

Intervention Strategies



Issue Brief 6c

ORANGE COUNTY • NEW YORK

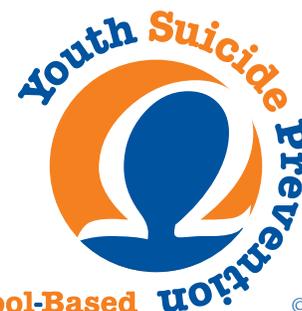
Responding to a Student Crisis

Planning how to respond to a suicidal crisis refers to how a school and its faculty and staff respond to a student that threatens or attempts suicide. A suicidal crisis occurs any time when the risk for suicide is raised by any peer, teacher, or other staff member that identifies a student as potentially suicidal (1). A student may make a statement about suicide in writing assignments, in a drawing or indirect verbal expression, or overtly voice suicidal threats or behaviors (2). Additionally, there is increasing research on Internet activity on suicide by students following a death by suicide and the issue of interactive suicide notes and cybersuicide (25, 26, 27). Interactive suicide notes and cybersuicide refer to use of the Internet as a public platform for displaying suicidal ideation and behavior (28). Some approaches to reducing potential harm from suicide sites may include self regulation by Internet service providers, use of filtering software by parents and schools to block sites from susceptible youth, and monitoring Internet connections (26).

Although the most ideal intervention strategy for suicidal behavior is prevention, sometimes prevention efforts fail to identify or detract a student from voicing suicidal thoughts or expressing suicidal behaviors (3). If such prevention efforts fail, skills and procedures for intervening with a student potentially at risk for suicide are essential for administrators, faculty, and staff. School-based suicide intervention strategies consist of those school-related activities that are designed to appropriately and effectively handle a student presently making a suicidal threat and/or attempt (4).

Faculty and staff should be made aware of established intervention procedures that a school will take when a student expresses suicidal ideations (thoughts) or demonstrates suicidal behavior (1, 7, 8). Some recommend that these policies and procedures be contained in a crisis management guide that provides information about warning signs, risk/protective factors, and suicide prevention guidelines (gatekeeper training, curriculum, or screening) (13). An effective crisis response will be guided by a response plan developed in advance of a suicidal crisis, which identifies step-by-step what to do should a student threaten or attempt suicide (5, 8, 9, 10). See Issue Brief 6a for more information on establishing a Community Response within a Public Health Approach and Issue Brief 6b for information on Crisis Intervention and Response Teams.

Many schools tend to respond to a suicidal crisis in an unorganized fashion and a contributing factor for this unorganized response is due to the lack of an established plan of action when faced with a suicidal crisis (4). By acting in an unorganized way, schools may not be successful at intervening with a student experiencing a suicidal crisis, which could result in a tragic loss of a life, or in some cases, may contribute to further copycat



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behaviors by other students (11) or suicide contagion. Contagion is the process by which one suicide may contribute to another, for example through the influence of media reports (22, 23). When responding to a suicide crisis, understanding and addressing risk factors may help to alleviate effects of contagion. For example, one study found that friendship was a predictor of posttraumatic stress disorder (PTSD) and high intensity grief. Further, inadequate crisis intervention was a risk factor for high intensity grief (21). Other research suggests that complicated grief is associated with a heightened risk of suicidal thoughts and actions among peers of adolescent friends who died by suicide (24). A clearly written plan will help facilitate an organized and more effective response to a suicidal crisis (6, 12). Although each suicidal crisis situation is unique there are some commonly held do's and don'ts when responding to a student that may be experiencing a suicidal crisis and is in need of help.

The following checklist was created by synthesizing materials from several sources, all of which discussed ways for responding to a student threatening suicide or actually attempting suicide (1, 2, 5-7, 14-19).

What to DO When Faced with a Student Experiencing a Crisis

- **Always ensure a student's safety.** The main goal when encountering a student expressing suicidal thoughts or behaviors is to prevent the act from happening (9). One way to do this is to ask whether the student is having suicidal thoughts or has a plan in mind: "Have you thought about how you would kill yourself?" or "Have you made any plans or preparations?" If the student does have a plan, then does he or she have access to a method for completing/attempting this plan: "Do you have access to a gun?" or "Do you have the pills?" It would also be important to find out if the student has a time or location, when or where he or she plans on attempting suicide.
 - » If the student does have a plan and has access to a method or just seems unsafe, remain with the student until a crisis team member arrives.
- **Send someone for help.** This is essential. Most often the crisis team member in the building or closest to the building where the crisis is occurring should be notified first.

