

Threat and Suicide Risk Assessment: Developing a Proactive and Consistent Approach to Evaluating Risk

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Ohio School Psychologists Association
March 27, 2015



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Workshop Objectives

- Participants will learn:
 - how to establish a consistent school- or district-wide approach to threat and suicide risk assessment.
 - the critical factors contributing to risk to include current statistics and early identification of warning signs
 - best practice guidelines as established by prior legal cases
 - primary prevention strategies to break the code of silence
 - about a variety of risk assessment models that guide risk assessment procedures
 - strategies for interventions and postvention
 - strategies for working with difficult parents
 - from case study examples and shared forms that illustrate the risk assessment process

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Workshop Outline

Introduction

- Legal Issues
- Threat Assessment: Other-Directed Violence
 - Violence Statistics
 - Primary Prevention of School Violence
 - Risk Assessment
- Suicide Assessment: Self-Directed Violence
 - Suicide Statistics
 - Primary Prevention of Youth Suicide
 - Risk Assessment
- Intervention, Referral & Postvention
- Conclusion

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Myths of Directed School Violence

- It won't happen here
- School violence is just about homicide
- Perpetrators dislike and do poorly in school
- Potentially violent individuals just snap
- Perpetrators had many discipline problems at school

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Myths and Facts Quiz: Suicide

(True or False)

1. If you talk to someone about their suicidal feelings you will cause them to commit suicide.
2. When a person talks about killing himself, he's just looking for attention. Ignoring him is the best thing to do.
3. People who talk about killing themselves rarely commit suicide.
4. All suicidal people want to die and there is nothing that can be done about it.
5. If someone attempts suicide he will always entertain thoughts of suicide.
6. Once a person tries to kill himself and fails, the pain and humiliation will keep him from trying again.

Giffen, Mary, M.D. and Carol Felsenthal. *A Cry For Help*. Doubleday and Col, 1983. Miller, Marv. *Training Outline for Suicide Evaluation*. The Center for Information on Suicide. San Diego, California, 1980.

Staff Development & Training: General Staff

- General Staff Procedures & Awareness Training
 - All school staff members are responsible for recognizing warning signs and knowing the referral procedure to report concerns whenever warning signs are displayed.
- Clear reporting procedures with common language
- Staff know all reporting procedures for:

•Bullying	•Harassment
•Suicide risk	•Violence or danger concerns
•Child abuse & neglect	•Substance abuse
•Sexual assault	•Cyber/internet/texting concerns

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Staff Development & Training: Risk Assessment Team

- **Trained** multi-disciplinary Risk Assessment Team
 - Conducting risk/danger assessments - A **TEAM** process
 - Administrator, School Disciplinary/Safety Personnel, Mental Health (School Psychologist, Counselor, Social Worker)
 - Other potential members: teachers, coach, nurse, Sp.Ed...
 - Moderate to serious risk of directed violence suspected, include law enforcement in the evaluation and investigation
 - Risk level is a team decision!
- Select a "Risk Assessment Team Leader"
 - Initial threats/concerns reported to this person to activate process
 - Responsible for coordinating process and ensuring collaboration
 - Have back-up team leader identified
- Focus on determining level of risk & appropriate interventions
- Document, document, document!!!

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Risk Assessments Provide:

- Teaming process
- Descriptive information
- Common language
- Level of concern
- Documentation
- Safety planning for reducing risk
 - discipline/consequences
 - monitoring
 - skill development
 - relationship building

[Action Flow Chart](#)

Dr.'s Linda Kanan and Ron Lee, 2005

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Legal Issues: U.S. Constitution

- **1st Amendment:** Freedom of speech
 - **Not** entitled to protection:
 - fighting words, obscenity, and defamation
 - Student speech which causes substantial disruption or material interference with school activities or invades rights of others
 - **"true threat"**
- **4th Amendment:** Unreasonable search & seizure
 - Reasonable suspicion
 - Scope of search reasonably related to objective and not excessively intrusive

Hutton, T. (2007) - National Assoc. School Boards

Legal Issues: U.S. Constitution

- **14th Amendment:** Due process and equal protection
 - Action must be related to school's interest in protecting students or maintaining order in school
 - Failure to adopt and implement adequate safety measures can be grounds for tort claim in event of school violence
 - Avoid discriminatory practices
 - IDEA guidelines
- **Tort Claim** (under state law): negligence claim for failure to intervene

Hutton, T. (2007) - National Assoc. School Boards

Legal Issues: Family Educational Rights and Privacy Act (FERPA) of 1974

- Applies to educational records - New Exception (December 2008): 34 CFR § 99.36
 - May disclose information to appropriate parties without consent when knowledge of information is necessary to protect the health and safety of a student or other individual, if there is a significant and articulable threat to the health and safety of an individual.
 - Must be directly related to a threat of actual, impending, or imminent emergency
- Prior Exceptions allowed
 - Educational Agencies and Institutions may share information from educational records of at-risk or delinquent youth
 - Court order/subpoena or criminal investigations
 - School officials where students is enrolled or seeks to enroll

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What is an Educational Record?

Education Records	Not Education Records
Transcripts	Records that are kept in the sole possession of the maker and used only as personal memory aids
Disciplinary records	Law enforcement unit records
Standardized test results	Grades on peer-graded papers before they are collected and recorded by a teacher
Health (including mental health) and family history records	Records created or received by a school after an individual is no longer in attendance and that are not directly related to the individual's attendance at the school
Records on services provided to students under the <i>Individuals with Disabilities Education Act (IDEA)</i>	Employee records that relate exclusively to an individual in that individual's capacity as an employee
Records on services and accommodations provided to students under <i>Section 504 of the Rehabilitation Act of 1973</i> and <i>Title II of the ADA</i>	Information obtained through a school official's personal knowledge or observation and not

Source: US Dept of Ed (2013)

Legal Issues: 1994 FERPA Amendments Regarding Staff and Records

- Disciplinary action may be kept in student records if the behavior posed a significant risk to the safety and well being of that student, other students or staff.
- This information may be disclosed to staff who have legitimate educational interest in the behavior of the student.

FERPA Resources:
<http://www2.ed.gov/policy/gen/guid/fpco/ferpa/safeschools/index.html>
<http://www2.ed.gov/policy/gen/guid/fpco/index.html>
<http://www.pent.ca.gov/thr/ferpa.html>

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Legal Issues: Duty to Warn

- When a student is a danger to self or others there is a duty to warn.
 - Tarasoff v. Regents of the University of California



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Legal Issues: Foreseeability & Negligence

- If a child writes or talks in a threatening manner (harm to self and/or harm to others), adults should be able to *foresee* potential safety issues.
- It is *negligent* on the part of the school not to notify parents or guardians or potential victim when students are known to be dangerous.
- It is also *negligent* not to supervise the student closely.
- Negligent* to not provide staff training in regards to identification, reporting, intervening/supervision, and parent notification
 - Courts have required schools to produce records of staff training on suicide prevention
 - Immunity: school professional's can be sued for failing to protect students even if district has been found to have immunity from such a lawsuit

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Erbacher, Singer, Poland(2015)

Legal Issues: Threats

Biom v Fulton County SD (July 31, 2007):

Georgia school district did not violate student's right to free speech when they suspended her for writing a narrative about shooting her math teacher; also not entitled to expunge incident from her school records

Wisniewski v. Bd. of Educ. of Weedsport Cent. SD (July 5, 2007):

Upheld suspension of a student who created an instant message (IM) icon depicting his teacher being shot

Francisco T. vs. the People, CA Solano County (Super. Ct. No. J41032, Nov 2011)

Student had no First Amendment defense to making threats to a teacher and principal; a true-threat analysis consists of more than just the actual language spoken; threat analysis focuses heavily on context; any threatening gestures, physical behavior and other aggressive action will be factored into the equation in court.

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Legal Issues: Threats

Pace v. Talley (Nov. 21, 2006):

Louisiana high school did not violate a student's constitutional rights by reporting the alleged threat of school violence to law enforcement without first affording the student an opportunity to respond to the accusation (did not violate confidentiality)

Shuman v. Penn Manor SD (Sept 7, 2005):

School did not violate student's 4th Amendment protections against search and seizure when they detained him in a conference room for several hours while they investigated sexual misconduct

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Legal Issues: Suicide

- **Rogers v. Chistina School District, 2013**
 - Delaware Supreme court ruled that the school district is not liable under the state's Wrongful Death Statute for a suicide that occurred off campus; however the parents have a valid negligence per se claim against the district for failure to notify parent/guardian of the student's crisis situation
- **Wagon Mound Public Schools, District of New Mexico, 1998**
 - Must notify parents when child suicidal, and train school officials to handle violent/suicidal students
- **Wyke V. Polk County School Board, 1997**
 - School districts must offer suicide prevention programs, adequate supervision of suicidal students, and notify parents when children are suicidal.
- **Eisel V. Board of Education of Montgomery County, 1991**
 - Even if student denies suicidal intent, and collaborative teams suspects otherwise--obligation is to notify parents.
- **Kelson v. The City of Springfield, 1985**
 - Held that parent of a deceased child could bring action against the school because his death allegedly resulted from inadequate staff training in suicide intervention.

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Bullying/Cyberbullying – New Issues, Few Answers

- In past year, multiple suicides across country allegedly linked to bullying
- 49 states have anti-bullying legislation and require a school policy (exception: Montana)
 - 20 include cyberbullying; 48 include electronic harassment
 - Fewer than ½ offer guidance on if schools can intervene (especially if outside schools hrs.)
- Balancing act of free speech, school searches, and safety
 - Supreme Court has not addressed student online speech
- Court rulings have not been consistent

U.S. Department of Education, Office of Planning, Evaluation and Policy Development, Policy and Program Studies Service, *Analysis of State Bullying Laws and Policies*, Washington, D.C. 2011.; <http://www2.ed.gov/policy/elsec/elsec/brl/brl-2011010.html>

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Office of Civil Rights (OCR)

Some misconduct can trigger federal antidiscrimination law(s)

- "School districts **may violate these civil rights statutes and the Department's implementing regulations** when peer harassment based on race, color, national origin, sex, or disability is sufficiently serious that it creates a hostile environment and such harassment is encouraged, tolerated, not adequately addressed, or ignored by school employees."
 - Harassment **does not** have to specifically include intent to harm, be directed at a specific target, or involve repeated incidents.
- Schools must do more than take prompt and effective steps reasonably calculated to end the harassment.
 - must also **"eliminate any hostile environment and its effects, and prevent the harassment from occurring."**

Office of Civil Rights, Dear Colleague Letter Harassment and Bullying. (October 26, 2010) <http://www2.ed.gov/ocr/departmental/departmental/departmental-2011010.html>

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Legal Cases: Bullying & Suicide

- Witsell et al. v. School Board of Hillsborough (2011)
 - Student completed after signing no-harm contract; parents not notified of cutting and suicidal ideations; victim of teasing, bullying, harassment; signed no-harm contract
 - School board argued not responsible for an employee who did not follow policy
- The Estate of Montana Lance et al. v. Kyer et al (2011)
 - 9 year old special education student (ED, LD, speech impediment) subjected to bullying; hung self in school bathroom
 - Claimed school failed in duty to protect and provide safe environment; failed to provide staff training on policies procedures, and trainings on how to work with him and protect from bullying

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Legal & Ethical Implications for Schools & Professionals

- No Maleficence/Do No Harm
- Competence
- Confidentiality & Exceptions
- Notifying Parents
 - Transfer of Responsibility to Parents
- Providing appropriate postvention response

Erbacher, Singer, Poland(2015)

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Protect Self from Liability Issues

1. Maintain liability insurance
2. Seek supervision/consultation from colleagues
 - DOCUMENT, DOCUMENT, DOCUMENT!!!!
 - Keep good records!
3. Document crisis trainings
 - Mandate attendance - document dates and attendance
4. Provide best practices
 - Prevention, intervention, postvention
 - Make appropriate referrals!
5. Contact and involve parents!

