

Preventing Suicide: Review of Safety Protocol for Suicidal Students

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Fast Facts about Suicide

- 2013, students in grades 9 - 12:
 - 17% seriously considered attempting suicide in the previous 12 months
 - 13.6% made a plan in the previous 12 months
 - 8% attempted suicide one or more times in the previous 12 months
 - 2.7% made a suicide attempt that resulted in an injury, poisoning, or an overdose that required medical attention

Kann, L., Kinchen, S., Shanklin, S.L. et al. (2014). Available at www.cdc.gov/mmwr/preview/mmwrhtml/ss6304a1.htm

Contagion Effect

- Process in which the suicidal behavior or suicide of an individual influences an increase in the suicidal behaviors or suicides of others. (U.S. Department of Health & Human Services, 2008).
- Rare but most prevalent among adolescents
- Account for 1-5% of teenage suicides or 100-200 deaths annually (Gould, M. S. 2004).
- Proximity to the victim & predisposed vulnerability creates greatest risk.
 - Geographic proximity
 - Media or sensationalized coverage can increase proximity
 - Psychological proximity
 - Example: victims of bullying, team members, classmates, members of the same school, any other similar or unifying characteristic
 - Social proximity
 - Example: family member, acquaintance, neighbor

Zenere, F. (2008). Pathway of Contagion: The Identification of a Youth Suicide Cluster. *Communiqué*, 37(4).

13 Reasons Why series increases proximity for students and is not recommended for vulnerable youth.

What educators can do:

- Be a supportive adult to help students process
 - Help students articulate perceptions when viewing controversial content
 - Reinforce that school mental health professionals are available to help
 - Ensure parents, teachers, and students are aware of suicide warning signs
 - Take warning signs seriously and never promise to keep them a secret
 - Use established reporting protocols
 - Reinforce resiliency factors:
 - Peer support and close social networks
 - School and community connectedness
 - Cultural or religious beliefs that discourage suicide and promote healthy living
 - Adaptive coping and problem-solving skills, including conflict resolution
 - General life satisfaction, good self-esteem, and a sense of purpose
 - Family support and cohesion, including good communication
 - Easy access to effective medical and mental health resources

National Association of School Psychologists. (2017). 13 Reasons Why Netflix series: Considerations for educators [handout]. Bethesda, MD: Author.

Risk Factors

- Previous suicide attempt(s)
- Isolation and aloneness
- Non-suicidal self-injury (e.g., cutting)
- Mental illness including depression, conduct disorders, and substance abuse
- Family stress/dysfunction
- Family history of suicide
- Environmental risks, including presence of a firearm in the home
- Situational crises (e.g., the presence of a gun in the home, bullying and harassment, serious disciplinary action, death of a loved one, physical or sexual abuse, breakup of a relationship/friendship, family violence, suicide of a peer)

National Association of School Psychologists, 2015

Warning Signs

- Suicidal threats in the form of direct (e.g., "I am going to kill myself") and indirect (e.g., "I wish I could fall asleep and never wake up again") statements
- Suicide notes and plans (including online postings)
- Making final arrangements (e.g., giving away prized possessions)
- Preoccupation with death
- Changes in behavior, appearance, thoughts, and/or feelings.

SUICIDE IDEATION RESPONSE:



ALL STAFF ACTION PLAN

1

A student expresses a verbal or written suicide threat.

Examples include:

"I want to kill myself"

"The world would be a better place without me"

"Nobody will miss me anyway"

2

Take all threats seriously!

3

Maintain constant supervision of the student.

Under no circumstances should the student be left alone.

4

Escort or arrange for the student to be escorted to a school clinician (Counselor, Social Worker, Psychologist, or Nurse) immediately, and ensure that the clinician is aware of the nature of the threat. It is critical that this step occur immediately after the threat is presented.

Do not wait until the end of the school day!

5

The clinician will conduct a **suicide ideation assessment** to determine risk level and next steps.

6

Follow up with the clinician to determine if there is any additional information that you need to be aware of in order to best meet the student's education needs.

Protocol

- IMMEDIATELY report concerns to a licensed mental health professional in the building
 - Do NOT wait until the end of the day and always report the SAME day
 - If possible do not leave the student until you have connected with support staff
- Licensed mental health professionals are: social workers, psychologists, and counselors
 - At NEC: Jamie Anderson, Bryce Merriman, Kelly Betzold, Lyla Peterson, Kelly Mwei, Chad Jayasekera, Shaina Feingold, Maureen Cooper, Braden Schmitt, Quinn Meyer, Kristin Karlson, and Steve Higgins
- Provide all relevant information to mental health professional
- If you are in an emergency situation with the potential for imminent harm, call 911 immediately

Risk Assessment

- If student is not in imminent danger, school mental health professional will complete a risk assessment
- Mental health professional will determine level of risk: Low, Moderate, or Imminent
- Mental health professional will take appropriate follow up steps based on level of risk (for example, contacting parent, call Hennepin County Crisis)
- [Suicide Risk Assessment Form](#)

Safe Messaging for Students

- Suicide is never a solution, it is an irreversible choice regarding a temporary problem.
- Talk to friends about tough emotions and let them know you care..
- Be an “upstander” and take actions to reduce bullying and increase positive connections among others. Report concerns.
- Never promise to keep secret behaviors that represent a danger toward another person.
- Suicide is preventable.
- Never leave someone alone, seek out a trusted adult immediately.