- **Listen.**
 - » Acknowledge feelings and problems in the student's terms. Try to avoid complicated language.
 - » Allow the student to express feelings – a teacher may want to openly communicate giving the student permission to express his or her feelings.
 - » Try to avoid giving advice or opinions. Try and repeat back the feelings that you hear the student expressing ("you sound frustrated" or "you feel hopeless").
 - » Listen for warning signs such as hopelessness or a fixation with death.
- **Be direct.** Talk openly about suicide. Do not be afraid to say the word suicide. Do not worry about planting the idea in the student's head. Suicide is a crisis of non-communication and despair; by asking about it you allow for communication to occur and provide hope (14). Be direct with depressed and/or suicidal students, asking whether the student has been accessing Internet sites, obtaining suicide information from such sites, and talking in suicide chat rooms.
 - » Remain calm.
 - » Be empathetic.
 - » Always take the student seriously.
 - » Know what resources are available in your school before hand.
 - » Know who your nearest crisis team member is and where to find them.
- **Be honest.** Offer hope, but do not offer condescending or unrealistic reassurance.
- **Know your limits.** If you feel that you are in way over your head, or if you feel uncomfortable, minimize your level of involvement. Make a referral to someone else that may be in a better position to help. If you feel the student is in immediate danger, escort the student to the referral yourself. If you do not feel that the student needs an escort, you still should check to see if the referral was followed up on. Usually a simple phone call to the person you referred the student should be sufficient.
- **Make sure that at each stage of the intervention the student knows what is going on.** Do not surprise the student by escorting him/her to a room with a ten-member crisis team waiting. Make sure that you explain to the student what events and responses they can expect. Remember a suicide crisis is a chaotic and confusing situation. By not

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providing and communicating structure in your response, you may unintentionally create more chaos and confusion, thereby increasing the likelihood that the student will refuse to cooperate.

- **Inform parents.** Parents/caretakers must always be informed when their adolescent son or daughter has been identified as experiencing a suicidal, or for that matter, any crisis.
 - » The school must inform the parents about community agencies, such as mental health providers before, during, and after a suicidal crisis. School should also work with parents to develop a plan of action for getting the student help.
 - » Schools should also inform parents, before a suicidal crisis, about the risk factors and warning signs for suicide. This could be done briefly and possibly in a PTA meeting or other parent teacher meetings. During this time schools should also inform parents about the necessity of restricting access to lethal means, as well as informing them about community resources that may be available should they suspect that their adolescent may need help. For more on parent education, please refer to *Issue Brief 5: Prevention Guidelines*.
 - » Reassure the parents that the student is currently safe.
 - » Explain to the parents what has happened and the reason for the school's response.
 - » More importantly, the school must explain the seemingly obvious necessity of restricting access to lethal means that the student has available. Parents must be told that an extremely effective way to prevent their adolescent son or daughter from dying by suicide is to make sure there is no way their adolescent son or daughter has any way of getting the weapon.

What NOT to DO When Faced with a Student Experiencing a Crisis

- **Don't ever dare a student to attempt suicide.**
- **Don't debate with the student about whether suicide is right or wrong.**
- **Don't promise secrecy or confidentiality.** It may be advisable just to let the student know that you don't want to see him or her kill themselves and that you just want to make sure that he or she gets the best help possible, and that maybe you are not the best person to provide such care. Limitations to confidentiality should be explained to the student without

pushing him or her away. Issues such as danger to self or others and physical and sexual abuse will not be kept secret. New York State educators are mandated reporters, which means if they know, or reasonably suspect, abuse or neglect, they are required to call the Mandated Reporter Hotline at 1-800-635-1522.