Erbacher, Singer, Poland(2015)

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Legal Issues

- DOCUMENT, DOCUMENT, DOCUMENT!!!!
- Make appropriate referrals!
- Secure assistance from others!
- Involve parents!

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Legal Issues:

Establish a Clear District-Wide Policy

- Specific, well-articulated procedures for exploring allegations of actual or potential violence/self-harm.
 - Require prompt, discrete, and responsible action on the part of school officials.
- The policy should include protocols for:
 - Assigning and training the risk assessment team
 - Evaluating and interviewing the potential offender
 - Notifying and working with parents
 - Interviewing other students and staff
 - Determining the level of intervention required
 - Bringing in additional professionals (e.g., mental health, social service, law enforcement)
 - Providing follow-up observation and services
 - Responding to media should the need arise

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Biggest Myth

It won't happen here.



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U.S. K-12 - School Killings

- | | |
|---|---|
| □ October 24, 2014 – Marysville, WA | □ March 30, 2001 – Gary, IN |
| □ December 13, 2013 – Centennial, CO | □ March 5, 2001 – Santee, CA |
| □ October 21, 2013 – Sparks, NV | □ May 26, 2000 – Lake Worth, FL |
| □ December 14, 2012 – Newtown, CT | □ February 29, 2000 – Mount Morris Township, MI |
| □ March 6, 2012 – Jacksonville, FL | □ November 19, 1999 – Deming, NM |
| □ August 27, 2012 – Baltimore, MD | □ May 20, 1999 – Conyers, GA |
| □ February 27, 2012 – Chardon, OH | □ April 20, 1999 – Littleton, CO |
| □ January 5, 2011 – Houston, TX | □ May 21, 1998 – Springfield, OR |
| □ January 5, 2011 – Omaha, NE | □ May 19, 1998 – Fayetteville, TN |
| □ February 5, 2010 – Madison, AL | □ April 24, 1998 – Edinboro, PA |
| □ November 12, 2008 – Ft. Lauderdale, FL | □ March 24, 1998 – Jonesboro, AR |
| □ February 12, 2008 – Oxnard, CA | □ December 1, 1997 – West Paducah, KY |
| □ January 3, 2007 – Tacoma, WA | □ October 1, 1997 – Pearl, MS |
| □ October 10, 2007 – Cleveland, OH | □ February 19, 1997 – Bethel, AK |
| □ October 2, 2006 – Paradise/Nickel Mines, PA | □ Feb 2, 1996 – Moses Lake, WA |
| □ September 29, 2006 – Cazenovia, WI | □ May 1, 1992 – Olivehurst, CA |
| □ September 27, 2006 – Bailey, CO | □ January 17, 1989 – Stockton, CA |
| □ November 8, 2005 – Jacksonboro, TN | □ September 26, 1988 – Greenwood, SC |
| □ March 21, 2005 – Red Lakes, MN | □ May 20, 1988 – Winnetka, IL |
| □ September 24, 2003 – Cold Spring, MN | □ Feb 11, 1988 – Pinellas Park, FL |
| □ April 24, 2003 – Red Lion, PA | □ January 29, 1979 – San Diego, CA |

*only includes school shootings, non-gang related

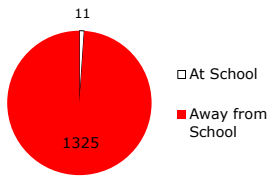
Source: Time Line of Worldwide School Shootings – <http://www.infoplease.com/ipa/A0777958.html>

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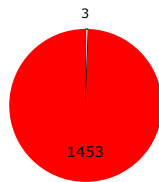
Schools Are Safe Places

Indicators of School Crime & Safety: 2013

Homicides; 2010/2011



Suicides; 2010/2011



"At school" includes on school property, on the way to or from regular sessions at school, and while attending or traveling to or from a school-sponsored event.

Robers, S., Kemp, J., Rathbun, A. Morgan, R.E. & Snyder, T.D. (2014, June). *Indicators of school crime and safety: 2013* (NCES 2014-042/NCJ 243299). Washington, DC: National Center for Education Statistics, U.S. Department of Education, and Bureau of Justice Statistics, Office of Justice Programs, U.S. Department of Justice. Retrieved from <http://nces.ed.gov/ipeds/data/2014/042.pdf>

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Schools Associated Violent Deaths

Homicide and Suicide at School

- Less than 1% of student homicides/suicides take place at school, on the way to or from school, or at a school sponsored event.
- During the 09/10 school year the odds of a student (age 5-18) being the victim of a school-associated homicide was **one in 4.5 million**.
 - In comparison, the odds of a 5 to 19 year old being killed in a motor vehicle accident in 2010 were 1 in 16,000.
- Schools are safer today than they were a decade ago!
 - 1992/93 to 2000/01 there were a total of 246 school associated student homicides (nine year average of 27 deaths per year)
 - 2001/02 to 2009/10 there were a total of 187 school associated student homicides (nine year average of 21 deaths per year)

Brock, S. E., Nickerson A., & Serwacki, M. (2013, February). *Youth gun violence fact sheet*. Bethesda, MD: National Association of School Psychologists. Retrieved from http://www.nasponline.org/resources/crisis_safety/Youth_Gun_Violence_Fact_Sheet.pdf

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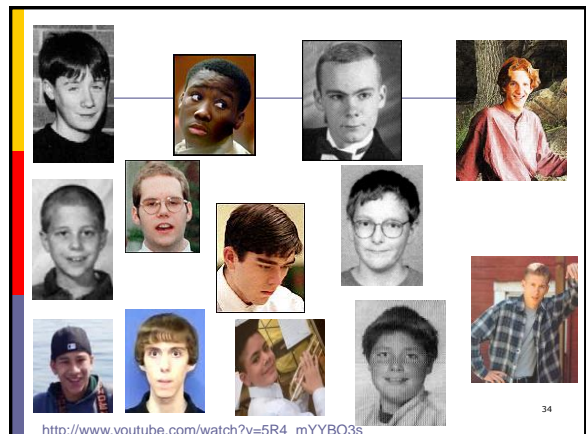
Schools Associated Violent Deaths

Homicide and Suicide at School

- Most school-associated student homicides involve a firearm and a single victim and offender.
- In 80% of school-associated firearm-related homicides and suicides, the weapons used were obtained from the home or from a friend or relative.

Brock, S. E., Nickerson A., & Serwacki, M. (2013, February). *Youth gun violence fact sheet*. Bethesda, MD: National Association of School Psychologists. Retrieved from http://www.nasponline.org/resources/crisis_safety/Youth_Gun_Violence_Fact_Sheet.pdf

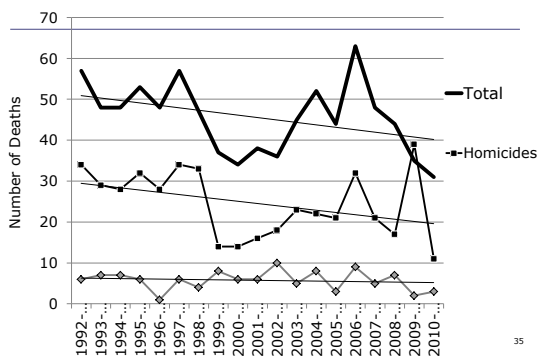
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School Associated Violent Deaths

Indicators of School Crime & Safety: 2013

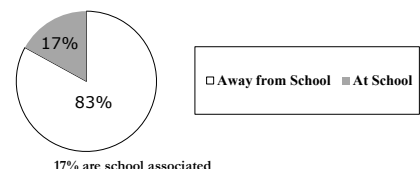


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School Associated Violent Acts

Indicators of School Crime & Safety: 2013

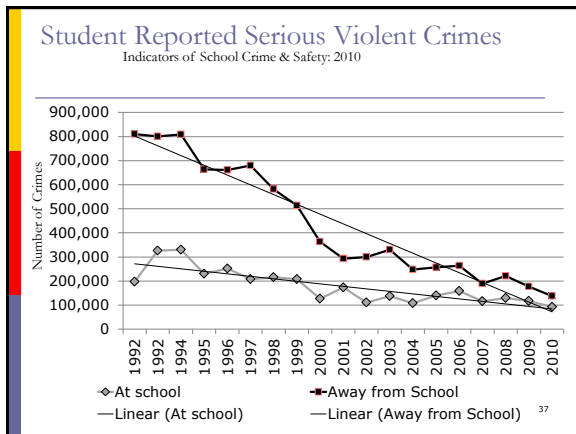
Serious Violent Crimes Against Students Ages 15 to 18



17% are school associated

Serious violent crimes include rape, sexual assault, robbery, & aggravated assault.

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Preventing Violence: 12 Characteristics of Safe Schools

- **Focus on academic achievement**
- Involve families
- Develop community links
- **Emphasize positive relationships**
- **Discuss safety issues openly**
- Treat students with respect
- **Create ways for students to share concerns**
- Help children feel safe expressing feelings
- Promote good citizenship & character
- **Identify problems & assess progress toward solutions**
- Referral system for abused & neglected children
- Extended day programs
- Support students making transition to adult life & workplace



Dwyer, K., Osher, D. & Warger, C. (1998). *Early warning, timely response: A guide to safe schools*. Washington DC: US Department of Education.

Preventing Violence: Creating a Climate of School Safety

- Assess the school's emotional climate
 - Do people in the school community feel safe?
- Respect and Listen
 - All students (and staff) must feel that they are respected (schools as "a shame free zone") & listened to.
- Break the "Code of Silence"
 - Unwritten, but powerful.
 - Encourage communication and change norms (i.e., make it "heroic" to break the code).



