



YOUTH SUICIDE PREVENTION

A Resource for
Teachers, Staff & Administrators



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This guide is provided by the Connecticut State Suicide Advisory Board
September, 2017

The Connecticut Suicide Advisory Board (CTSAB) was established in January 2012, and is composed of members from institutions of higher education, state agencies, community organizations and mental health facilities. The board was formed as a merger of the Connecticut Department of Children and Families (DCF) Suicide Advisory Board and the DMHAS/DPH Interagency Suicide Prevention Network to facilitate collaborative efforts among state partners for suicide prevention, intervention and postvention. The CTSAB meets monthly for programmatic and strategic planning to address issues related to suicide across the life span in Connecticut. The membership of the board and the Network of Care has grown steadily since its inception, with 400 members and over 150 agencies representing multiple sectors including: state and local agencies, profits and non-profits, community and faith-based organizations, hospitals, military, schools, higher education, towns, private citizens, students, survivors and advocates. Importantly, these members are committed and active, as evidenced by meeting attendance averaging 45 and with over half of the members attending six meetings or more per year.

This commitment is essential to our:

Mission: The CTSAB is a network of diverse advocates, educators and leaders concerned with addressing the problem of suicide with a focus on prevention, intervention, and health and wellness promotion.

and our

Vision: The CTSAB seeks to eliminate suicide by instilling hope across the lifespan.

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Introduction

Purpose

In recognition of the serious threat posed by suicide and the important role schools assume in reducing suicide risk and responding to crisis situations, the Connecticut Legislature passed Public Act 89-168, requiring schools to establish policies and procedures to deal with youth suicide prevention and youth suicide attempts. This manual and resource guide is to be used as a resource for schools to provide guidance to school districts as they update and revise their policies and procedures. The goal of this document is to help you recognize the signs of a struggling student and to know how to proceed once you have identified that a student is at risk. This resource is not intended to be a comprehensive manual for mental health providers, but rather a user-friendly guide for school personnel.

This document is accompanied by a *Suicide Prevention Referral Card for Educators* to assist with identifying ‘at risk’ students, and giving clear direction on how you should proceed.

I Am Not A Counselor, So Why Should I Read This Guide?

If you work in a school (*in any capacity or role*), you play an important role in suicide prevention and identification. Research shows that most people who are suicidal are ambivalent about dying and they often project signals or statements that they are contemplating taking their life. A gatekeeper is anyone who works with children or teenagers. You are a gatekeeper.

You play two important roles in preventing youth suicide. First, as a gatekeeper you may **recognize** that a youth is having difficulty and may be at risk for hurting him/herself. Second, as a helper you may take action by **connecting** with the student and assisting the student to access help.

The Role of School Personnel

Why All School Personnel Have an Important Role in Suicide Prevention

- Identification of students who are seriously at risk of self-harm is the first step in the intervention process.
- Your professional responsibilities go beyond teaching a specific subject area, but rather include an awareness of the general welfare of all students.
- Students view school personnel (*teachers, staff and administrators*) with trust. Often they look up to them as caring adults and may approach them or make them aware of suicidal intentions.
- Teachers and staff get to know students over an extended period of time. This provides valuable knowledge of normal behavior in young people, allowing staff to identify students at risk of suicide.
- Depression is a major predictor of suicidal behavior and is associated with reduced academic performance and learning problems.
- Schools often include coping skills, problem solving and stress management as part of a curriculum to address mental health issues.
- According to results from the 2015 CT School Health Survey given to high school students, it was found that 26.6% of the students surveyed felt sad or hopeless for more than two weeks, and about 8% of teens attempted suicide.

My Role as an Educator

It is important to recognize that identification is distinct from assessment and management. Classroom teachers in particular have critical role to play in the identification process. Once a student is identified with a mental health issue, possibly at risk for suicide, or already in crisis, further assessment and intervention becomes the responsibility of school mental health professionals who are appropriately qualified and trained.

Checking In & the Importance of Listening

The most important thing any adult in a school can do is to **connect** with students and keep the lines of communication open. This also involves paying attention to indirect communication. Many times a student may not necessarily directly state that they want to kill themselves, but typically students show some sign of being troubled or at risk. The key component of communication is to **listen**! Many times adults feel they don't know what to say, but most students in emotional distress just want someone to listen to them. It is okay to listen and be honest when you don't know what to say. You can reflect back what you hear the student telling you. You can explain that you will always be there to listen to the student, but you are not sure what to say and invite the student to go with you to see a counselor in the building.

