

Devoted To:

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

Legal lessons [protecting students and schools]

The statistics are troubling, and they're borne out in grounded research: In a typical high school classroom, it's likely that three students have made a suicide attempt in the past year.

What's more, a prior suicide attempt is one of the strongest indicators for dying by suicide. So when vulnerable students in your district ponder death as a way out of their problems, schools need to act—with swiftness and conviction—to protect both students and systems.

One barrier? Fear that asking teenagers about suicide will make them more likely to contemplate it. Yet groundbreaking research, released in 2005 in the "Journal of the American Medical Association," dispels this fear as unfounded (see message from the study's lead researcher at right).

Identifying youngsters who may be considering self harm isn't as easy as it sounds. Children who contemplate suicide do not fit any stereotypical mold. They're not always the low achievers. They're not always from broken homes. They don't always display conduct disorders. But one thing most do have in common is a psychiatric disorder—something that crosses all social and economic classes.

Wisconsin schools are mandated under State Statute WI 115.365 to deliver programs that:

1. **"Assist minors** in the positive emotional development which will help prevent suicidal tendencies."
2. **"Inform minors,** school staff and parents of conditions which indicate suicidal tendencies."
3. **"Take proper action** when there is reason to believe that a minor has suicidal tendencies or is contemplating suicide."
4. **"Coordinate with the** suicide prevention and intervention programs and activities of other state and local agencies."

To fulfill on these state directives and protect their



When a troubled student appears at the door of a school administrator, that administrator is required by state law to provide services to "assist in positive emotional development that will help prevent suicidal tendencies." So Wisconsin school administrators must equip their staffs with evidence-based tools and policies to deliver what the state mandates—and what students deserve.

districts from culpability, school administrators must be proactive in identifying and instituting programs that are sound and sustainable. Moreover, they must see to it that staff follows these programs and protocols to protect students and systems from harm.

Failure to do so does not bode well for school districts (see Landmark Court Cases below).

"Districts have a responsibility for providing adequate staff training in suicide prevention," notes national school crisis specialist Richard Lieberman, MA, NCSP. "While most courts recognize that schools are not equipped to provide in-depth counseling of children, courts hold that school personnel are in a position to make referrals—and have a duty to secure assistance from others, including parents, when a child is at risk."



Landmark Court Cases

Eisel v. Board of Education of Montgomery County 597 A.2nd 447 Maryland, 1991 determined that even when a student denies suicidal intent (as can often occur), a collaborative school team has an obligation to notify parents if the team suspects the child to be suicidal.

Wyke v. Polk County School Board 11th Cir., 1997 found the school district liable for not offering suicide prevention programs, providing inadequate supervision of a suicidal student, and failing to notify parents when their children were suicidal.

A bulletin for **WISCONSIN**
education leaders including:

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

DON'T FEAR SAYING THE 'S' WORD *Evidence-based data from national expert*

Asking teens about suicide. It's something many adults fear. Yet research* shows that, when addressed appropriately, speaking of suicide can counter stigma that often



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impedes treatment. In fact, our research shows that asking high school students about suicide clearly didn't induce stress, but

actually relieved somebody in distress. This unfounded fear of talking of suicide is an astounding impediment to prevention programs. Kids think they can handle these matters on their own, yet they're often waiting for someone to ask them. As a researcher who has spent more than X years studying youth suicide, I'm encouraged by this *Well Aware* newsletter. I applaud this collaborative effort between the Wisconsin DPI and Mental Health Association, and the vital work that school administrators do in shaping the future of our children, our schools—and our society.

*Evaluating Iatrogenic Risk of Youth Suicide Screening Programs: A Randomized Controlled Trial. Gould MS, et al., JAMA 2005; 293: 1635-1643.

Getting into the ACT

A critical aspect of the Signs of Suicide (SOS) program is the acronym ACT: Acknowledge, Care and Tell. Schools are encourage to repeat the acronym throughout video presentations and discussions to encourage student recollection.

- A**cknowledge: Students are asked to look for signs of depression or suicide in a friend(s).
- C**are: Students are asked to tell the friend(s) that they care for him or her, and that they are concerned that the friend needs help.
- T**ell: Students are asked to then tell a trusted adult, either with the depressed or suicidal friend or on his or her behalf.

Help signals [boosting student resiliency]

Very rarely has Marcia Creasey assumed the worst during her 18-year tenure as River Valley School District's school nurse, yet as the years passed she had an unshakable feeling that her district was not equipped to help a depressed student, much less one that was suicidal.