Preventing Violence: Creating a Climate of School Safety

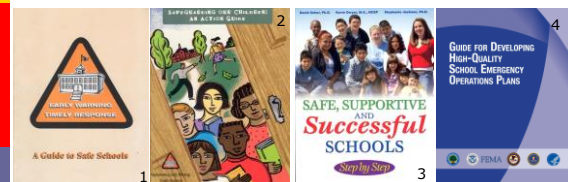
- Stop bullying Video: The Path to Violence
 - Empower students by involving them
 - Especially important for adolescents.
 - Ensure caring adult connections
 - Relationships are a powerful protective factor
 - Connections can easily be assessed
1. Alpha List of student body
 2. Staff place checks on list after names of students to whom they feel "connected."
 3. Emphasize relationships with those who are not checked.



Source: http://www.secretservice.gov/ntac/ssi_guide.pdf

Preventing Violence: Creating a Climate of School Safety

- For further guidance on creating safe school environments refer to



1. <http://www2.ed.gov/about/offices/list/osep/oscep/gtss.html>
2. <http://www2.ed.gov/admins/lead/safety/actguide/index.html>
3. Osher, D., Dwyer, K., & Jackson, S. (2003). *Safe, supportive and successful schools: Step by step*. Longmont, CO: Sopris West. (ISBN 1-57035-918-0)
4. http://rems.ed.gov/docs/REMS_K-12_Guide_508.pdf

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Preventing Violence: Specific Prevention Programs

- Selection requires assessment of unique school needs.
 - Which problems are we likely to face in **OUR** school?
 - What are the primary short-term and long-term objectives of our school violence prevention efforts?
 - Who are the targets of the violence-prevention efforts?
 - Are these prevention efforts organized primarily at the school or district levels?
 - How are the prevention efforts linked to broader, community-level violence initiatives?

Source: Furlong et al. (2002)

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Preventing Violence: Specific Prevention Programs

- While prepackaged programs may work for specific schools with specific needs...
 - They cannot be randomly selected off the shelf and be expected to be beneficial.
 - Knowing who you want violence prevention efforts to target and what aspect(s) of school violence you are most interested in preventing will be a first step in program selection.

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Preventing Violence: Risk Factor Reduction



Restriction of Lethal Means: Gun Control

TABLE 1. Number and percentage of firearms used by student perpetrators in all school-associated, firearm-related events and firearm-related suicide and homicide events, by source of firearm — United States, 1992–1999*

Source	Firearms used in suicide events		Firearms used in homicide events		Total	
	No.	(%)	No.	(%)	No.	(%)
Home of perpetrator	26	(76.5)	22	(23.4)	48	(37.5)
Friend/relative of perpetrator	4	(11.8)	26	(27.6)	30	(23.4)
Purchased	0	(0.0)	9	(9.6)	9	(7.0)
Stolen	2	(5.9)	5	(5.3)	7	(5.5)
Victim	—	—	2	(2.1)	2	(1.6)
Other	0	(0.0)	3	(3.2)	3	(2.3)
Unknown	2	(5.9)	27	(28.7)	29	(22.7)
Total	34		94		128	

*Firearms used by perpetrators who committed a homicide and then killed themselves as part of a homicide-suicide event were included in analyses of firearms used by homicide perpetrators.

Source: <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5209a1.htm>

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What is Risk Assessment?

- A process for assessing, intervening and managing a threat.
- The process is centered upon analysis of facts and evidence.
- Focuses on actions, communications, and specific circumstances that might suggest an intent to commit a violent act.
- It also includes developing an intervention plan.

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6 Principles of Risk Assessment

1. Targeted violence or threat to self is end result of an understandable process of thinking & behavior
2. Stems from interaction between individual, situation, setting, & target
3. An investigative, skeptical, inquisitive mindset is needed.
4. Based on facts, rather than characteristics or traits
5. "Integrated systems approach" is best
6. Investigate if poses a threat, not whether he/she made a threat

US Secret Service & US Dept. of Ed. (2002)

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Other-Directed Violence Risk Assessment

- Principles to avoid misuse of risk assessment for violence.
 - Do no harm (keep information confidential and use signs to identify the need for interventions, rather than as a punishment tool).
 - Understand that many students show multiple signs and it is important not to overreact.
 - Avoid stereotypes and labeling.
 - Appearances should direct attention not action
 - View student behavior within a developmental context.
 - Developmentally typical behavior should not be misinterpreted



Adapted from Dwyer, Osher, & Warner (1998)

4 Elements to Effective Risk Assessment

1. Establish authority and leadership to conduct an inquiry
2. Develop a multidisciplinary district and/or school based team and provide ongoing training
3. Establish integrated and interagency systems relationships to respond to safety concerns
4. Provide awareness training to students, staff, parents, and community regarding warning signs and reporting procedures

Colorado School Safety Resource Center (2011)

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Inquiry versus Investigation

- Inquiry should be initiated when information about a student's behavior and communications passes an agreed-upon threshold of concern.
 - Conducted by school team
- Investigation is initiated when potential threat is serious (substantive)
 - Conducted by police with school involvement in providing info

The central question in a threat assessment inquiry or investigation is whether a student **poses** a threat, not whether the student has **made a threat.**"

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Limitations of Risk Assessments

(Other-directed violence)

- Protocol based on research of targeted school violence incidents at school (Secret Service, FBI)
 - not a foolproof method
- Are not reliable procedures for incidents of violence motivated by gang involvement, drugs or alcohol, sexual gratification
- Don't provide predictions of future behavior, placement, or eligibility

(Dr.'s Linda Kanan and Ron Lee, 2005)

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Other-Directed Violence Risk Assessment

Finding – U.S. Dept of Ed & Secret Service Report (2002)

- There is no accurate or useful "profile" of students who engaged in targeted school violence.
 1. Attackers come from a variety of family situations.
 2. Attackers differ from one another in academic achievement.
 3. Attackers vary in the types of social relationships they have.
 4. Histories of disciplinary problems at school vary.
 5. Most attackers show no marked change prior to an attack.
 6. A majority of attackers do demonstrate some interest in violence.
 7. Most attackers have no history of prior violent or criminal behavior.



Vossekuil, et al (2002)

Other-Directed Violence Risk Assessment

Findings (Langman, 2015)

- Most school shooters were not victims of bullying
- Only one targeted a student who had bullied
- School shooters targeted school personnel more than any other category of victim
- White males only majority among secondary school shooters (79%)
- Most were not socially isolated loners
- Not always middle class
- Most shootings did not occur in urban settings
- Most not on psychotic medications

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Other-Directed Violence Risk Assessment

- Profiles are not effective
 - Criticisms
 - Unjustly stigmatizes students
 - Information may result in discrimination, invasion of privacy, punishment, isolation, and exclusion from school and activities without due process (rather than as a tool for identifying youths in need of intervention).
- Focus on behavior and communications (not appearances)
 - Appearances may direct our attention, but should not direct our action.
 - Profiling focuses on appearances.
 - Risk assessment focuses on behaviors/communications



Other-Directed Violence Risk Assessment

- Others Typically Have Knowledge of Violent Acts
 - Students are an important part of prevention efforts.
 - Schools must have an effective system for dealing with information brought forward.
 - Positive relationships among students and staff increases the potential for reporting incidents of concern.
 - Do not wait for threats, but begin inquiry if behaviors are evident.
 - Respond to ALL threats.



Other-Directed Violence Risk Assessment

- Most Attacks Were Not Stopped by Law Enforcement
 - Have protocols & procedures for managing threats and other behaviors of concern.
 - We must act quickly.
 - Practice and evaluate crisis procedures routinely.



Risk Factors: Youth Violence

- | | |
|---|---|
| <ul style="list-style-type: none"> □ Social withdrawal □ Isolation, alienation □ Feelings of rejection □ Victim of violence & bullying □ Feelings of being picked on & persecuted □ Low school interest & performance □ Violent expressions in writings and drawings | <ul style="list-style-type: none"> □ Uncontrolled anger □ Patterns of impulsive and chronic hitting, intimidating, and bullying □ History of discipline problems □ History of violence □ Intolerance & prejudice □ Drug & alcohol use □ Affiliation with gangs □ Access & possession of firearms □ Serious threats of violence |
|---|---|

More Recent Events: hallucinations, delusions; social isolation Stressors:

- Significant losses
- Significant disappointments
- Having been bullied
- Associated coping failure

58

Dwyer, K., Osher, D. & Warger, C. (1998). Early warning, timely response: A guide to safe schools. Washington DC: US Department of Education.

IMMINENT WARNING SIGNS



- Suicidal ideation and behaviors
- Gun use/purchase/possession
- Interest in violence
- Hopelessness and despair
- A need for revenge
- Serious physical fighting with peers or family members
- Severe destruction of property
- Severe rage for seemingly minor reasons
- Detailed threats of lethal violence
- "Leakage" – telling friends, warning others, recruiting others, school assignments
- Postings on social media sites

APA/MTV Fight for Your Rights:
"Warning Signs" Video

*These factors MAY signal that a youth is considering acting on thoughts of violence

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"Why Kids Kill" & "School Shooters: Understanding high school, college, and adult perpetrators" by Dr. Peter Langman

3 types of shooters

1. Psychopathic

- Narcissistic - no conscience; sadistic with personality traits
 - Lack capacity for empathy, remorse, guilt
- No regard for social norms, morality, ethics, law
 - Dislike for those who represent authority
- Inability to take responsibility for own behavior
 - Blame victims and paint self as "good guy"
 - Punishment seen as injustice – feel they are being wronged
- Good at "impression management"
 - Charming, witty, charismatic
- Want to be "Godlike"
 - Don't care if they hurt others; often experience euphoria when doing so
- Impervious to fear – nothing fazes them...yet
- Narcissism is fragile, hypersensitive to any perceived slight (paranoid)
- Feel justified in killing those who rejected, failed, or frustrated the gratification of their desires
- 29% of secondary school shooters

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“Why Kids Kill” & “School Shooters: Understanding high school, college, and adult perpetrators” by Dr. Peter Langman

3 types of shooters

2. Psychotic

- Avoidant; schizotypal and dependent personality traits
- Schizophrenia - paranoid delusions, auditory hallucinations
- Depressed and full of rage
- 29% of secondary school shooters

<http://www.cnn.com/2014/06/25/us/minnesota-attack-teen-interview/index.html>

61

“Why Kids Kill” & “School Shooters: Understanding high school, college, and adult perpetrators” by Dr. Peter Langman

3 types of shooters

3. Traumatized

- Suffered emotional and physical abuse at home
- Some sexually abused
- Ongoing stress and losses—parental substance abuse - frequent moves—lost parent to separation, jail and death, trauma history resulted in suicidal thoughts
- Most common type of secondary school shooters (42%)

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“Why Kids Kill” & “School Shooters: Understanding high school, college, and adult perpetrators” by Dr. Peter Langman

□ Patterns Among School Shooters

- Significance of the body
- Military failures
- Educational failures
- Occupational failures
- Romantic failures
- Frequent and significant relocations
- Sibling rivalry (psychotic shooters)

□ Other possible factors:

- Substance use
- History of legal troubles
- Loss of loved one

□ External Influences

- Peer supports
- Ideologies and role models media violence

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Other-Directed Violence Risk Assessment: “CPR”

□ Factors that PREDICT youth violence.

