Hope > Pain: What Does It Mean to Prevent Suicide?

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www.DirectingChange.org

School Based Suicide Prevention: An Overview

Stan Collins
Co-founder, Directing Change

Directing Change
Program and Film Contest
“Suicide prevention and intervention require constant vigilance.”

Hayes Lewis, co-creator of Zuni Life Skills
The Case for Policies and Procedures

- Maintaining a safe and secure school environment is part of school’s mission
- Promote the behavioral health of students, which enhances their academic performance
- Impact of suicide on other students and school community
- Avoid liability related to suicides or suicide attempts by students
Create a policy that provides the foundation for suicide prevention, intervention, and postvention in your district.

- Protocols for helping students at risk
- Staff education and training
- Parent education and training
- Student education and engagement

A strong suicide prevention policy

- Prevention
- Intervention
- Postvention
This presentation is based in part on information found in:

- **After a Suicide: A Toolkit for Schools** (SPRC, AFSP)
  - [http://www.sprc.org/sites/default/files/resource-program/AfteraSuicideToolkitforSchools.pdf](http://www.sprc.org/sites/default/files/resource-program/AfteraSuicideToolkitforSchools.pdf)

- **Suicide in Schools: A Practitioner’s Guide to Multi-level Prevention, Assessment, Intervention, Postvention** (Erbacher, Singer, Poland)

- **Preventing Suicide: A Toolkit for High Schools** (SAMHSA, Ch. 3)
  - [https://store.samhsa.gov/product/Preventing-Suicide-A-Toolkit-for-High-Schools/SMA12-4669](https://store.samhsa.gov/product/Preventing-Suicide-A-Toolkit-for-High-Schools/SMA12-4669)

- **The K12 Toolkit for Mental Health Promotion and Suicide Prevention** (HEARD Alliance)
Practical Suggestions:
Responding to Suicide Deaths
• Reorganize seating chart
  – Theater style to circle, don’t just move students to new seats
• Counselor to “shadow” deceased’s schedule
  – Multiple days
  – Entire class period (not just “check-ins”)
• Protocols should be connected to position, not person
  – Identify “back up” or secondary roles in case of staff absence
• Cultural considerations for family
Practical Suggestions

• Use consistent resources in all communications
  – Identify 2-3 key resources, don’t overwhelm
• Use substitute teachers in support roles
  – Consider offering teachers who had the deceased student in their class an opportunity to co-facilitate with a colleague (back-fill other spot)
• Stagger debrief meetings at different times to make them accessible to all staff
  – Not all staff will be available for same meeting, depending on roles (Consider how to engage support staff, for example, security, food services, others)
Practical Suggestions

• Create script for administrative support staff
• Remove student from attendance system
  – Consider mailings (test scores, automated mailings)
• Secure all student files
  – Administration to safely secure
Postvention:
Responding to Suicide Deaths
What is Postvention?

Postvention refers to programs and interventions for survivors following a death by suicide.

Postvention Considerations:
• **Timing** is CRITICAL
• Plans are best followed when created **BEFORE** a suicide occurs
Why Postvention in Schools?

- Schools are often unsure about how to respond after a suicide and there has been debate as to best practice response.
- Certain practices may put some students at greater risk.
- An effective response can reduce the risk of suicide contagion and restore a safe, healthy learning environment.
Grief and Surviving Suicide Loss

- Shame, blame, guilt
- Anger, abandonment
- Shock and disbelief – or relief
- Fear of losing others
- Increased risk themselves (contagion)
Goals of Suicide Postvention

• Assist survivors in the grief process
• Identify and refer individuals who may be at risk following the suicide
• Provide accurate information while minimizing the risk of suicide contagion
• Implement or advance ongoing prevention efforts
Elements of a Postvention Plan

- Support for Survivors
  - Annual review to learn and improve
  - Prevention messaging and education
- Reduce trauma
- Timely & accurate information
- Appropriate responses
## Postvention Checklist