Observing Students

Another vital responsibility that adults carry is to observe the students in the building. This can include all students and not simply those in your current classes. This is where knowing and understanding the warning signs becomes important. Have you noticed any changes in the student? Does the student say they are feeling fine, but appear differently to you (*i.e. sad, angry, tense*)?

What to do

If you suspect that a student is at risk, you must immediately contact a support staff member in your school and share your concern. This information can be found on the green box on the Educator Referral Card.

Your concern may be based upon outlined warning signs and risk factors

It is really important that **YOU** (*in addition to the social worker or psychologist*), follow-up with the student you referred. The student sought you out to share his/her feelings because he/she is comfortable and connected with you. They want to know that you still care.

While it is important to ensure the student is receiving the appropriate level of help with a counselor in the building, it is equally important that the student feels they are still invited to check in with you.

My Role as an Administrator

- Suicide Prevention in CT Law: Public Act 89 – 168 Requires Boards of Education to do the following:
 - a. “Adopt a written policy and procedure for dealing with youth suicide prevention and youth suicide attempts.” (*C.G.S. Section 10-220 (e)*)
 - b. “Each board of education may establish a student assistance program to identify risk factors for youth suicide, procedures to intervene with such youth, referral services, and training for teachers and other school professionals and students who provide assistance in the program.” (*C.G.S. Section 10-220 (e)*)
 - c. “Each local or regional board of education shall provide a yearly in-service training program for its teachers, administrators and pupil personnel who hold the initial, provisional or professional educator certificate.” (*C.G.S. Section 10 – 220a (a)*)
- Ensure a thorough crisis intervention and response plan exists in your school.
- Advocate for collaboration among behavioral health and medical providers and community supports.
- Ensure a safe and healthy school climate: physically, aesthetically, emotionally and psychologically.
- Seek out, create and value opportunities for students to be involved in true decision-making.
- Support and ensure the curriculum incorporates direct and indirect education designed to prevent suicide.
- Design school protocol for assisting students at risk for suicide. Including:
 - Assessing Suicide Risk using an *evidence-based screening tool*
 - Notifying Parents
 - Referring to a mental health service provider
 - Documentation of the process, including status of a referral and follow-up.

911 or 211

	911	211
When to Call	<p>Situation requires immediate medical attention (overdose, currently intoxicated, seriously injured, etc.) OR the assessment indicates that the student is at imminent risk (weapons, serious assault, etc.)</p>	<p>Situation requires additional assessment. Student is:</p> <ul style="list-style-type: none">▪ Having a behavioral crisis that's too much to handle on your own▪ Uncommunicative to you▪ Out of control or destroying property▪ At risk of acting violently or dangerously▪ At risk of threatening to hurt him/herself or others
What will happen	<p>When you call 911, police dispatch personnel will answer your call. The dispatcher will ask you a series of questions to determine if the call requires an emergency response. If an emergency response is required, you will be asked to wait on the line while an officer is dispatched to your location.</p>	<p>When you call 211, then select Option 1, and you will be connected to a trained EMPS counselor. EMPS will help resolve the crisis immediately over the phone or will come immediately to your location. EMPS responds 24 hours a day, 7 days a week. Services are confidential, and there is no cost to the family.</p>

Warning Signs for Suicide

Warning signs are **changes** in a student's behavior, feelings and beliefs about oneself that are maladaptive or out of character and place them at risk for suicide. While these warning signs vary from individual to individual, some common traits have been observed in individuals contemplating suicide. It is helpful to compare these warning signs with risk factors when trying to assess a student's level of risk. **If you observe any of these signs in one of your students, you should immediately contact your school social worker or psychologist.**

Warning Signs for Suicide:

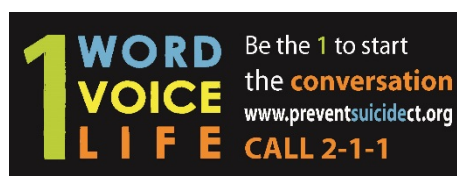
- Expressions of sadness and/or hopelessness
 - Feeling hopeless or pessimistic
 - Feeling trapped – like there's no way out
- Expression of wanting to harm him- or herself, or die
 - Feeling like there's no reason for living or having no sense of purpose in life
- Major change in affect, appearance
 - Notable change in appearance and personal hygiene (i.e. sudden weight loss or gain)
 - Increased physical complaints without any medical explanation
 - Experiencing dramatic mood changes, depression or euphoria
- Major Change in behavior (academic performance, aggression, withdrawal from peers, social isolation)
 - Feeling rage or uncontrolled anger or seeking revenge
 - Feeling anxious or agitated, being unable to sleep or sleeping all the time
 - Acting reckless or engaging in risky activities – seemingly without thinking
 - Withdrawal from friends, family and activities; giving away possessions; making a will
 - Increasing alcohol or drug use
- Struggling to keep up with routine