- How immediate is the risk of violent behavior?

□ Current Plan (the greater the planning the greater the concern)

- How?
- How Soon?
- How Prepared?

□ Prior Behavior (breaks down social norms against violence)

- The best predictor of prior behavior is future behavior.
- A personal history of act of aggressive violence
- Personal identification with others who are violent

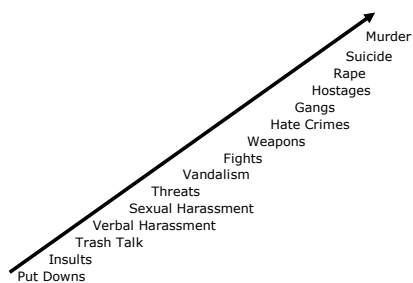
□ Resources

- Lack of connectedness to pro-social role models (especially adults).

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The Violence Continuum

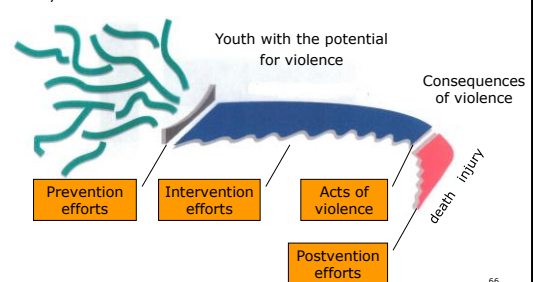
adapted from the National School Safety Center



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Youth Violence: The River Analogy

Factors that lead to youth violence



Adapted from Ramsay, Tanney, Tierney & Lang (1996)

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Assessing Written or Artistic Material



- Understand the context of the writing or drawing
- Ask in detail about the material
- Express concern
- Think of written and artistic material as attempts to practice violence
- Look for themes
- Monitor past & future materials
- Be persistent and specific with questions
- Assess access to or knowledge of weapons
- Triangulate data
- Watch for non-verbal cues
- Share information with team

67

*I have become acquainted with guns
I have used everything from a 9mm to a 12 gauge
I have hit the smallest target quite accurately.*

*I have quickly set up an AK-47
I have killed the smallest, most innocent rabbit
and never stopped to think about it.*

*I have blown away the dumbest deer
and let its body be carried away,
It will never again see the light of day.*

*But, I don't know what I will kill next
I have the urge to kill many things
But some things are off limits to kill.*

*I will blow away whatever runs.
I have become acquainted with guns.*

-9th grade student

I sit here all alone. I am always alone. I don't know who I am. I want to be something I can never be. I try so hard every day. But in the end, I hate myself for what I've become.

*g to me. I hate every part of me. I was alone.
You all make me sick. I wish I was alone.
I am repulsed.*

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Drawings

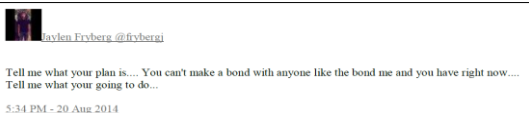
TECHA
I'm concerned
???

I will hunt you down
and put a hole in your
head, with explosives
You hear me, Power
to the Shampoo.
RIP
++
you
must
DIE.

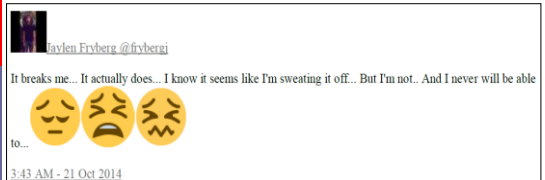
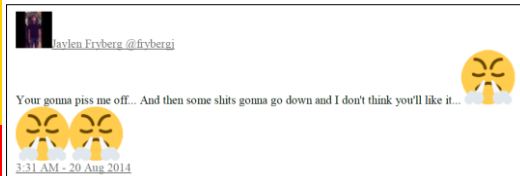
70

Tweets

Jaylen Fryberg-
Marysville, WA



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Structured Assessment of Violence Risk in Youth™ SAVRY™ (2006)

Singh, J.P., Grann, M., & Fazel, S. (2011).

A comparative study of violence risk assessment tools: A systematic review and meta-regression analysis of 68 studies involving 25,980 participants. *Clinical Psychology Review*, 31,499-513.

McGowan M.R., Horn, R.A., Mellott, R.N. (2011). The predictive validity of the Structured Assessment of Violence Risk in Youth in secondary educational settings. *Psychological Assessment*, 23(2):478-86. doi: 10.1037/a0022304.

- SAVRY produced the highest rates of predictive validity to predict violent risk in juveniles
 - Correctly classified 82% of those adolescents who were nonviolent and 45% of those adolescents who were violent.
 - These results build on previous research and provide support for the use of the SAVRY in educational settings for identification as well as directing intervention efforts
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Structured Assessment of Violence Risk in Youth™ SAVRY™ (2006)

- **Age range:** 12 to 18 years
 - **Admin time:** 10-15 minutes to administer
 - **Scoring time:** 10 minutes
 - Considers developmental factors [Handout: SAVRY Model](#)
 - Emphasizes dynamic and contextual nature of risk
 - 24 risk factors: historical, social/contextual, individual
 - Rate low/moderate/high
 - 6 protective factors: coded either present or absent
 - Assesses protective factors
 - Not a formal test or scale
 - Summary rating risk: low, moderate high
 - Use as an aide or guide
 - Informal surveying
- 75



Other-Directed Violence Risk Assessment: Nicoletti-Spencer-Thomas Model

Practicing Violence

- There will always be practice sessions.
 - Practice sessions involve pushing the edge of the envelope.
- Are they:
 - Normal behaviors
 - Boundary probing behaviors
 - Attack related behaviors
 - Involve dehumanization/desensitization
 - Attach behaviors
- Practice sessions will increase when there are no interventions (trees).
- When a tree is placed after a practice session, they either back off, go over it, or go around it.

Nicoletti, J (2007) Managing Threats in Schools; Nicoletti, J. & Spencer-Thomas, S. (2002) *Violence goes to school*. Bloomington, IN: National Educational Service.

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Other-Directed Violence Risk Assessment: Nicoletti-Spencer-Thomas Model

- **Vortex of Information**
 - Vortex = knowledge base
 - Need to centralize information
 - Track incidences and responses over time
 - Threat assessment is not a one time process
 - Determine patterns of behavior
 - Clear and consistent procedures for reporting concerns among schools
 - Must be supported by awareness and reporting training

Nicoletti, J (2007) Managing Threats in Schools; Nicoletti, J. & Spencer-Thomas, S. (2002) *Violence goes to school*. Bloomington, IN: National Educational Service..

Other-Directed Violence Risk Assessment: Nicoletti-Spencer-Thomas Model

- **Types of Trees**
 - Questioning
 - Confronting
 - Consequences
- **Other Interventions**
 - Treatment, Monitoring, Protection



Nicoletti, J (2007) Managing Threats in Schools; Nicoletti, J. & Spencer-Thomas, S. (2002) *Violence goes to school*. Bloomington, IN: National Educational Service..

Other-Directed Violence Risk Assessment: *Nicoletti-Spencer-Thomas Model*

□ Evaluating Risk

- Time
- Opportunity
- Ability
- Desire
- Stimulus

Nicoletti, J (2007) *Managing Threats in Schools*; Nicoletti, J. & Spencer-Thomas, S. (2002) *Violence goes to school*. Bloomington, IN: National Educational Service..

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Other-Directed Violence Risk Assessment: *The Virginia Model* (Cornell & Sheras)

□ Interview guidance

- Advocates for a team approach
- Uses U.S. Secret Service recommendations
- 7 step process
- Transient threats
 - Not serious and readily resolved, often expressions of frustration and anger
 - May not need involvement of full team
- Substantive threats
 - serious, intent to harm
- Listed in the federal government's National Registry of Evidence-based Programs and Practices.



[Handout: Flowchart of Model](#)

Cornell, D.G & Sheras, P.L. (2006). *Guidelines for responding to student threats of violence*. <http://curry.virginia.edu/research/projects/threat-assessment/guidelines-for-responding-to-student-threats-of-violence>

The Virginia Model

□ Transient Threats:

- "I'm gonna kill you...Ha!Ha!Ha! JK
- Two students use their finger to shoot each other at recess while playing cops and robbers
- "I'm going to bust you up." – retracts after calms down

□ Substantive Threats:

- "I'm gonna kill you." – with intent to injure
- "I'm gonna bust you up" – but does not retract
- "I'll get you next time." – does not retract and refuses to problem solve; shows no remorse

□ Presumptive Indicators of a Substantive Threat

- specific, plausible details, repeated, reported to others, invited others to help and/or observe, intent to carry out and means to do so

Cornell & Sheras (2006)

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Recent study results: *Virginia Student Threat Assessment Guidelines*

□ Those students where threat assessment guidelines were implemented (vs.. control group) were:

- More likely to receive counseling services and a parent conference
 - Counseling = 56% (intervention) vs. 25% (control)
 - Conference = 75% (intervention) vs. 55% (control)
- Less likely to receive long-term suspension or alternative placement
 - LT suspension = 25% (intervention) vs. 49% (control)
 - Alternative placement = 4% (intervention) vs. 20% (control)
- Staff received a one-day workshop on threat assessment and implementation of guidelines
- Consistent with PBS models – not just reactive
- Focus on resolving and preventing – not just prediction

Cornell, D. G., Allen, K., & Fan, X. (2012). A randomized control study of the Virginia Student Threat Assessment Guidelines in kindergarten through grade 12. *School Psychology Review*, 41(1), 100-115.

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Other-Directed Violence Risk Assessment: *Dallas Violence Risk Assessment*

□ Designed before Safe School Initiative published

□ Assesses:

- Viability/feasibility of plan
- Prior academic, social, behavioral, and MH histories
- Group affiliation
- Empathy, remorse
- Interpersonal skills
- Alcohol/drug use
- Exposure to violence and abuse

[Handout: Dallas Model Worksheet](#)

□ Reliability and validity uncertain

Dallas Independent School District

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Other-Directed Violence Risk Assessment: *Secret Service Threat-Assessment Model*



- Focuses on the facts of a specific case
- Examines the progression of ideas and planning behavior over time
- Corroborates information through multiple sources.
- Cased on three guiding principles.

Adapted from Borum (2000); Fein and Vossekuil (1998); Vossekuil et al. (2000).

