grateful here at Family Talk for you taking time out to come and to talk about a tough subject like this. I know it's not easy, but your heart, your passion, it shows. And I'm so grateful we did this. I know on behalf of Dr. Dobson, his wife, Shirley, their family, the entire Family Talk team, we tip our hat to you and pray that God continues to lead you out on those front lines, in those moments of crisis and trauma in life. Thank you for joining us.

Jennifer Cisney-Ellers: You're very welcome, Tim. Thank you.

Roger Marsh: Suicide really is a difficult topic to address. A person who tries to take their own life is in so much pain and despair, but it's truly important to talk about these things with our kids. Like Jennifer Ellers said today here on Family Talk, talking about suicide and self-harm doesn't cause self-destructive behavior. In fact, it actually gives teens space to voice their struggles and shows them that they have a place to turn when they feel overwhelmed. When it comes to addressing mental wellbeing, I believe the three "R" approach that Dr. Clinton and Jennifer Ellers discussed is worth listing again.

First, recognize warning signs and risk factors in a teen or young adult. Secondly, respond with love and understanding, and ask more questions when appropriate. And then three, refer. Provide the child with the resources they need and connect them with the people who can help them, including a licensed counselor. Recognize, respond, refer. Now to find a Christian counselor in your area, visit the American Association of Christian Counselors Care Directory at connect.aacc.net. That's connect.aacc.net.

Well, we hope this broadcast has been a benefit to you and your family. To learn more about Jennifer Ellers, her books, or crisis response training, visit our broadcast page at drjamesdobson.org/broadcast. While you're there, you can listen to any part of this two part broadcast that you might've missed. We've entitled it "Crisis Point: Youth Suicide - Addressing Our Kids' Mental Well-Being." Again, our ministry web address is drjamesdobson.org/broadcast. Thanks so much for joining us for this edition of Family Talk. And for everyone here at the Dr. James Dobson Family Institute, I'm Roger Marsh. Hope you have a great weekend.

Announcer: This has been a presentation of the Dr. James Dobson Family Institute.

Dr. James Dobson: Hello everyone. Do you need help dealing with the everyday tasks of raising a family? I'm James Dobson here, and if you do, I hope you'll tune into our next edition of Family Talk. Our main purpose in this ministry is to put tools into your hands what will strengthen your marriage and help you raise your kids. Hope to see you right here next time for another edition of Family Talk.