### Notify key individuals

<table>
<thead>
<tr>
<th>Steps to Take in Immediate Aftermath</th>
<th>Staff Responsible</th>
<th>External Contacts (Phone Numbers)</th>
<th>Tools</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Verify death</td>
<td>Lead:</td>
<td>Police:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Backup:</td>
<td>Medical examiner:</td>
<td></td>
</tr>
<tr>
<td>2. Ensure that staff know how to respond to inquiries and manage the campus for safety</td>
<td>Lead:</td>
<td>Tool 3.1: Sample Script for Office Staff</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Backup:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Notify superintendent’s office</td>
<td>Lead:</td>
<td>Superintendent:</td>
<td></td>
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<tr>
<td></td>
<td>Backup:</td>
<td>Superintendent:</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>Backup/weekends:</td>
<td></td>
</tr>
<tr>
<td>4. Notify district crisis team*</td>
<td>Lead:</td>
<td>District crisis team:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Backup:</td>
<td>Weekend/vacation/late night contacts:</td>
<td></td>
</tr>
<tr>
<td>5. Notify schools attended by family members of the deceased</td>
<td>Lead:</td>
<td>Other schools in district:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Backup:</td>
<td></td>
<td></td>
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<tr>
<td>6. Contact and coordinate with external mental health professionals</td>
<td>Lead:</td>
<td>Community mental health providers:</td>
<td></td>
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<tr>
<td></td>
<td>Backup:</td>
<td>External crisis response professionals:</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Tool 3.2: Sources of Postvention Consultation</td>
<td></td>
</tr>
<tr>
<td>7. Reach out to and work with the family of the deceased</td>
<td>Lead:</td>
<td>Tool 3.3: Guidelines for Working with the Family</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Backup:</td>
<td></td>
<td></td>
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</tbody>
</table>

*In tribal communities, Bureau of Indian Education schools notify the main office and tribal schools notify the principal.

### Notify school community

1. Notify all faculty and staff
2. Coordinate notifying students about the deaths
3. Notify families of students about the death and the school’s response

### Support students and staff

11. Provide staff with guidance in talking to students
12. Provide support to staff
13. Identify, monitor, and support students who may be at risk
14. Implement steps to help students with emotional regulation
15. Participate in and/or advise on appropriate memorialization in the immediate aftermath

### Minimize risk of contagion through the media

16. Work with press/media
17. Monitor social media

### Source: Preventing Suicide, 2012
Guidelines for staff include:

• Replacing rumors with facts and honoring the family’s request for privacy
• Encouraging the ventilation of feelings
• Stressing the normality of grief and wide array of stress reactions children demonstrate
• Discouraging attempts to romanticize the suicide
• Identifying students at risk for an imitative response
• Knowing how to make the appropriate referrals
• NOTE: Consider how to reach ALL staff (including support staff)
Identify Those Significantly Affected by the Suicide

- Inquire with family of deceased student for connections
- Discuss during all-staff meeting
  - Identify all school connections (teams, clubs, activities)
  - Whether deceased student is new to the school or well-connected (been in same district since childhood)
- Allow for students with no direct connection to be affected. We may not be aware of all social networks or past friendships.
Long-term suicide postvention response:

- Anniversaries and birthdays
  - Identify two staff members to be responsible for noting key dates in future

- Graduation and yearbooks
  - Define a consistent policy for how all students’ deaths are dealt with in yearbooks and graduation ceremonies

- Siblings
  - Provide ongoing supports to siblings who either attend or will be attending school
• Designate a **Social Media Manager** to assist the Public Information Officer

• Identify **which platforms** students at the school use most

• **Use students** as “cultural brokers” to help faculty and staff understand their use of social media

• **Train students in gatekeeper role**, and specifically identify what suicide risk looks like when communicated via social media
Use and promote the reporting mechanisms for concerns about someone (all outlets have process)
On-Campus Memorials

• Strive to *treat all student deaths the same way*
• *Prohibiting all memorials is problematic*
• Memorials should be in places that can be avoided
• Spontaneous memorials should be left in place until after the funeral – then consider giving to the family
• Meet with students and be creative and compassionate
• Develop living memorials, such as student assistance programs, that address risk factors in local youth
Sample Letters

• **Option 1**: Death has been ruled a suicide
• **Option 2**: Cause is unconfirmed (ask that rumors not be spread)
• **Option 3**: Family has requested cause of death not be disclosed
  • Addressing rumors of suicide
  • Since the subject of suicide has been raised…it’s complex but mental illnesses such as depression are usually the cause

For samples and templates, review “After a Suicide: A Toolkit for Schools”
http://www.sprc.org/sites/default/files/resource-program/AfteraSuicideToolkitforSchools.pdf
Staff Debrief

• Volunteer ongoing staff debriefing, including updates
• Talk openly with care and concern
• Be comfortable with subject matter
• Provide direct, non-judgmental discussion
• Avoid oversimplifying the cause

• Provide opportunity to debrief with crisis responders
• Create a debrief space where responders can openly discuss what worked and what needs to be improved upon in response
• Discuss school community impact
• Discuss ongoing messaging
Gather Information

• What does suicide look like in your community?
• What currently happens after a suicide death? (What does NOT happen?)
• What formal procedures are already in place?
• What do survivors typically experience?
What Can Be Done to Prevent Suicide?