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Other-Directed Violence Risk Assessment: *Secret Service Threat-Assessment Model*

Three guiding principles

1. There is no single type of perpetrator.
 - Instead, targeted violence is perceived as the interaction of perpetrator, setting, situation, and the target.
2. There is a distinction between posing a threat and making a threat.
 - Many individuals who pose a threat will not make a threat before the attack.
 - Conversely, many individuals who make a threat may pose no harm.
3. Targeted violence is often a product of an understandable and often discernable pattern of behavior and thinking.
 - It is not random or spontaneous.

Adapted from Borum (2000); Fein and Vossekuil (1998), Vossekuil et al. (2000).

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Other-Directed Violence Risk Assessment: *Secret Service Threat-Assessment Model*

Questions to ask during a student interview

1. Identify possible stressors.
2. Identify thoughts of revenge.
3. Identify experiences with/attitudes toward weapons.
4. Explore history of/attitudes toward violence.
5. Identify signs of depression, helplessness, and/or hopelessness.
6. Identify suicidal ideation.
7. Identify homicidal ideation.
8. Explore motivations for violence.
9. Identify additional psychiatric disorders.
10. Identify possible helping resources.

[Handout: Threat Assessment Questions](#)

Adapted from Borum (2000); Fein and Vossekuil (1998), Vossekuil et al. (2000).

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Other-Directed Violence Risk Assessment: *Secret Service Threat-Assessment Model*

Questions for Others

1. For family and/or friends:
 - Has the student at risk told you of any ideas or plan to commit a violent act against the school?
 - Against any specific person(s)? If so, describe these ideas/plans.
 - Has he or she taken any steps to act on these ideas/plans?
2. For school staff, family and/or friends:
 - How organized is the student at risk?
 - How capable do you think he/she is of acting on his/her ideas?
 - How concerned do you think staff and family should be about the safety of the target(s)?

Adapted from Borum (2000); Fein and Vossekuil (1998), Vossekuil et al. (2000).

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Other-Directed Violence Risk Assessment: *Secret Service Threat-Assessment Model*

Questions for Others

3. For identified target:
 - How well do you know the student at risk of violence?
 - How well does this person know your work and personal lifestyle patterns?
 - What changes could make an attack less likely?
 - How seriously do you take this threat of potential attack?
 - How concerned are you about your safety?
 - It is infrequent (less than 25% of cases) for direct threats to be made to the intended victims.

Adapted from Borum (2000); Fein and Vossekuil (1998), Vossekuil et al. (2000).

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Other-Directed Violence Risk Assessment: *Secret Service Threat-Assessment Model*

Other Assessment Procedures

- Review the following student data for at-risk students:
 - group achievement test scores
 - test scores from local district assessment measures
 - attendance records
 - discipline records
 - language proficiency status
 - school history
- Analyze the academic instruction across subject areas and suggest modifications if needed.
- Develop a behavior contract if needed.
- Develop a plan to improve attendance if needed.

Adapted from Borum (2000); Fein and Vossekuil (1998), Vossekuil et al. (2000).

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Other-Directed Violence Risk Assessment

Levels of Risk

Low Risk

Vague, indirect threat.

Threat lacks detail, is inconsistent, or implausible.

Threat lacks realism.

Content suggests person is unlikely to carry it out.

Medium Risk

Threat is more direct and more concrete.

Wording suggests some thought as to how act will be carried out.

May be indication of time, place, but no detailed plan.

No strong indication that preparatory steps have been taken. May have general statement about availability of weapons. May have specific statement to convey threat is not empty.

High Risk

Threat is direct, specific and plausible.

Threat suggests that steps have been taken toward carrying it out.

Statements include acquiring or practicing with weapons.

[Violence/Harm toward Others Screening Summary Worksheet](#)

M.E. (2000, August). The school shooter: A threat assessment perspective. Federal Bureau of Investigation, U.S. Department of Justice. Available:www.fbi.gov

Danger/Threat Assessments (DA's) are NOT Manifestation Determination Reviews (MDR's)

MDR's	DA's
MDR's focus on the student's special ed. needs and services as it relates to a specific event	DA's review the student's patterns of dangerous behaviors and the school's past interventions
MDR's determine whether or not a student's specific act was a manifestation of the student's identified area of disability	DA's determine the level of concern regarding a student's overall pattern of behavior
MDR's may lead to changes in service/placement or to expulsion hearing	DA's focus on <i>preventative planning</i> in a specific setting to reduce risk

Kanan & Lee (2005)

Danger/Threat Assessments are NOT Expulsion Hearings

Expulsion Hearing	Danger/Threat Assessments
Expulsion hearings determine whether or not a specific behavior violated school policy	Danger assessments assess levels of concern regarding a student's pattern of behavior over time
Expulsion hearings determine whether or not a student should be expelled	Danger assessments lead to <i>preventative</i> planning for safety in a specific placement to reduce risk

Kanan & Lee (2005)

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Workshop Outline

- Introduction
- Legal Issues
- Threat Assessment: Other-Directed Violence
 - Violence Statistics
 - Primary Prevention of School Violence
 - Risk Assessment
- Suicide Assessment: Self-Directed Violence
 - Suicide Statistics
 - Primary Prevention of Youth Suicide
 - Risk Assessment
- Intervention, Referral, & Postvention
- Conclusion

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Statistics & Demographics

- Magnitude of the problem
 - Suicidal SDV
 - 10-14 yr olds = 3rd leading cause of death
 - 15-19 yr olds = 2nd leading cause of death
 - Across age groups = 10th leading cause of death
 - Suicidal SDV among high school students in 2013¹
 - 17.0% seriously considered suicide
 - 13.6% made a suicide plan
 - 8.0% attempted suicide
 - 2.7% attempt required medical attention
 - 100 to 200 attempts for each completed suicide.²

¹Kann et al. (2014); ²Drapeau & McIntosh (2015)

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Statistics & Demographics (2013 National Data)

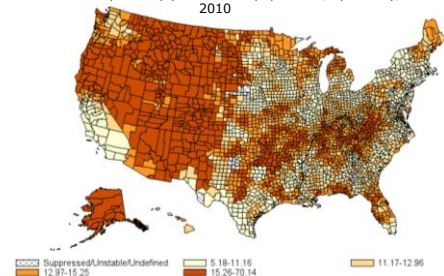
- Total number of suicide deaths in 2013 = 41,149
 - 10th leading cause of death
- More men die by suicide
 - Gender ratio 3.5 male suicides (N = 32,055) for each females suicide (N = 9,094)
- Suicide Rate = 13 per 100,000 (males, 20.6; females, 5.7)
- 51.4% of suicides were by firearms.^{1,2}
 - Suicide by firearms rate = 6.7
 - Suicide by firearms rate (15-19 yrs) = 3.49
 - Suicide by firearms rate (15-19 yrs male) = 5.98
 - Suicide by firearms rate (15-19 yrs female) = 0.87
- Highest suicide rate is among white men over 85 (52.62 per 100,000 vs. 12.45 per 100,000¹ among 15-19 year olds).

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CDC, 2015

Statistics & Demographics

US Suicide Rates by County per 100,000 population, by County, 2004-2010



CDC (2015)

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Statistics & Demographics (2013 rankings)

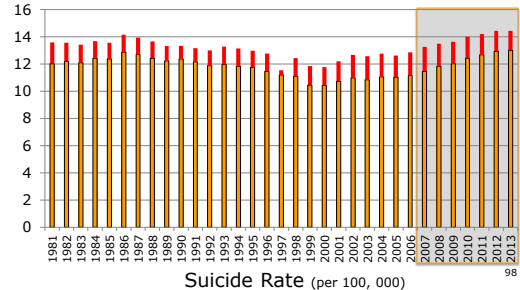
Rank	State	N	Rate
1	Montana	243	23.94
2	Alaska	171	23.26
3	Wyoming	129	22.14
4	New Mexico	431	20.67
5	Utah	579	19.96
6	Nevada	541	19.39
7	Colorado	1007	19.11
8	Idaho	308	19.11
9	Maine	245	18.44
10	Vermont	112	17.87
26	South Carolina	696	14.58
31	Ohio	1526	13.19
34	North Carolina	1284	13.04
National Total		41,149	11.0

CDC (2015)

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Statistics & Demographics

US Suicide Rate (& Undetermined Intent; 1981-2013)

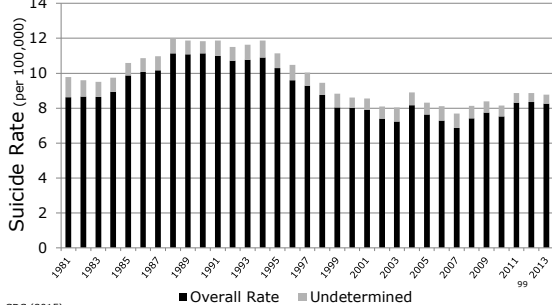


CDC (2015)

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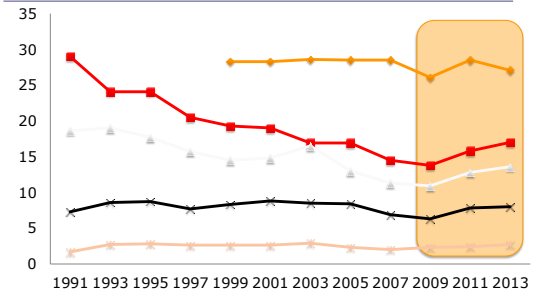
Statistics & Demographics

Teen Suicide Rates (& Undetermined Intent): 1981-2013 (15-19 yrs)



CDC (2015)

High School Students who Display Suicidal Behaviors



Youth Risk Behavior Survey (2014)

Workshop Outline

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 - Risk Assessment
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 - Suicide Statistics
 - Primary Prevention of Youth Suicide
 - Risk Assessment
- Intervention, Referral, & Postvention
- Conclusion

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Suicide Prevention: Suicide Prevention Policy

It is the policy of the Governing Board that all staff members learn how to recognize students at risk, to identify warning signs of suicide, to take preventive precautions, and to report suicide threats to the appropriate parental and professional authorities.

Administration shall ensure that all staff members have been issued a copy of the District's suicide prevention policy and procedures. All staff members are responsible for knowing and acting upon them.

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Suicide Prevention: Suicide Prevention Policy

MODEL SCHOOL
DISTRICT POLICY
ON SUICIDE
PREVENTION
Model Language,
Commentary, and
Resources



<http://www.thetrevorproject.org/pages/modelschoolpolicy>

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Suicide Prevention: Suicide Prevention Curriculum



□ SOS: Depression Screening and Suicide Prevention

- <http://shop.mentalhealthscreening.org/collections/youth-programs>
- "The main teaching tool of the SOS program is a video that teaches students how to identify symptoms of depression and suicidality in themselves or their friends and encourages help-seeking. The program's primary objectives are to educate teens that depression is a treatable illness and to equip them to respond to a potential suicide in a friend or family member using the SOS technique. SOS is an action-oriented approach instructing students how to **ACT** (Acknowledge, Care and Tell) in the face of this mental health emergency."