"When I read about Signs of Suicide (SOS), I thought it could provide answers to this problem," says Creasey, who along with the school's Pupil Services Team convinced the district to implement the program six years ago.

Her youth suicide fears are well-founded.

Consider this: Per 100,000 Wisconsin students between the ages of 15-19, 10.9 complete suicide, a rate higher than the national average of 7.8. Thus, it's no wonder many Wisconsin schools are implementing the suicide-prevention program and its central tenets: creating a supporting and responsive environment for teens possibly at risk for depression or suicide by teaching them the warning signs of both.

SOS is one-half presentation, one-half mental health screening, with the former featuring a video that delves into teen depression and suicide warning signs; the video supplies interviews with real teens who attempted suicide, friends and family of suicidal teens, and school counselors who provide tips on how to help depressed or suicidal peers. Afterward, students discuss depression and suicide in real terms—a step that helps reduce the stigma of both.

Students are then screened for depression and suicide through a seven-question query that can unearth possible depressive thoughts or suicide ideation. The point of the program, much like the



[take note]

WHO: Marcia Creasey, School Nurse
WHERE: River Valley School District
WHAT: Helped implement Signs of Suicide program
SEE STORY BELOW

Columbia University TeenScreen program (profiled in last issue), is clear: an open dialogue with students about depression and suicide reduces the stigma of both and engages young people on the importance of their worth to society.

"We're trying to operate in a prevention mode rather than a reaction mode," says Jamie Benson, Superintendent of River Valley High School in South Central Wisconsin. "SOS helps students build resiliency skills, which is part of an overall program here that focuses on reducing suicides, drug and alcohol abuse, and other destructive behavior."

Learn more: Contact Brenda Jennings of MHA of WI at brenda.mha@tds.net for more on instituting evidence-based programs in schools.

Crisis mode [Menasha responds]

The Menasha high school sophomore with an athletic prowess that allowed him to excel in every sport he touched and a high Q rating that propelled him to class president also had another talent: an ability to hide mental illness.

When this student completed suicide in Jan. 2006, school administrators were grateful they had implemented a sound crisis response program 15 years earlier to deal with a scenario just like this.

"It reaffirmed the need to have a plan in place," said Fred Taylor, school psychologist with The Menasha Joint School District. "If you wait to react to a crisis after it occurs, you're behind the 8-ball. You should plan, have people trained, and know how to implement the plan."

Like any school-based initiative, the plan was grounded in evidence-based procedures; it follows guidelines by the National Association of School Psychologists (nasponline.org) and the Wisconsin Department of Education. And it also needed support from the top-down.

“ If you wait to respond to a **CRISIS** after it occurs, you're behind the 8-ball. You should **PLAN**, have people trained, and know how to **IMPLEMENT** the plan. ”

— Fred Taylor, School Psychologist, Menasha Joint School District

Pupil Services Administrator John Roch, who initiated the crisis response plan 30 years ago, convinced school administrators that such a program was vital in responding to crisis situations. Back then, it was considered an investment in developmental guidelines and pupil services and was also one of the first developmental guidance programs in the state.

Suicide prevention is part of Menasha's formal crisis management plan as the district utilizes Signs of Suicide (SOS) in its curriculum.

Moreover, the crisis response plan is evolving: After the recent suicide, administrators discussed how effective the crisis response plan was at managing the emotional toll on students and what needed to be improved in the future.

When crises occur, Menasha has showed it has the infrastructure in place to react quickly to the problem, yet the district continues to refine its crisis plan until it is perfected.



[changing course]

Evolving crisis plan makes sense

Static is not a word that describes Horace Mann Middle School's Crisis Plan. Nimbleness is more apropos.

"We keep our eyes and ears open and constantly review our crisis plan, its processes and update it to reflect current problems," says Russ Groblewski, principal of the Sheboygan County school.

For instance, when word got around that students were playing the so-called choking game—the self-asphyxiation activity that has grave consequences—the Building Consultation Team immediately convened to address the problem. Further, the school subsidizes its crisis team with ad hoc committees that respond to specific problems or situations; this decentralized process allows the school to tackle challenges quickly, says Groblewski.

This mindset also extends to suicide prevention: When students exhibit suicidal tendencies, Horace Mann acts quickly. Of the 15 Chapter 51 emergency detentions issued in Sheboygan County in the past two years, 11 were issued to Horace Mann students.

"Suicide is not an issue we take lightly. We never underestimate a statement that a student makes," says Groblewski. "We have a culture here of reporting self-inflicted cuts and other dangerous behavior to parents and the appropriate agencies."

