Welcome to SPRC’s Research to Practice Webinar on

*Responding After a Suicide: Best Practices for Schools*

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Expand control panel
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Today’s Speakers

Scott Poland, Ed.D
Joanne Harpel, J.D., M.Phil
Richard Lieberman, MA, LEP, NCSP
Today’s Discussants

Dale Chell, MS  
Cathy Beck-Cross, MSW
Postvention in Schools:
Responding Effectively After a Suicide

Dr. Scott Poland, Co-Director
Suicide and Violence Prevention Office
Nova Southeastern University
Why Postvention in Schools?

- Schools are often unsure about how to respond after a suicide
- 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
Primary Goals of 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 ongoing prevention efforts
What the Research Tells Us

Suicide Contagion

- Suicide contagion occurs when one suicide death contributes to another.
- Contagion is rare but adolescents and young adults are more susceptible than other age groups.
Possible Reactions After a Suicide

- The principal decides to hold a school-wide assembly about the student’s suicide
- Teachers and school staff are unsure how to help students cope
- Students want to create a lasting memorial in the school
- The local paper prints a front page story with details about the death
Examples

- Questions students have asked following a suicide
- A principal’s dilemma about how much to focus on the suicide death and how to handle memorial ideas
- A clergy’s message at the funeral about the victim being so burdened that death was a rescue from God
- A school’s resistance to implementing best practice postvention protocols that resulted in a lawsuit
Risk Factors for Imitative Behavior

- Facilitated the suicide in some way
- Believes that s/he may have caused the suicide
- Had a close relationship or identified with the suicide victim
- Did not recognize the victim’s suicidal intent
- Has a history of suicidal behavior or mental health problems
CIRCLES OF VULNERABILITY
MAPPING BY THREE DIMENSIONS

GEOGRAPHICAL PROXIMITY

POPULATION AT RISK

PSYCHOSOCIAL PROXIMITY

CSPC, Tel Hai College, Kiryat Shmona
Preventing Suicide Clusters

- Convene a planning committee with all sectors of school and community
- Deliver a public response that minimizes sensationalism, avoids glorification and emphasizes the role of mental illness
- Support students’ varied responses and promote healthy coping strategies
- Provide a range of community resources and referral networks
Prevention Strategies

- Ensure that everyone, including students, knows the warning signs for suicide and how to respond
- Train key school personnel to assess students for suicide risk and refer as needed
- Increase student connections to the school and implement bullying prevention programs
- Involve community partners, including parents and physicians
Implementing Screening Programs

- Schools may be more receptive to prevention initiatives following a suicide.
- Research has found screening programs safe and effective, with fewer suicide attempts and increased help seeking behavior.
- Two programs listed in the AFSP/SPRC Best Practices Registry:
  - Signs of Suicide (SOS)
  - Columbia TeenScreen
The journey through postvention begins and ends with an emphasis on prevention.
Suicide Prevention is Everyone’s Responsibility

For more information:

www.ScottPoland.com
spoland@nova.edu
After a Suicide: A Toolkit for Schools

Joanne L. Harpel, J.D., M.Phil.
Senior Director for Public Affairs and Postvention
American Foundation for Suicide Prevention
OVERVIEW OF TOOLKIT

• Online resource
• Available free of charge
  – www.afsp.org/schools
  – www.sprc.org/AfteraSuicideforSchools/asp
• For use by schools after suicide (or other death) in school community
• Highly-practical
• Developed with experts
KEY MESSAGES

• 1 - Schools should strive to treat all deaths in same way
• 2 – Adolescents and teens vulnerable to risk of contagion
• 3 – Someone who takes his/her own life was likely struggling with a serious mental health issue
• 4 - Help is available for students who are struggling or may be at risk themselves
CRISIS RESPONSE

• #1 - Get The Facts First
• #2 - Dealing with the Media
• #3 - Parent/Community Meeting
• #4 - Identifying/Screening Kids Who May Be At Risk
HELPING STUDENTS COPE

• “Emotional Regulation”
• Meet in small groups
• No large assemblies or overhead announcements
WORKING WITH THE COMMUNITY

• Schools exist within context of a larger community
• Work collaboratively with other individuals and entities
• Coordinated response is ideal
MEMORIALIZATION

• Common question
• Basic human desire to remember those we’ve lost
• Can be challenging for schools to strike balance
• Go back to Key Considerations
  – strive to treat all deaths in the same way
  – insensitivity or doing nothing reinforces stigma
  – but – awareness of risk of suicide contagion
  – DON’T glamorize or romanticize student
  – DO emphasize connection w/mental health issues
• Toolkit contains some creative suggestions
SOCIAL MEDIA

- Often outside of school’s literal control
- Can still be utilized as part of school’s response
- Partnership with key students
- Identify and monitor relevant social networking sites
- Share prevention-oriented safe messaging
- Offer support to students who may be struggling to cope
- Identify students who could be at risk
After a Suicide: A Toolkit for Schools

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Joanne L. Harpel, J.D., M.Phil.
Senior Director for Public Affairs and Postvention
American Foundation for Suicide Prevention
jharpel@afsp.org
Richard Lieberman, NCSP
School Mental Health
Suicide Prevention Services
Los Angeles Unified School District
richard.lieberman@lausd.net
Prevention & Preparedness

• Develop a district/school suicide prevention task force
• Develop policies and procedures
• Crisis team mandates provide foundation for SP
• Components of a suicide prevention program include prevention (gatekeeper training; depression screening), intervention and postvention guidelines.
• Cultural responsiveness includes materials in native languages, interpreters, and understanding the rituals, customs and traditions of diverse populations.