Risk Factors For Suicide

The following supplement is designed to provide more in-depth information concerning some of the more important **risk factors** for suicide. Risk factors are unhealthy behaviors, compromised coping skills and negative aspects of a person's home and school life that increase the likelihood that the student may hurt him/herself. Risk factors do not mean that someone will definitely hurt themselves, but rather, indicate that a student is at greater risk.

- Students who previously attempted suicide or who know someone who died by suicide
- Students with a mental health concern
 - Students who suffer from psychiatric problems (depression, bipolar, schizophrenia, personality disorder, eating disorder) often have a distorted view of themselves and their environment, which can increase suicidal thoughts or behaviors.
- Victims of abuse or harassment
 - For an adolescent, avoiding “loss of face” is a major risk factor. A student who feels humiliated by embarrassment, exposure to bullying (either in person or online) or social isolation is at severe risk.
- Students who harass or abuse others
- Students who are gay, lesbian, bisexual, transgender, or questioning their sexuality
 - Students who are questioning their sexual orientation or who are isolated or attacked for being gay, lesbian or transgendered, are at high risk for suicide when they are in an unwelcoming and unaccepting environment either at home or school. Schools have a responsibility to ensure that all students feel safe by not allowing derogatory names to be used to reference any minority group.
- Students who abuse alcohol or other drugs
 - Self-medicating with alcohol and drugs is common, but often doing so increases feelings of suicidality. More than 50% of teen suicides involve drug and alcohol use.
- Students who are highly aggressive or impulsive
 - (decision making, problem solving, conflict and anger management) Students who are quick to act, and who have difficulty thinking things through, are more prone to suicide. These students are especially at risk when they are driving a car.
 - A student who reacts in this manner is more likely to engage in dangerous behaviors; suicide or homicide could be the result. Teenagers struggling with compulsive gambling issues are also at increased risk.
- Perfectionists and high-achievers, or potential dropouts
 - For some students, anything less than perfect leads to suicidal ideation. Students who are perfectionistic are typically self-driven and are often overlooked by adults. Due to the fact that they excel in so many areas, adults may not pick up on the possibility of any underlying emotional issue.
 - Students often avoid what makes them feel unsuccessful. When they feel that there is “no way out,” they are at risk for suicide
- Students dealing with a recent loss in the family, including pets
 - Students have limited resources to deal with these issues and can most certainly benefit from counseling. Grief can increase a student's risk of suicide.
- Students experiencing stressful life events (divorce/separation, move, parent loss of job)
 - Unpredictable life events can lead to insecurity and increased risk.
- Students that do not have an adult to go to for help
 - Students seek help from their friends and often avoid adults. Stigma and embarrassment often impede a student's willingness to initiate accessing services. In some cases, students' concerns are discounted by adults and they are unable to access care.

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The Suicide Prevention Referral Card for Educators

This guide is intended to be used as a companion to the *Suicide Prevention Referral Card for Educators*. The Card is a tool for schools to provide guidance to staff when a student at risk for suicide is identified. The goal is to help educators recognize the signs of a struggling student and to know how to proceed once you have identified that a student is at risk. These resources are not intended to be a comprehensive plan, but rather a user-friendly guide for school personnel.

Plan of Action:

- Identify a person/role/department in the school building that will be the “go to” person/role (*listed in the green box*)
- Identify teachers/educators who will participate in pilot implementation (this does not need to be a school-wide implementation for pilot project)
- Use the card – review it and follow the protocol listed in the green box, if needed

During our initial roll out of the Card and Guide, we are asking for feedback from schools.