In fact, the school creates highly individualized plans for students deemed suicidal and communicates the plan to all teachers, counselors and other key stakeholders.

"Responding to a crisis is not one person's responsibility here, it's everybody's responsibility," adds Groblewski.

Well Aware

A Suicide Prevention Bulletin for WISCONSIN School Administrators

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

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Well and good [resources and help]

Self-destructive thoughts and acts among youngsters—including potential for suicide—are not rare. Nor are they isolated. In fact, research shows that these thoughts often go hand-in-hand with poor academic achievement, social isolation, self-medicating with drugs or alcohol, promiscuity, eating disorders and other impediments to student achievement and success. The Wisconsin Department of Public Instruction is here to help. In partnership with The Mental Health Association of Wisconsin, we're bringing you tools to make your school a safer place—and your students the best they can be.

MINIMIZING EXPOSURE

National school crisis expert Richard Lieberman, MS, NCSP, featured in this issue's cover story, has written extensively on suicidal students and best ways for schools to intervene. As co-chair of the National Emergency Assistance Team of the National Association of School Psychologists (NASP), Lieberman has coauthored books including *Best*

Practices in School Crisis Prevention (2002, ISBN: 0-932955-84-3) and a chapter on suicide intervention in *Best Practices in School Psychology IV* (ISBN: 0-932955-84-3). Currently Lieberman is coordinator of the Suicide Prevention Unit for the Los Angeles Unified School District. He can be reached at (PHONE) or (EMAIL).

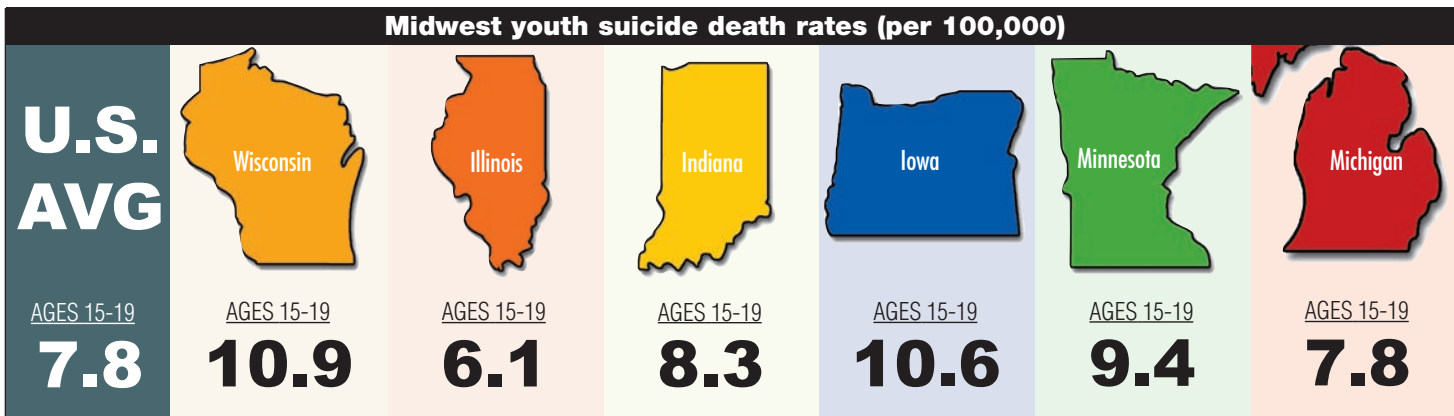
GUIDING YOUR EFFORTS

School-based suicide prevention programs can include suicide-awareness curricula, screening, gatekeeper training, peer helper programs, postvention/crisis intervention or skills training. Care should be taken when selecting a program because some have not been shown effective. To help guide school administrators, researchers at the University of Florida have released a comprehensive evidence-based tool kit; it is available online at theguide.fmhi.usf.edu.



Mental note [classroom struggles?]

Research has shown that 11% of youngsters have trouble in school because of a mental illness. In Wisconsin, this number is likely even greater, evidenced by a troubling rate for youth suicide: In our state suicide is the second-leading cause of death for adolescents age 15 to 19. According to these numbers, teens in neighboring states fare a bit better:



[talk back]

How concerned is your school district about legal liability when helping a depressed or suicidal student? What strategies and procedures does your crisis management team employ when encountering at-risk scenarios? Let us know at talkback@wellaware.org. And tell us what you think of **Well Aware**, a suicide prevention resource for school leaders and administrators.