SOS Signs of Suicide@
High School Program
\$395



SOS Signs of Suicide@
Middle School Program
\$395

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Suicide Prevention: Suicide Prevention Curriculum



□ SOS: Depression Screening and Suicide Prevention

- <http://shop.mentalhealthscreening.org/collections/youth-programs>
- Evidenced based!

RESEARCH AND PRACTICE

An Outcome Evaluation of the SOS Suicide Prevention Program

Robert H. Aultman, J. PhD, and Robert DeMartino, MD

Suicide among young people is one of the most serious public health problems in the United States. According to the National Center for Health Statistics, the suicide rate for youths and young adults aged 15 to 24 years has tripled since 1990, and suicide is now the third leading cause of death in this age group.¹² Recent studies indicate that the incidence of suicide is rising among adolescents and young adults.¹³ Although it is difficult to obtain reliable estimates because of the accompanying stigma associated with attempting suicide, a number of diverse approaches to suicide-

prevention. We examined the effectiveness of the Signs of Suicide (SOS) prevention program in reducing suicidal behavior. Methods: Twenty-five hundred students in 8 high schools in Columbus, Ga, and Marietta, Ga, were randomly assigned to intervention and control groups. Self-administered questionnaires were completed by students in both groups approximately 3 months after program implementation. Results: Significantly lower rates of suicide attempts and greater knowledge and more adaptive attitudes about depression and suicide were observed among students in the intervention group. The greatest changes in knowledge and attitudes partially explained the beneficial effects of the program. Conclusions: SOS is the first school-based suicide prevention program to demonstrate significant reductions in self-reported suicide attempts. (Am J Public Health. 2004;94:446-451)

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Aseltine & DeMartino (2004)

Suicide Prevention: Suicide Prevention Screening

□ School-wide Screening

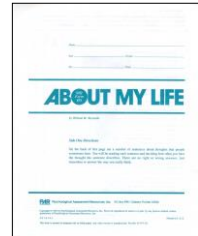
- Very few false negatives
- Many false positives
 - Requires second-stage evaluation

□ Limitations

- Risk waxes and wanes
- Principals' view of acceptability
- Requires effective referral procedures

□ Possible Tool

- Suicidal Ideation Questionnaire
- Author: William Reynolds
- Publisher: Psychological Assessment Resources



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Gould & Kramer (2001)

Suicide Prevention: Suicide Prevention: Gatekeeper Training

- Training natural community caregivers
 - (e.g., Suicide Intervention Training)

□ Advantages

- Reduced risk of imitation
- Expands community support systems

□ Research is limited but promising

- Durable changes in attitudes, knowledge, intervention skills

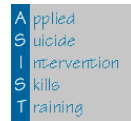
Gould & Kramer (2001)

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Suicide Prevention: Suicide Prevention: Gatekeeper Training

A Specific Training Program:

- Applied Suicide Intervention Skills Training
 - Author: Ramsay, Tanne, Tierney, & Lang
 - Publisher: LivingWorks Education, Inc
 - 1-403-209-0242
 - <http://www.livingworks.net/>



- The ASIST workshop (formerly the Suicide Intervention Workshop) is for caregivers who want to feel more comfortable, confident and competent in helping to prevent the immediate risk of suicide. Over 200,000 caregivers have participated in this two-day, highly interactive, practical, practice-oriented workshop.

- Training for Trainers is a (minimum) five-day course that prepares local resource persons to be trainers of the ASIST workshop. Around the world, there is a network of 1000 active, registered trainers.

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Suicide Prevention:

Hotlines

- Rationale
 - Suicidal ideation is associated with crisis
 - Suicidal ideation is associated with ambivalence
 - Special training is required to respond to "cries for help"
- Likely benefit those who use them
- Limitations
 - Limited research regarding effectiveness
 - Few youth use hotlines
 - Youth are less likely to be aware of hotlines
 - Highest risk youth are least likely to use

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Gould & Kramer (2001)

Suicide Prevention:

Hotlines

Washington Unified School District Suicide Help Card

- Stay with the person - you are their lifeline!
- Listen, really listen. Take them seriously!
- Get, or call help immediately!

24 Hour Crisis Helpline
(530) 666-7778 (Woodland)
(530) 756-5000 (Davis)



Suicide Help Card

If some one you know threatens suicide, talks about wanting to die, shows changes in behavior, appearance, or mood, abuses drugs or alcohol, deliberately injures themselves, appears depressed, sad, or withdrawn... You can help by staying calm and listening, being accepting and not judging, asking if they have suicidal thoughts, taking threats seriously, and not swearing secrecy - tell someone!

**Get help: You can't do it alone: Yolo County Mental Health
Mobile Crisis Unit-Suicide Prevention Counseling
(916) 357-6250**

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Suicide Prevention:

Hotlines

- Texting is the preferred mode of communication for teens and young adults
 - Crisis Text Line
 - CTL is the first nationwide, free, 24/7 text hotline for teens in crisis. Text "FB" to 741741 to chat with a compassionate, trained counselor.
 - <http://www.crisistextline.org/>
 - Teen Line
 - Teens helping teens
 - <https://teenlineonline.org/>

CRISIS TEXT LINE |



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Swearer et al. (2015)

Suicide Prevention:

Risk Factor Reduction

- Media Education
- Postvention
- Skills Training
- Restriction of Lethal Means
 - $r = .76$ (% of firearms in home & suicide rate)
 - $r = .56$ (% of firearms in home & youth suicide rate)
 - States with a higher percentage of firearms in the home tend to have higher suicide rates.
 - Wyoming has the most homes with guns (62.8%) and consistently has one of the highest suicide rates (#1 in 2012, #3 in 2013).
 - Washington, D.C. has the fewest homes with guns (5.2%) and has the lowest suicide rate (5.88 per 100,000) in the nation.



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Suicide Prevention:

Risk Factor Reduction

Number and Percent of Firearms Used in School-Associated Suicide, by Source of Firearm

Source of Firearm	Number	Percent
Home of Victim	26	76.5%
Friend/Relative of Victim	4	11.8%
Purchased	0	00.0%
Stolen	2	05.9%
Unknown	2	05.9%

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Reza et al. (2003)

Workshop Outline

- Introduction
- Legal Issues
- Threat Assessment: Other-Directed Violence
 - Violence Statistics
 - Primary Prevention of School Violence
 - Risk Assessment
- Suicide Assessment: Self-Directed Violence
 - Suicide Statistics
 - Primary Prevention of Youth Suicide
 - Risk Assessment
- Intervention, Referral, & Postvention
- Conclusion

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School-Based Suicide Intervention

- General Staff Procedures for Responding to a Suicide Threat
 - The actions all school staff members are responsible for knowing and taking whenever suicide warning signs are displayed.
- Mental Health Professional Risk Assessment and Referral Procedures
 - The actions taken by school staff members trained in suicide risk assessment and intervention.

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Suicide Risk Assessment

- Risk Factors
 - Mental disorders
 - 90+% of suicide victims have a mental disorder
 - Exacerbating factors
 - A small minority of the mentally ill commit suicide
 - Social stressors
 - The "straw that breaks the camel's back"
 - Personal vulnerability
 - Isolation and aloneness

[Handout: Risk Factors](#)

Klott (2012)

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Risk Assessment & Referral:

Risk Factors for Suicide

- | | |
|--|---|
| □ Adolescence and late life | □ Divorced, separated, or single marital status |
| □ Bisexual or homosexual gender identity | □ Early loss or separation from parents |
| □ Criminal behavior | □ Family history of suicide |
| □ Cultural sanctions for suicide | □ Hallucinations |
| □ Delusions | □ Homicide |
| □ Disposition of personal property | □ Hopelessness |
| | □ Hypochondriasis |

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Suicide Risk Assessment

- Warning Signs
 - Variables that signal the possible presence of suicidal thinking.
 - Especially when combined with risk factors, warning signs indicate the need for a suicide risk assessment
 - Non-Suicidal Self-Directed Violence
 - Helplessness, fatalistic despair
 - *The problem cannot be solved*
 - Hopelessness, severe devaluation/self-hate
 - *I can't solve the problem*
 - Direct threats
 - "I have a plan to kill myself"



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Risk Assessment & Referral:

Warning Signs for Suicide

- Verbal
 - Most individuals give verbal clues that they have suicidal thoughts.
 - Clues include direct ("I have a plan to kill myself") and indirect suicide threats ("I wish I could fall asleep and never wake up").

□ Behavioral

APA/MTV Fight for Your Rights:
"Warning Signs" Video



Risk Assessment & Referral:

Verbal Warning Signs of Suicide

1. "Everybody would be better off if I just weren't around."
2. "I'm not going to bug you much longer."
3. "I hate my life. I hate everyone and everything."
4. "I'm the cause of all of my family's/friend's troubles."
5. "I wish I would just go to sleep and never wake up."
6. "I've tried everything but nothing seems to help."
7. "Nobody can help me."
8. "I want to kill myself but I don't have the guts."
9. "I'm no good to anyone."
10. "If my (father, mother, teacher) doesn't leave me alone I'm going to kill myself."
11. "Don't buy me anything. I won't be needing any (clothes, books)."

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Risk Assessment & Referral: *Behavioral Warning Signs of Suicide*

1. Writing of suicidal notes (posting on social media)
2. Making final arrangements
3. Giving away prized possessions
4. Talking about death
5. Reading, writing, and/or art about death
6. Hopelessness or helplessness
7. Social Withdrawal and isolation
8. Lost involvement in interests & activities
9. Increased risk-taking
10. Heavy use of alcohol or drugs
11. Abrupt changes in appearance
12. Sudden weight or appetite change
13. Sudden changes in personality or attitude

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Risk Assessment & Referral: *Behavioral Warning Signs of Suicide*

(cont.)

14. Inability to concentrate/think rationally
15. Sudden unexpected happiness
16. Sleeplessness or sleepiness
17. Increased irritability or crying easily
18. Low self esteem
19. Dwindling academic performance
20. Abrupt changes in attendance
21. Failure to complete assignments
22. Lack of interest and withdrawal
23. Changed relationships
24. Despairing attitude

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Asking the “S” Question

Suicide Warning Signs

+

Risk Factors =

**need to conduct a suicide risk
assessment.**

- A risk assessment begins with asking if the student is having thoughts of suicide.

Identification of Suicidal Intent

- Be direct when asking the “S” question.

- **BAD**

- You're not thinking of hurting yourself, are you?

- **Better**

- Are you thinking of harming yourself?

- **BEST**

- Sometimes when people have had your experiences and feelings they have thoughts of suicide. Is this something that you're thinking about?