Brock & Lieberman, 2008; Lieberman, Poland & Cassel, 2008; Brock & Sandoval & Hart, 2006
School Crisis Prevention and Intervention
The PREPaRE Model

www.nasponline.org
Special Suicide Postvention Issues

Social Stigma

• Both students and staff members may be uncomfortable talking about the death.
• Survivors may receive (and/or perceive) much less social support for their loss.
• Approximately half of survivors’ close friends report a more strained/distant relationship (Norford, 2005).
• Reluctance to provide postvention services

Suicide postvention must be prepared to operate in an environment that is not only suffering from a sudden and unexpected loss, but one that is also anxious talking openly about the death.
Special Suicide Postvention Issues

• Contagion
  – Avoid sensationalism/romanticism of suicide
  – Avoid glorification/vilification of victim
  – Do not provide excessive details
• Popularity of student
• Event timing
• Collateral impact at previous school of attendance or schools attended by siblings
• Working with media/clergy
• Social networking sites/Virtual crisis rooms
Practical Suggestions

• Intervene only when indicated
• Do not inform staff or students by intercom
• Triage staff and make appropriate notification in person (not by memo or e-mail)
• Have substitutes to relieve staff during the day
• Facilitate social support systems for HS/Secondary students
Suicide Postvention Checklist

1. Verify that a death has occurred and confirm cause
2. Mobilize the Crisis Response Team
3. Assess the suicide’s impact on the school and estimate the level of postvention response
4. Notify other involved school personnel
5. Contact the family of the suicide victim
6. Determine what information to share about the death
7. Determine how to share information about the death
Suicide Postvention Checklist

8. Identify students significantly affected by the suicide and initiate a referral mechanism
9. Conduct a faculty planning session
10. Initiate crisis intervention services
11. Conduct daily planning sessions
12. Memorials
13. Debrief the postvention response
Item 5: Contact the Family of the Suicide Victim

Contact should be made in person within 24 hours of the death. Purposes include...

• Express sympathy
• Offer support
• Identify the victim’s friends who may need assistance
• Discuss the school’s postvention response
• Identify details about the death that could be shared with outsiders
• Discuss funeral arrangements and whether the family wants school personnel and/or students to attend.
Item 8: Identify Students Significantly Affected by the Suicide & Initiate Referral Procedures

Risk Factors for Imitative Behavior

- Facilitated the suicide
- Failed to recognize the suicidal intent
- Believe they may have caused the suicide
- Had a relationship with the suicide victim
- Identify with the suicide victim
- Have a history of prior suicidal behavior
- Have a history of psychopathology
- Show symptoms of helplessness and/or hopelessness
- Have suffered significant life stressors or losses
- Lack internal and external resources
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
Item 9: Conduct a Staff Planning Session

• Address staff reactions. Staff need to know HOW they respond in the eyes of the children is very important and have a great impact on elementary aged students.

• Staff may need to be provided a common fact sheet to be read in classes determined by the crisis team.

• Staff could be provided...
  – Current information regarding the death
  – Information about suicide contagion
  – Suicide risk factors
  – Plans for the provision of crisis intervention services
  – Specific activities/responsibilities
Item 12: Memorials

- Strive to treat all student deaths the same way
- Encourage and allow students, with parental permission, to attend the funeral
- Reach out to the family of the victim
- Contribute to a suicide prevention effort in the community
- Develop living memorials, such as student assistance programs, that address risk factors in local youth
- Spontaneous memorials on school grounds
Prevention Messaging for Administrators

• While suicide is widely known as preventable, sadly, some suicides cannot be prevented.

• The goal now is to reach out to everyone in the school community who might be in need of support and to identify those in need of referrals and local mental health resources.

• We want our students to know that under no circumstances is suicide an option. Help is available. If they are concerned about a friend they should never hold such information confidential and they should tell a trusted adult.

• Suicide and the grief that follows a death by suicide are very complex and no one person, no one thing is ever to blame.
Prevention Messaging for Administrators

• The legacy of survivors includes many questions that cannot be answered but a key to healing for many has been to become an advocate for suicide prevention efforts in the community they live in.

• There are very clear risk factors for suicide and they include a history of depression, alcohol and substance abuse, and recent losses. Often a precipitating event will ignite the fuel of depression and result in suicidal thoughts and actions: Events such as a loss of romance, dignity, or death by suicide; an economic, health, academic or disciplinary crisis; an argument with parents, peers.
Los Angeles County
Youth Suicide Prevention Project

Home
About Suicide
For Administrators & Staff
For Parents & Students
For Special Populations & Issues
Resources
About this Project
Contact Us

If you need immediate help, please call 911.

For more information and assistance, please call the 24-hour crisis lines:

Suicide Prevention Center Hotline:
1-877-7-CRISIS or 1-877-727-4747

National Suicide Prevention Lifeline:
1-800-273-TALK (8255)

Trevor Lifeline
1-866-488-7386

Teen Line
1-800-TLC-TEEN (852-8336)
Toll Free in California only
Hours: 6 pm - 10 pm Pacific Time

Providing outreach and support to districts, schools, parents and high risk youth populations.

Please help us to improve this website by taking a short survey.
Key Resources

- Los Angeles County Youth Suicide Prevention Project: http://preventsuicide.lacoe.edu/
- School Crisis Prevention & Intervention: the PREPare Model from National Association of School Psychologists: http://nasponline.org/prepare/index.aspx
- Depression Screening programs
  - SOS: Signs of Suicide  
    http://www.mentalhealthscreening.org/programs/youth-prevention-programs/
  - TeenScreen http://www.teenscreen.org/