- Know the warning signs
- Ask directly about suicide
- Make a safety plan and reduce access to lethal means
- Connect to mental health professional trained in suicide prevention treatments
- Create systems to respond to suicide risk in least restrictive (least traumatizing) way
Comprehensive Suicide Prevention
Percentage of students who have considered suicide 2017–2019 (in previous 12 months)

- **Grade 7**
  - All Students: 15%

- **Grade 9**
  - All Students: 16%

- **Grade 11**
  - All Students: 16%

- **Cont. School**
  - All Students: 17%

Source: [https://calschls.org/reports-data/dashboard/](https://calschls.org/reports-data/dashboard/)
Staff Development and Trainings

QPR Institute

safeTALK

USA

TALK Saves Lives: An Introduction to Suicide Prevention

MENTAL HEALTH FIRST AID
What Does the New Law Require?

Education Code section 215 (4)

• (A) The policy shall also address any training to be provided to teachers of pupils in all of the grades served by the local educational agency.

• (B) Materials approved by a local educational agency for training shall include how to identify appropriate mental health services, both at the school site and within the larger community, and when and how to refer youth and their families to those services.

• (C) Materials approved for training may also include programs that can be completed through self-review of suitable suicide prevention materials.
What Does the CDE Sample Policy Recommend?

• All staff will receive **annual** professional development on risk factors, warning signs, protective factors, response procedures, referrals, postvention, and resources regarding youth suicide prevention.

• The training shall be offered under the direction of a district counselor/psychologist and/or in cooperation with one or more community mental health agencies.

• Additional professional development in **risk assessment and crisis intervention** will be provided to school-employed mental health professionals and school nurses.

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Education Code section 215 (a) (4) The policy shall be written to ensure that a school employee acts only within the authorization and scope of the employee’s credential or license. Nothing in this section shall be construed as authorizing or encouraging a school employee to diagnose or treat mental illness unless the employee is specifically licensed and employed to do so.
Student, Parent/Guardian, and Community Engagement
A 3-hour parent event providing workshops on a variety of mental health-related topics.

Topics for workshops are identified using a student survey.

**What I Wish My Parents Knew toolkit includes:**

- Step-by-step instructions for hosting event
- Customizable promotional flier template
- Event tracking sheets for presenters and exhibitors

Youth Engagement Programs

• Walk in Our Shoes
• NAMI On-Campus and Ending the Silence Presentations
• The Directing Change Program and Film Contest
• More Than Sad: American Foundation for Suicide Prevention
• LEADS for Youth: Linking Education and Awareness of Depression and Suicide
• Kognito (Peer-to-Peer)
Youth Engagement

bringchange2mind.org/

namica.org/nami-on-campus/
The skills and strategies that children and teens gain through Social-Emotional Learning (SEL) have been shown to increase protective factors and reduce risk factors associated with suicide.

**Effective SEL develops skills** in problem solving, conflict resolution, and nonviolent ways of handling disputes as well as a sense of connectedness, all of which serve as protective factors for youth against suicide and other self-destructive behaviors during transitions or crises.

**Teachers, principals, and counselors that develop social and emotional competencies** create a more supportive classroom and climate, and SEL also helps them manage their own emotions, stress, and job satisfaction.

Assessment/Intervention
Assessment: What Does the CDE Sample Policy Recommend?

- **At least two staff members** shall be designated as the primary and secondary points of contact regarding potential suicidal intentions.

- A referral process should be prominently disseminated to all staff members, so they know how to respond to a crisis and are aware of available school and community-based resources.

- Additional professional development in risk assessment and crisis intervention will be provided to school-employed mental health professionals and school nurses.

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**Education Code section 215 (a)**

(4) The policy shall be written to ensure that a school employee acts only within the authorization and scope of the employee’s credential or license. Nothing in this section shall be construed as authorizing or encouraging a school employee to diagnose or treat mental illness unless the employee is specifically licensed and employed to do so.
Create a simple one-page or double-sided handout with:

- **Warning signs**
- **Questions to ask to identify suicide ideation**
- **Referral and support information:**
  - Referral process steps
  - Contacts (with phone number) for individuals on campus trained to conduct a risk assessment
  - Crisis resources
  - Clearly state “Do NOT leave the student alone”
Whenever a staff member suspects or has knowledge of a student’s suicidal intentions, they shall promptly notify the primary or secondary point of contact:

- Conduct assessment
- Notify parent/guardian
- Refer to outside resources

Students experiencing suicidal ideation shall not be left unsupervised.
A suicide risk assessment is warranted:
• If any suicide warning signs are evident
• If significant risk factors are present

Generally, the more warning signs and risk factors present, the greater the individual’s risk.
Components of a risk assessment:

1. Assess risk factors
2. Ask about suicidal thoughts, plan, and intent
3. Assess protective factors
4. Apply clinical judgment
5. Document
Columbia Suicide Severity Rating Scale (C-SSRS)

- Very brief administration time
- Versions for schools, first responders, healthcare, and other fields
- Available in over 100 languages
- **Age:** suitable across the lifespan for use with adults, adolescents, and young children
- **Special Populations:** indicated for cognitively impaired (for example, Alzheimer’s and Autism)
- Developed in an effort to uniquely address need for summary measure – 1st scale to assess full range of ideation and behavior, severity, density, track change
- Deemed “most” evidence-supported

Safety Planning and Support:

• Recognizing the signs of crisis
• Identifying coping strategies
• Having social contacts who may distract from the crisis
• Contacting friends and family for crisis support
• Contacting health professionals, including 911 or crisis hotlines
• Reducing access to lethal means
Tracking risk assessments can provide important information for confirming care and follow-up for students.

A tracking tool can also provide your school/district with additional data points that can be used to track trends, supports needed at individual schools, or justify needs for additional funding.

<table>
<thead>
<tr>
<th></th>
<th>Assessments by risk level</th>
<th>Parent Notifications</th>
<th>Safety Plans Completed</th>
<th>Follow up care recommended</th>
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<tbody>
<tr>
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<table>
<thead>
<tr>
<th>Date</th>
<th>Test</th>
<th>Grade</th>
<th>Sex</th>
<th>Ethnicity</th>
<th>both parents</th>
<th>mother</th>
<th>father</th>
<th>other</th>
<th>regular ed</th>
<th>special ed</th>
<th>5A plan</th>
<th>referred by</th>
<th>reason for referral</th>
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<tbody>
<tr>
<td>8/22/2012</td>
<td>Student A</td>
<td>10</td>
<td>F</td>
<td>Hispanic</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>self</td>
<td>severe anxiety</td>
<td>signs of depression</td>
<td>no</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8/24/2012</td>
<td>Student B</td>
<td>9</td>
<td>F</td>
<td>Asian</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>self &amp; nurse</td>
<td>drawings in class</td>
<td>concerned with possible self-harm</td>
<td>no</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8/24/2012</td>
<td>Student C</td>
<td>8</td>
<td>M</td>
<td>Asian</td>
<td>X</td>
<td>X</td>
<td></td>
<td>teacher</td>
<td>direct threats</td>
<td>mood swings</td>
<td>no</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8/24/2012</td>
<td>Student D</td>
<td>10</td>
<td>F</td>
<td>Hispanic</td>
<td>X</td>
<td>X</td>
<td></td>
<td>parent</td>
<td>sudden changes in behavior</td>
<td>signs of depression</td>
<td>no</td>
<td></td>
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</tr>
</tbody>
</table>
Re-Entry Procedures

For students returning to school after a mental health crisis (for example, suicide attempt or psychiatric hospitalization):

• School staff to meet with parent/guardian to discuss re-entry, next steps
• Identify coordinator for student/parent/outside care provider
• Parent/Guardian to provide documentation of care
• Identified coordinator to provide “check-ins” with student
Resources
National Crisis Resources

National Suicide Prevention Lifeline
1-800-273-TALK (8255)
suicidepreventionlifeline.org

Crisis Text Line
Text HELLO to 741741
Free, 24/7, Confidential
Call: 310-855-4673
Text “TEEN” to 839863
The Trevor Project Lifeline

The Trevor Project for LGBTQ Teens (24/7)
Call 1.866.488.7386 or text START to 678678
Know the Signs

SuicidIsPreventable.org

ElSuicidioEsPrevenible.org
Know the Signs

A wide range of **mental health** and **suicide prevention** educational resources are available for diverse communities across the lifespan:

- African American
- API youth
- Cambodian
- Chinese
- Filipino
- General public
- Hmong
- Individuals in crisis
- Korean
- Lao
- LGBTQ youth and young adults
- Middle-aged men
- Spanish-speaking
- Vietnamese
- Russian
- Punjabi
Each Mind Matters Resource Center

Each Mind Matters is California’s Mental Health Movement. We are millions of individuals and thousands of organizations working to advance mental health. Browse our initiatives, collections and resources to find tools you can use to improve mental health and equality in your community, prevent suicide and promote student mental health.

Search Our Resources

Search
Advanced Search

Featured

2018 Suicide Prevention Week Toolkit
Includes resources for National Suicide Prevention Awareness Week and World Suicide Prevention Day

EMMResourceCenter.org
Thank you!

Stan Collins: Stan@SuicideIsPreventable.org


Resources


Resources