Risk Assessment and Referral: *Predicting: Current Factors (CPR++)*

- **Current plan** (greater planning = greater risk).
 - How (method of attempt)?
 - How soon (timing of attempt)?
 - How prepared (access to means of attempt)?
- **Pain** (unbearable pain = greater risk)
 - How desperate to ease the pain?
 - Person-at-risk's perceptions are key
- **Resources** (more alone = greater risk)
 - Reasons for living/dying?
 - Can be very idiosyncratic
 - Person-at-risk's perceptions are key

Ramsay, Tanney, Lang, & Kinzel (2004)

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Risk Assessment and Referral: *Predicting: Historical Factors (CPR++)*

- **(+) Prior Suicidal Behavior?**
 - of self (40 times greater risk)
 - of significant others
 - An estimated 26-33% of adolescent suicide victims have made a previous attempt (American Foundation of Suicide Prevention, 1996).
- **(+) Mental Health Status?**
 - history mental illness (especially mood disorders)
 - linkage to mental health care provider

Ramsay, Tanney, Lang, & Kinzel (2004)

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Risk Assessment: Levels of Risk

Low Risk:

- Passing ideation that does not interfere with activities of daily living, no desire to die (intent), no specific plan, few risk factors
- Identifiable protective factors

Moderate Risk:

- Frequent suicidal ideation with limited intensity and duration; may report some specific plans to kill self but no intent; some risk factors
- Protective factors: self-control, identifies reasons for living and other protective factors

High Risk:

- Frequent, intense, and enduring suicidal ideation, specific plans-choice of lethal means, availability/accessibility to method, multiple risk factors
- Identify few protective factors

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Erbacher, Singer, Poland (2015)

Suicide Risk Assessment Summary Sheet *Summary Sheet*

Instructions: When a student acknowledges having suicidal thoughts, use as a checklist to assess suicide risk. Items are listed in order of importance to the Risk assessment.

	Risk present, but lower	Medium Risk	Higher Risk
1. Current Suicide Plan			
A. Details	— Vague	— Some specifics	— Well thought out
B. How prepared	— Means not available	— Has means close by	— Has means in hand
C. How soon	— No specific time	— Within a few days or hours	— Immediately
D. How (Lethality of method)	— Pills, slash wrists	— Drugs/alcohol, car wreck	— Gun, hanging, jumping
E. Chance of intervention	— Others present most of the time	— Others available if called upon	— Not near anyone, isolated
2. Pain	— Pain is bearable	— Pain is almost unbearable	— Pain is unbearable
	— Wants pain to stop, but not desperate	— Becoming desperate for relief	— Desperate for relief from pain
3. Resources	— Identifies ways to stop the pain	— Limited ways to cope with pain	— Will do anything to stop the pain
	— Help available; student acknowledges that significant others are concerned and available to help	— Family and friends available, but are not perceived by the student to be willing to help	— Family and friends are not available and/or are hostile, apathetic, embarrassed
4. Prior Suicidal Behavior of...			
A. Self	— No prior suicidal behavior	— One previous low lethality attempt; history of threats	— One of high lethality, or multiple attempts of moderate lethality
B. Significant Others	— No significant others have engaged in suicidal behavior	— Significant others have recently attempted suicidal behavior	— Significant others have recently committed suicide
5. Mental Health			
A. Coping behaviors	— History of mental illness, but not currently considered mentally ill. Daily activities continue as usual with little change	— Mentally ill, but currently receiving treatment. Some daily activities disrupted; disturbance in eating, sleeping, and schoolwork	— Mentally ill and not currently receiving treatment. Gross disturbances in daily functioning
B. Depression	— Mild; feels slightly down	— Moderate; some moodiness, sadness, irritability, loneliness, and decrease of energy	— Overwhelmed with hopelessness, sadness and feelings of helplessness
C. Medical status	— No significant medical problems	— Acute, but short-term, or psychosomatic illness	— Chronic debilitating, or acute catastrophic illness
D. Other Psychopathology	— Stable relationships, personality, and school performance	— Recent acting-out behavior and substance abuse; some suicidal behavior in stable personality	— Suicidal behavior in unstable personality; emotional disturbance; repeated difficulty with peers, family, and teacher
6. Stress	— No significant stress	— Moderate reaction to loss and environmental changes	— Severe reaction to loss or environmental changes
Total Checks			

Interviewing the Suicidal Student

- Initial 3/4 of intervention is active listening
- Final 1/4 is being active in taking control, being the "expert"
- Try to change at least one thing for student
 - Pick one current stress that is easy and quick to change
 - This can give student hope
- Direct emotional traffic

Interviewing the Suicidal Student

- Be direct
- Explore current stresses (school, home, community)
 - Look for evidence of tunnel vision, hopeless/despair, free-floating rage
 - Look for impulsiveness, drug/alcohol use, behavior problems in school
 - Look for all risk factors
 - Look for evidence of a plan, practice behavior



Interviewing the Suicidal Student

- Be aware of personal space, usually close physically to student
- Don't use rapid-fire style of questioning
- Ask "How do you survive, take care of yourself?"
- Goals: find out information, establish therapeutic relationship, clarify their thinking

Interviewing the Suicidal Child

Elements of interview:

1. Engagement
2. Identification – suicidal ideation
3. Inquiry –
 - plan, level of pain (physical & emotional), prior suicidal behavior, history mental illness
4. Assessment – determine level of risk and consult
5. Prior Behavior
6. Resources

Brock & Sandoval (1996); Brock, Sandoval, & Hart (2006)

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Interviewing the Suicidal Child

8 categories to assess:

1. Suicidal fantasies or actions
2. Concepts of what would happen
3. Circumstances at the time of the child's suicidal behavior
4. Previous experiences with suicidal behavior
5. Motivations for suicidal behaviors
6. Experiences and concepts of death
7. Depression and other affects
8. Family and environmental situations

[Handout: Suicide Assessment Questions](#)

Pfeffer (1986)

Interviewing the Suicidal Student

- Ask about:
 - Background information/prior attempts
 - Be aware of the "underground of information"
 - This may be best chance to find out accurate info
 - Contagion
 - Who has influenced this situation
 - Who is this situation influencing
 - Who else do you know that's done/thought about this?"
 - "Who else have you told?"
 - May need immediate interviews
- Check status of siblings, best friends, relatives
- Look for suicide pacts

Interviewing the Suicidal Student

- Is self-injurious or threatening behavior a possibility?
 - Communication of intent
 - Lack of impulse control
 - Mismatch of youth and environment
 - Dramatic change of affect
- Might the urge to injure self be acted upon?
 - Is there a plan, what is goal of plan
 - Degree of impulsivity
 - Previous history/attempts

Interviewing the Suicidal Student

- How imminent is the possibility of action?
 - Sense of urgency-lack of control
 - Accessibility to a method
 - Is the method in character
 - A note written
- Are there contra-indications to the action?
 - Support system, self-esteem
 - Seeing options, cognitive rehearsal, flexibility

Interviewing the Suicidal Student

- Explore current resources, strengths, contraindications
- Contraindications can include
 - Support system (even if unrecognized)
 - Ability to see options and problem-solve
 - Can do cognitive rehearsal, some flexibility
 - Level of self-esteem, future thinking
 - Can connect with intervener
 - Urge situation specific

Interviewing the Suicidal Student

- Tell student you will need to contact parent
 - At end of interview
 - If student asks earlier, don't lie
 - "My job is to keep you safe"
- Judge student reaction
 - Get student input on how to do this (not whether)
 - This leaves some control for student

Standardized Risk Screening Tools

- Beck Scale for Suicidal Ideation (BSI)
 - 21 item self-report for adolescents
 - Best to detect and measure severity of ideation
 - One of the only scales to assess between active and passive ideation
 - <http://www.pearsonassessments.com/HAIWEB/Cultures/en-us/Productdetail.htm?Pid=015-8018-443&Mode=summary>
- Suicidal Ideation Questionnaire (SIQ)
 - Severity or seriousness of ideation (Reynolds)
 - Two version for 7-9th and 10-12th grades
 - Draw-back: No item regarding past or current suicide attempts
 - <http://www4.parinc.com/Products/Product.aspx?ProductID=SIQ>

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 - Risk Assessment

Intervention, Referral & Postvention

- Conclusion

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Referral

- Whenever a student judged to have some risk of engaging in other- or self-directed violence, a school-based mental health professional should conduct a risk assessment and make the appropriate referrals.



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Designing Action Plans & Interventions

- Solutions Equal to the Level of Concern
- Build the plan as a team
- Trees, Treatment, Monitoring, Protection
- Give consequences (if appropriate), but also build skills and support
- Document your plan
- Monitor, monitor, monitor

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School-Based Intervention

- Mental Health Professional Risk Assessment and Referral Procedures
 1. Identify suicidal/harm to others thinking
 2. From risk assessment data, make appropriate referrals
 3. Risk Assessment Protocol
 - a) Conduct a Risk Assessment.
 - b) Consult with fellow school staff members regarding the Risk Assessment.
 - c) Consult with County Mental Health and/or law enforcement.

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School-Based Intervention

- Mental Health Professional Risk Assessment and Referral Procedures
 4. Use risk assessment information and consultation guidance to develop an action plan. Action plan options are as follows:
 - A. **Extreme/High Risk**
 - B. **Crisis Intervention Referral (Moderate Risk)**
 - C. **Mental Health Referral (Low Risk)**

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School-Based Intervention: Extreme/High Risk

[Suicide Script](#)

Mental Health Professional Risk Assessment and Referral Procedures

A. Extreme/High Risk: If the student has the means of his or her threatened behavior at hand, and/or refuses to relinquish such then follow the Extreme Risk Procedures.

- i. If a weapon immediately call SRO/police.
 1. Calm the student by talking and reassuring until the police arrive.
 2. Continue to request that the student relinquish the means of the threat and try to prevent the student from harming self/others (if own safety at risk, remove yourself from imminent danger).
 3. Call the parents and inform them of the actions taken
- ii. If no weapon but intent and access, conduct risk assessment and call parents immediately
 1. Arrange with parents, law enforcement, or other professionals to transport student to hospital or outpatient community mental health center

always discuss with parents so they have a better understanding of possible interventions and reintegration

Erbacher, Singer, Poland(2015)

School-Based Intervention: Moderate Risk

[\(Sample Progress Monitoring & Graph\)](#)

Erbacher, Singer, Poland(2015)

Mental Health Professional Risk Assessment and Referral Procedures

B. Crisis Intervention Referral: If the student's risk of harming self/others is judged to be moderate do same as low risk, plus....

- i. Determine if distress is the result of parent or caretaker abuse, neglect, or exploitation - if so call child protective services or police
- ii. Meet with the student's parents.
- iii. Create a safety plan
 1. Determine what to do if the parents are unable or unwilling to assist with the suicidal crisis.
- iv. Coordinate with parents and make appropriate referrals
- v. Identify school-based supports- increase frequency of visits with school-mental health professionals- give the student a high priority for a Student Success Team Meeting.
- vi. Reevaluate for risk every meeting - identify if moving into low or high risk category Keep regular phone contact with parents and community mental health provider; Other possible options: review of meds, family therapy, access to crisis services and hotlines

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Responding to Moderate Risk Youth

- Consider the need to revise student's behavior contract and/or to conduct a more in-depth functional assessment.
- Obtain parental permission to exchange information with the appropriate community agencies to determine if student is eligible for additional services.
 - If available, call a meeting with other agency personnel to focus on provisions for wrap-around intervention and support for the student and family.
- Develop an action plan for immediate interventions that includes provisions for increased supervision.