- **Don't panic.**
- **Don't rush or lose patience with the student.** Realize that you may need to spend some time with this student in order to ensure that he or she will remain safe. Try to have as much privacy as possible when talking to the student.
- **Don't act shocked.** If you do so, the student is likely to feel that the situation is so bad that no one can help. This will destroy any chance for rapport and is likely to put distance between you and the student.
- **Don't be judgmental.** Avoid offering opinions of right vs. wrong or ethical vs. unethical. The main aspect of communication is just to listen and show concern.
- **Don't preach to the student.** Avoid discussing the value of life and how such a tragic act would affect his family and friends. These people may be contributing to the student's suicidal crisis and the student may wish to hurt these people through suicide.
- **Never leave the student alone or send the student away.** This may just reinforce feelings of isolation and hopelessness.
- **Don't worry about silence during discussion.** Just let the student know that you are there, and you are willing to listen.
- **Don't under-react or minimize.** By under-reacting, you communicate that you don't really respect the student's feeling and don't believe that the student is serious. By doing this, you just reinforce the student's feeling that no one understands or cares. Assuming that a student is attention seeking is usually the reason behind underreacting. Even if a student is seeking attention, you should act. The benefits could certainly out way the costs.
- **If a student is threatening suicide and does have a weapon, never try to physically take the weapon from the student.** This could endanger your life, the life of the student, and the lives of other persons in the school.

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Responding to Various Levels of Risk

In order to make an appropriate referral it is important that someone who is trained in lethality and risk determination assess the risk of the student (1, 5, 6, 8, 9, 18). Although it is beyond the scope of educators and or administrators to directly assess risk, some important notes must be made and should be disseminated to all school faculty and staff. In all of these situations remember the do's and don'ts when responding to a student experiencing a suicidal crisis.

■ Level 1: Low or moderate risk

- » Faculty and staff member observes behaviors or warning signs that indicate that a student may be at risk.
- » Student may have verbalized suicidal thoughts, but does not have a plan and does not have access to a potentially lethal weapon. In a low risk situation, the crisis team member nearest the situation should be notified. The crisis team member will meet with student to determine extent of the problem, and if the possibility of harm is not imminent then the parents should be notified. The crisis team member should also follow-up periodically (once a week maybe for first month or two and then less frequently). If, however, in the assessment, there is a potential that the student may harm him/herself, then risk is increased to level two or severe risk situation.

■ Level 2: Severe risk

- » Student has overtly voiced the intent to engage in a suicidal act.
- » Student has gone beyond mere thoughts and has thought of actual actions.
- » Student does have a suicidal plan, but does not have the means to carry out his/her plan.

In a severe risk situation, the crisis team member nearest the situation should be notified, as well as school administration that a student has expressed the intent to engage in suicidal behavior. The student should be kept under constant supervision until student is under the care of a community professional or until parent(s) take the child home. Before leaving, however, it is critical that the parent(s) attend a brief intervention meeting where the crisis team, the parent(s), and the student agree upon a treatment plan. It is also essential that parents be informed about the importance of restricting

or hiding any potentially lethal means. If parents do not appear willing to take any steps to intervene school crisis team member and/or school administrators have the option of calling their Child Welfare division of the Department of Social Services in order to help ensure that the student will remain safe. Follow up must be done by the crisis team in order to make sure the student is progressing and that treatment is being maintained.

■ Level 3: Extreme risk

- » Student has voiced the intent to engage in a suicidal act.
- » Student has the access to lethal means needed to carry out this act.
- » Student may have access to lethal means on person.

In the extreme risk situation, the crisis team member nearest the student should be notified of the situation. The crisis team and various community links should be mobilized. The parents of the student must be notified and informed about the observations and seriousness of the situation. If the student does possess potentially lethal means on person, do not attempt to take the weapon by force. Calmly talking to the student and allowing the student to express feelings is essential when intervening. Once the student has given up the potentially lethal weapon, crisis team members should intervene in similar fashion to a severe risk situation.

**In all of these aforementioned situations it is essential that the student not be left alone and that he/she receives intervention or appropriate care.*

Two other points must be made about a suicidal crisis. First, it is critical that other students in the school are kept as safe and clear from any potentially harmful situation (1, 9). For those students who may have witnessed the situation, allow them to express their fears, concerns, and feelings of responsibility or guilt. These students should also be assured the student who was experiencing the crisis is receiving help, but maintain confidentiality and keep the details of the crisis to a minimum. Inform the students about where they may receive help in the school or community. The school should also monitor friends of the student who experienced the crisis, as well as other students potentially at risk for suicidal behavior in order to prevent copycat behavior. Second, all staff and faculty involved in the crisis should be given opportunities to discuss their reactions and offered necessary support (1, 2, 6, 8). Staff and faculty should be allowed

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to express and process their feelings, their worries, concerns, or even their suggestions about what was done well and what could have been done better (8).

