Well Aware
A Suicide Prevention Bulletin for Wisconsin School Administrators

Volume I | Issue 1
Winter 2007

Devoted To:

- *Improving academics*
- *Deterring violence*
- *Fostering resiliency*
- *Enhancing coping skills*
- *Reducing risk*
- *Preventing suicide*

Boosting academics [screening makes sense]

Educating and protecting students—it's the role of Wisconsin schools, and it's mandated by state legislation. So screening for barriers to good health—including mental health—makes good sense, especially as schools aggressively seek ways to deter violence and self-harm.

"We screen for **HEARING** because it's key to learning.
We screen for **VISION** because it's key to learning.
We screen for **MENTAL HEALTH** because it's key to learning."

Words by: Marian Sheridan, RN, administrator of health and safety for the Fond du Lac District, referring to her district's nationally-recognized screening of students for mental health and suicide risk.

Program: The Columbia University TeenScreen Program, a research-based, award-winning program to identify youths at risk for depression and other mental disorders that can lead to suicide.

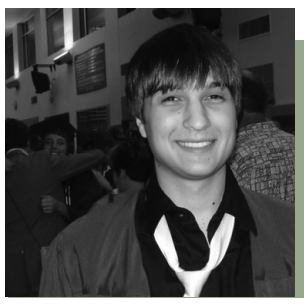
Noteworthy: Fond du Lac was the first district in Wisconsin to use TeenScreen; it is now in its 5th year.

Supporting statistic: A 2005 district survey found that 25 percent of teens surveyed felt so overwhelmed that they considered suicide in the past year.

Rationale: Early detection of these disorders is key to better outcomes: emotionally, physically, and academically.

Funding: Federal grants, including from the Health Resources and Services Administration, plus state grants and monies from local foundations.

Her words to other administrators: "Mental health problems are barriers to academic success. Do we know who the kids are that have these problems? We know those that are in our face. But this tool takes a look at all kids, even those under the radar—the ones that are suffering in silence. It picks up mood disorders. It flags anxieties, kids that are self-medicating with drugs or alcohol."



[take note]

THEN: An "unlucky boy" in 4th grade who felt that everything was going wrong.
NOW: A thriving college freshman at UW Oshkosh.
HOW: A mental health screening in high school.

SEE STORY BELOW

Learn more: Well Aware at talkback@wellawaresp.org; Marian Sheridan at sheridanm@fonddulac.k12.wi.us or 920-906-6548. Visit teenscreen.org and sprc.org for information on evidence-based programs.

School and family partner in prevention [case in point]

Even a family as engaged and medically savvy as the McCulloughs of Fond du Lac didn't recognize signs for suicide in youngest son Nicholas (left).

She is a nurse. He is a physician, board certified in family practice. Together they have five children. Yet, like many adults, they were unable to see the signs of mental illness and potential for suicide in a child—their own youngest son. "My son's worst memories were in the fourth grade when he came in last in the mile run. He remembers being laughed at by his classmates and teacher. Six years later he was an inpatient at St. Elizabeth Hospital Adolescent Psychiatric Unit after making plans to commit suicide," says Fond du Lac mom Peggy McCullough of her son Nicholas. That pivotal event in fourth grade had tormented Nicholas for years. "He talked about it as a point in his life where he had become an 'unlucky boy' and everything started to go wrong," adds Peggy. She cites symptoms her son exhibited as he entered middle school: losing interest in friends, falling grades. By high school, Nicholas was engaging in self-injurious behavior, thinking about suicide, self-medicating with drugs and alcohol, and not eating. "We're a medical family. If anybody should know what to do, it should be us," Peggy says. She credits a mental health screening that Nicholas had in ninth grade at Fond du Lac High School for saving his life—literally. "Is my son a better person for going through this? I don't think so. It would have been better if it had never happened at all," adds Peggy of the long road Nicholas has traveled including hospitalization and treatment. "But I'm convinced the school-based screening he had gave me the tools to save my son's life."

A bulletin for WISCONSIN education leaders including:

- School Board Members
- Superintendents
- Principals
- Student Services Directors
- Central Office Administration
- Deans of Students

WELCOME TO WELL AWARE

A message from State Superintendent Elizabeth Burmaster

I am pleased to introduce the Well Aware™ newsletter to you. It is a cooperative effort of the Wisconsin Department of Public Instruction and The Mental Health Association in Milwaukee County to raise awareness among school leaders of the serious problem of youth suicide, and to lend support to local prevention efforts. Two more issues will be published this academic year.

Why worry about youth suicide? Suicide is the 2nd most common cause of death among adolescents in Wisconsin. We have the 11th highest rate of any state; almost one in five teens seriously considers suicide.

The stories told by those left behind when a young person makes what is usually an impulsive, confused decision are compelling.

They talk about all kinds of young people: a high achiever unable to overcome a disappointing test score, a "lost kid" obsessed with dying, or a student that no one knew was taking depression medication. Suicide impacts students from all social and economic levels.