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Postvention: Skill Development & Relat. Building

- Implement prevention & intervention programs
- Direct teaching of skills (anger management, conflict resolution, social skills)
- Direct academic support
- Changes of placement to access additional resources
- FBA/BIP
- Support in and out of school
- Participation in school activities/clubs
- Mentoring
- Family resources
- Special education as appropriate

Kanan & Lee, 2005

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Monitoring Measures

- Check-in/check-out
- Random checks
- Track attendance
- Modify schedules (reduce free, unsupervised time)
- "No contact" agreements
- Community agency involvement
- Communication between staff, parents, and others
- Probation, parole, tracker, ankle monitors
- Review student's response to monitoring
- Fade monitoring as appropriate

Kanan & Lee, 2005

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Discipline Considerations

- Suspension
- Expulsion
- Detention
- Apologies
- Behavior contracts
- Removing privileges
- Use of policies: willful disobedience, insubordination, expulsion review process
- Ticketing, charges, courts, probation
- Incarceration

Kanan & Lee, 2005

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School-Based Intervention: Low Risk

- Mental Health Professional Risk Assessment and Referral Procedures
 - c. **Mental Health Referral:** If the student's risk of harming self/others is judged to be low then follow the Mental Health Referral Procedures.
 - i. Notify parents
 - ii. Create a safety plan
 - iii. Identify school-based supports
 - iv. Coordinate with parents to connect with community mental health services

Erbacher, Singer, Poland(2015)

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Informing the Parents

- Must inform parents/guardians
- Document phone call/meeting
- Evaluate parent's response
 - If damaging to child, report to child welfare and/or local police
- Parents refusing to acknowledge homicidal suicidal thoughts/actions –
 - Threat – call police
 - Suicide – can report as medical neglect
- Police can take legal custody, protective custody, or custody with an involuntary mental health hold
- Should still inform parent if feel threat is not serious
 - Actively seek additional information

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Informing Parents of a Threat Do's and Don'ts

The principal at XXX High School sent out a note to parents Thursday evening, warning them of a disturbing phone call from a parent. Extra officers were sent to the school Friday morning.

The letter from Principal XXX reads: "This afternoon, we received a call from an upset parent who said that he was 'coming down tomorrow and it's going to be like a Columbine situation.' The XXX Police Department was notified and responded immediately. You are receiving this message because the police have not yet found the person who made this terroristic threat."

It continues, "Parents have the right to be upset, but this parent crossed the line when he carelessly threatened to repeat the violence that two disturbed boys inflicted on Columbine High School on April 20, 1999 to make a point," Principal XX said. "Is it credible? That's not my call. My responsibility is to give you the facts and let you make the decision whether or not to keep your children home on Friday."

The principal said police will have additional officers at the school Friday morning for reassurance. Investigators confirmed that information Thursday night.

"If they locate this person before school resumes Friday morning, I will send another message to alert you," Principal XX writes. "I'm so sorry, folks. Bear Creek really is a great school. And your children are absolutely fabulous! That's why acts like this are so disappointing and, frankly, infuriating."

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School-Based Suicide Intervention

A Risk Assessment and Referral Resource

Substance Abuse and Mental Health Services Administration. (2012). *Preventing suicide: A toolkit for high schools*. HHS Publication No. SMA-12-4669. Rockville, MD: Center for Mental Health Services, Author. Retrieved from <http://store.samhsa.gov/shin/content/SMA12-4669/SMA12-4669.pdf>



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School-Based Suicide Postvention

1. Suicide contagion

- "...a process by which exposure to the suicide or suicidal behavior of one or more persons influences others to commit or attempt suicide."
- "The effect of clusters appears to be strongest among adolescents."



O'Carroll & Potter (1994, April 22)

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Suicide Contagion

- 12 to 13 year olds
 - 5 x's times more likely to have suicidal thoughts (suicide ideation) after exposure to a schoolmate's suicide
 - 7.5% attempted suicide after a schoolmate's suicide vs. 1.7% without exposure
- Exposed to suicide → have suicidal thoughts
 - 14 to 15 year olds 3x's more likely
 - 16 to 17 year olds 2x's more likely
- 16-17 year olds
 - 24% of teens had a schoolmate die by suicide
 - 20% personally knew someone who died by suicide

*** Critical we invest in school and/or community-wide interventions following a suicide!!**

http://www.cmai.ca/site/misc/pr/21may13_pr.shtml - study in Canada (2013)

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School-Based Suicide Postvention

1. Suicide contagion

- Sonneck et al. (1994).
 - "Surveyed all suicide cases in Vienna, Austria that were reported in major daily newspapers and analyzed them in connection with subway suicide. The number of subway suicides in Vienna increased dramatically between 1984 and mid-1987. Based on the hypothesis that there was a connection between the dramatic way in which these suicides were reported and an increase in suicides and suicide attempts, the Austrian Association for Suicide Prevention developed media guidelines and initiated discussions with the media that culminated with an agreement to abstain from reporting on cases of suicide. Following the implementation of these guidelines in mid-1987, there was a 75% decrease in subway suicides that has been sustained for 5 yrs."

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Sonneck et al. (1994, p. 453)

School-Based Suicide Postvention

1. Suicide contagion

- Suicide rates increase when ...
 - The number of stories about individual suicides increases
 - A particular death is reported at length or in many stories
 - The story of an individual death by suicide is placed on the front page or at the beginning of a broadcast
 - The headlines about specific suicide deaths are dramatic



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American Foundation for Suicide Prevention (2001)

School-Based Suicide Postvention

1. Suicide contagion

- As a consequence of "contagion" suicide clusters have been reported.
 - A suicide cluster is "... a group of suicides or suicide attempts, or both, that occur closer together in time and space than would normally be expected in a given community."
 - Contagion accounts for approx. 1-5% of adolescent/young adult suicides.
 - How do you determine if you have a cluster?
 - Establish a baseline rate or percentage.

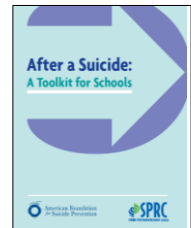
$$\frac{\text{Number of Suicides}}{\text{Population}} \times \text{selected proportion of population} = \text{Rate}$$

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CDC (1998, August 19)

School-Based Suicide Postvention

1. Verify the death
2. Mobilize the Crisis Team
3. Assess impact & determine response
4. Notify affected school staff members
5. Contact the deceased's family
6. Determine what to share
7. Determine how to inform others
8. Identify crisis intervention priorities
9. Faculty planning session
10. Provide crisis intervention services
11. Ongoing daily planning sessions
12. Memorials
13. Debrief



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American Foundation for Suicide Prevention et al. (2011)

School-Based Suicide Postvention

Consider memorials

- Do **NOT** . . .
 - send all students from school to funerals, or stop classes for a funeral.
 - have memorial or funeral services at school.
 - establish permanent memorials such as plaques or dedicating yearbooks to the memory of suicide victims.
 - dedicate songs or sporting events to the suicide victims.
 - fly the flag at half staff.
 - have assemblies focusing on the suicide victim, or have a moment of silence in all-school assemblies.

Brock & Sandoval (2006)

School-Based Suicide Postvention

Consider memorials

- **DO** . . .
 - something to prevent other suicides (e.g., encourage crisis hotline volunteerism).
 - develop living memorials, such as student assistance programs, that will help others cope with feelings and problems.
 - allow students, with parental permission, to attend the funeral.
 - Donate/Collect funds to help suicide prevention programs and/or to help families with funeral expenses
 - encourage affected students, with parental permission, to attend the funeral.
 - mention to families and ministers the need to distance the person who committed suicide from survivors and to avoid glorifying the suicidal act.

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Brock & Sandoval (2006)

Final Report of the Sandy Hook Advisory Commission (2015)

1. Form a school security and safety committee
2. Develop a mental health system that targets detection and treatment while building stronger, resilient communities of care
3. Address a fragmented and underfunded behavioral health system tainted by stigma - build a comprehensive, integrated approach to care.
4. Systems of care must attend to the factors affecting family welfare - current funding structures must be revamped.
5. Schools play a critical role in fostering healthy child development and healthy communities - actively teach!
6. Social-emotional learning must form an integral part of the preschool through high school curriculums.
7. Sequenced social development curriculum to include anti-bullying strategies and substance abuse prevention
8. Schools should form multidisciplinary risk-assessment teams

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Final Report of the Sandy Hook Advisory Commission (2015)

9. Comprehensive, developmentally appropriate continuum of care
10. If home-schooled with an identified disability, the child shall have an (IEP) approved by the special education director as well as access to special education services
 - must address difficulties and provide necessary academic reports
 - parent obligation to document progress
11. Provide psychoeducation to individuals and families to promote acceptance and decrease stigma
12. The Commission recommends the **formation of multidisciplinary teams to conduct risk assessments in schools.**
13. Information-sharing take place to adequately recognize and address needs across schools and provider settings

http://www.shac.ct.gov/SHAC_Final_Report_3-6-2015.pdf

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Documentation

Danger Assessment and Intervention Plan & Sample Documentation of Suicide Risk Intervention

- Fill out district forms - should be used by every school
- Checklists that serve as documentation for school and district that process was followed and interventions being offered
- Can also write a more in-depth report and integrate other data (i.e. BASC, FBA/BIP specific responses to interview questions....)
- Used by every school
- Copy kept at school and also sent to district office

We can make a positive difference!

(APA video)

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Other Resources

Threat Assessment: An Essential Component of a Comprehensive Safe School Program

- http://www.nasponline.org/resources/principals/nassp_threat.pdf

Threat Assessment: A Primer for Educators

- http://www.nasponline.org/resources/crisis_safety/threatassess.pdf

PENT

- <http://www.pent.ca.gov/thr/threat.html>

UCLA

- <http://smhp.psych.ucla.edu/qf/threatassessment.html>

Fairfax County Public Schools Threat Assessment Documentation

- http://rems.ed.gov/docs/repository/REMS_000053_0002.pdf

NASP Suicide Resources

- http://www.nasponline.org/resources/crisis_safety/index.aspx#suicide

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Apps

- PTSD Coach
- PFA Tutorial
- SAMSHA Disaster App
- SAMSHA- Suicide Safe
- PFA Mobile
- Mindshift (Anxiety)
- Suicide
 - ASK (Mental Health America for Texas)
 - Lifeguard (Missouri Suicide Prevention Project)
 - Also includes section for military and veterans
 - Lifebuoy
 - Daily mood diary