While this issue brief focuses on what to do during a suicide crisis, see Issue Brief 6a Establishing a Community Response and Issue Brief 6b Crisis Intervention and Response Teams. In addition, *After a Suicide: A Toolkit for Schools* (2011) (20) includes the following principles and key considerations for action when responding to a death.

- » “Schools should strive to treat all student deaths in the same way. Having one approach for a student who dies of cancer (for example) and another for a student who dies by suicide reinforces the unfortunate stigma that still surrounds suicide and may be deeply and unfairly painful to the deceased student’s family and close friends.
- » At the same time, schools should be aware that adolescents are vulnerable to the risk of suicide contagion. It is important not to inadvertently simplify, glamorize, or romanticize the student or his/her death.
- » Schools should emphasize that the student who died by suicide was likely struggling with a mental disorder, such as depression or anxiety, that can cause substantial psychological pain but may not have been apparent to others (or that may have shown as behavior problems or substance abuse).
- » Help is available for any student who may be struggling with mental health issues or suicidal feelings” (p. 6) (20).

Schools should be cautioned about developing protocols to honor the lives of students that have died. Consistent practices are essential, as memorializing a student’s death by suicide has been cited in the literature as a contributory factor in suicide contagion among other students (20). Promoting a healthy, consistent response is recommended. Some examples include promoting education of the early signs and symptoms for the detection of the cause of death for all deaths, having a memorial plaque for all students and staff that died in the entire district during that academic year in a place of honor in the district, setting up a memorial garden or planting a tree at the end of each year invite students and staff for a moment of silence or service to honor all who have lost friends or family that year. Those that died do not have to be students or staff. Another idea would be to promote a walk or activity that supports prevention such as a cancer walk, Out of the Darkness walk etc. School faculty and staff should also be aware of any spontaneous memorials that

students may create, such as leaving flowers, cards, or photos at the deceased student’s locker. Such memorials should be monitored for inappropriate or upsetting messages, and yet not directly prohibited or taken down, which would draw excessive, and negative, attention (20).

Although *The Guide* does not endorse any program over another, the following programs are simply meant to provide schools with some samples of programs that have used intervention strategies as part of their program. What components a school chooses to use and from what programs these components come from is the decision that each school will have to make. The important point is to provide an effective and comprehensive program that has the greatest potential to help and the least likely chance to harm. Below is a sample list of suicide prevention programs that have used intervention strategies, but may or may not be listed in the Best Practices Registry:

- **Safe: Teen** (Suicide Awareness for Everyone) (formerly known as the Adolescent Suicide Awareness Program [ASAP]), <http://www.centermh.org/services/suicide-prevention/safeteen>
- **Lifelines*: A Suicide Prevention Program**, <http://www.hazelden.org/web/go/lifelines>
- **Virginia Suicide Prevention Initiative**, <http://www.vahealth.org/Injury/preventsuicideva/documents/2009/PDF/Program%20Description.pdf>
- **BRIDGES program** (Building Skills to Reach Suicidal Youth), <http://ubhc.umdj.edu/OPSR/programs/BRIDGES.htm>
- **Miami-Dade County Public Schools Crisis Management Resource Manual**, http://mhcms.dadeschools.net/crisis/pdfs/CM_resource_man08.pdf
- **The Maine Youth Suicide Prevention Program**, <http://www.maine.gov/suicide/docs/Guidelines%2010-2009-w%20discl.pdf>
- **The Oregon Plan for Youth Suicide Prevention**, <http://public.health.oregon.gov/PreventionWellness/SafeLiving/SuicidePrevention/Documents/YSuicide.pdf>
- **The American Life Skills Development*/Zuni Life Skills Development**, <http://nrepp.samhsa.gov/ViewIntervention.aspx?id=81>

**These programs are listed in SAMHSA’s National Registry of Evidence-based Practices and Procedures [NREPP] as evidence-based suicide prevention programs.*

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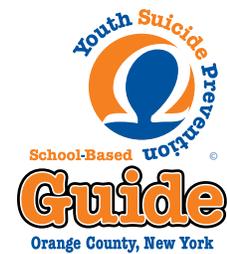
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Notes



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