What can school leaders do? Schools are required to provide content-specific suicide prevention instruction (WI 118.01). Ideally, your health education staff are using a high-quality curriculum, such as the suicide prevention unit of instruction developed by our department, to meet the requirements. In addition, every school could include strategies such as all-staff training, screening, referral, support groups and parent education as parts of a comprehensive suicide prevention effort.

I encourage you to take a few moments to learn more in this publication, and then please pass it along to other school leaders. Working together, we can reduce youth suicides in Wisconsin.

Elizabeth Burmaster
State Superintendent of Public Instruction

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[creative curriculum]

CLASS ACT

Applying emotional perspective to literature can enrich learning and educate students about relevant mental health issues

New Richmond English 9 teacher Deena Neumann teams with Paula Gretzlock in Guidance to deliver a compelling lesson in mental illness and suicide prevention by analyzing the Shakespearean classic Romeo and Juliet.

PHOTO COURTESY OF BENJAMIN RIERMANN, 9TH GRADER, NEW RICHMOND HIGH SCHOOL

Integrating mental health education with general classroom instruction is a good thing, according to Paula Gretzlock.

"Any way to get in front of the kids in a natural setting—instead of in the guidance office with its stigma—can really make a difference," says Gretzlock, a guidance counselor at Wisconsin's New Richmond High School. An example is New Richmond's Deena Neumann, who teaches English 9, and combines a literature classic with a lesson in suicide prevention.

The lesson is Shakespeare's *Romeo and Juliet*. Applying a modern mental-health perspective to this Shakespearean classic reveals youth impulsivity, self-harm taken to the extreme—and potential glorification of suicide. Through a collaboration between academics and guidance counseling, students learn much more than an English Literature class typically serves up including making the connection between depression and suicide. They also learn about:

- Depression, at-risk behaviors and suicide in this classic piece.
- How self-destructive thoughts and acts can be a continuum, and how starting down that road can lead them to unsafe places, thoughts and impulsive acts.
- Judging how serious a situation is, and when and how they should intervene.

The students also explore alternate endings, changing characters' actions and considering how this can change the outcome of the story.

Another advantage of this academic/guidance collaboration? Minimal resources, with nominal effect on budgets and staffing. The partnership also opens dialogue and breaks down stigma surrounding mental illness, allowing students to speak about perceived "off limits" topics.

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Would you like to be added to our mailing list?
Contact us at:
talkback@wellawaresp.org

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It doesn't add up [do the math]

67%

Wisconsin school psychologists surveyed by WSPA in 2005 who cited student mental health problems as the biggest challenge they face professionally.

SOURCE: Wisconsin School Psychologists Association

71%

Wisconsin teachers who say they would like to receive staff development on youth suicide prevention—the second most common area of need they cited.

SOURCE: 2004 School Health Education Profile (SHEP)

26%

Wisconsin teachers who actually received staff development (in-service, workshops etc.) on youth suicide prevention in the last two years.

SOURCE: 2004 School Health Education Profile (SHEP)

Be well aware [resources and help]

Being proactive in suicide prevention can reap real rewards for schools. The Wisconsin Department of Public Instruction is here to help. We're partnering with The Mental Health Association in Milwaukee County to bring you tools to make your school a safer, healthier place for all, and to offer resources to address unmet needs for staff development.

MENTAL HEALTH MATTERS

Consider this: In a typical high school classroom, it's likely that two students have made a suicide attempt in the past year. Research shows that mental illness—often undiagnosed or untreated—is present in about 90 percent of those who die by suicide. To assist schools, DPI offers suicide prevention workshops that discuss proven models for prevention. Workshops are free and locally delivered; they include curricula for middle- and high-school health classes, crisis response planning and screening for suicide risk, plus assessment and action planning. Want to learn more? Contact John Humphries with the Wisconsin DPI at 608-266-7189 or john.humphries@dpi.state.wi.us.

MHA ASSISTS SCHOOLS

While schools are uniquely positioned to address suicide prevention in youth, their efforts will be enhanced as part of a broader community coalition. Through its *Garrett Lee Smith Memorial Youth Suicide Prevention* grant, The Mental Health Association in Milwaukee County is developing materials to help communities collaborate on youth suicide prevention. MHA has also developed a toolkit to complement DPI materials on youth suicide prevention. For information contact Brenda Jennings, project coordinator, at 608-441-8980 or brenda.mha@tds.net.

EVIDENCE-BASED RESOURCES

Have you checked out the Suicide Prevention Resource Center, a federally-funded national clearinghouse? Visit sprc.org for prevention basics, national and state data, evidence-based programs, fact sheets specific to age, gender and ethnicity, plus an online library. SPRC can assist with building coalitions, finding funding and providing examples of strong coalitions nationwide. It's a great resource for schools.

[talk back]

What is your biggest barrier to implementing suicide prevention in your school?

Time … resources … adeptness … backing or support … risk or legal concerns? Let us know at **talkback@wellawaresp.org.** And tell us what you think of the **Well Aware** newsletter, a suicide prevention resource for Wisconsin school leaders and administrators.

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