Follow-up survey:

We hope to contact you in order to provide feedback on:

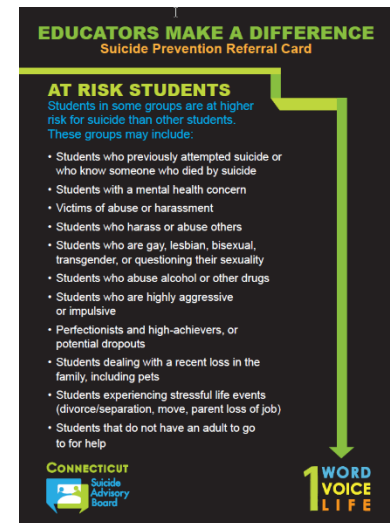
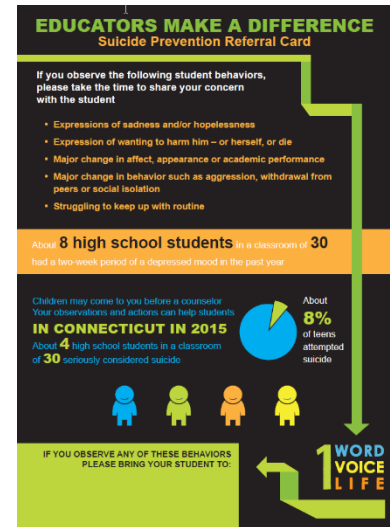
- Understanding of how to use the card
- Where you kept the card
- How often you referred to it
- How helpful was it, and which information was most helpful
- Was there anything you would change, e.g., information not necessary, items you would like to add, lack of clarity with items, and any other suggestions you may have.

Confidentiality:

We will not be collecting student identifying information, and will not be sharing your responses.

What we are doing with the information collected:

We will be using the information you provide in the survey to make edits to the card and guide, and refine our process for a statewide roll out. Your feedback is valuable to us, and we appreciate your assistance.



Resources

- **Emergency Mobile Psychiatric Services (EMPS)** **2-1-1, option 1**
If unable to access 211 from school, call: 1-800-203-1234
Situation requires additional immediate assessment.
- **National Suicide Prevention Lifeline** **(800) 273-TALK**
www.suicidepreventionlifeline.org
- **Crisis Text Line** **Text 741741**
www.crisistextline.org
- **Gay & Lesbian Youth Crisis / Suicide Hotline** **(866) 488-7386**
(*The Trevor Project*) www.thetrevorproject.org
- **TurningPointCT.org** **<http://turningpointct.org>**
- **CT Suicide Prevention** **(800) 273-TALK**
www.preventsuicidect.org

Websites:

CT Suicide Advisory Board: www.preventsuicidect.org
American Foundation for Suicide Prevention (AFSP): www.afsp.org
Suicide Awareness Voices of Education (SAVE): <https://save.org/>
Survivors of Suicide: www.SurvivorsofSuicide.com
Screening for Mental Health, the ACT® message: www.StopaSuicide.org
SAMHSA SAFE-T Card: <https://store.samhsa.gov/shin/content/SMA09-4432/SMA09-4432.pdf>
Suicide Prevention Resource Center (SPRC): www.sprc.org

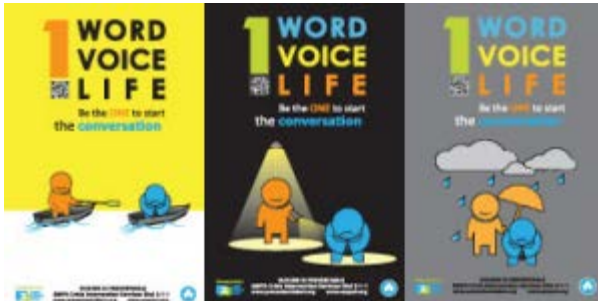
If your school or district is interested in additional resources, trainings, or assistance for post crisis follow-up please visit the CT Suicide Advisory Board webpage:
www.preventsuicidect.org

Materials

The following materials are examples of items available through the CT Suicide Advisory Board.
<http://www.preventsuicide.org/materials/>

Posters

2 sizes available



Brochure

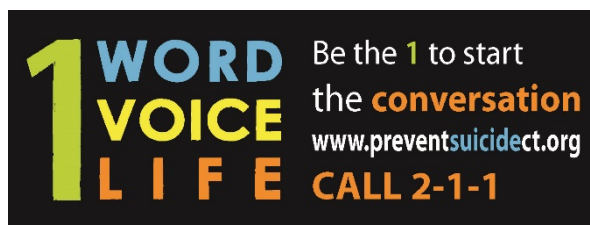


Outside

Inside

Stickers and promotional items





SUICIDE IS PREVENTABLE

EMPS-Crisis Intervention Services
Dial 2-1-1

www.preventsuicidect.org • www.empsct.org

1-800-273-8255
National Suicide Prevention Lifeline

